THE EMBODIED EXPERIENCE OF *THE KNOWING FIELD*:

FOCUS ON INDIVIDUAL PSYCHOTHERAPY

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ABSTRACT

This IPA research was designed to take an exploratory journey into the mysterious territory of a phenomenologically observable occurrence in the Family Constellations approach, the knowing field; and to bring home invaluable results, presented in mundane terms, for individual psychotherapy. Previous empirical research has shown that information from the knowing field can be obtained through the representative perception, an experience involving the presence of attunement and resonance. However, the existence of this field has still not received much attention in scientific circles. The most popular theory associated with it has been Rupert Sheldrake’s morphic field, which, despite its meticulous and repeatedly tested explanations, is considered pseudoscientific. The need for further research on the embodied knowing field is timely, as its unique manifestation in constellation work should not be considered the product of magical thinking. To achieve the aims of this study, three accredited, integrative psychotherapists were interviewed, who have been using this method as an integral part of their clinical practice. The rationale for IPA analysis was built upon the phenomenological characteristic of this qualitative research method that blends with the nature of the subject matter. As a result of the analysis, three key themes stood out from the rest: 1) focus on embodied experience including somatic representation of family history, resonance, attunement, representative perception and countertransference; 2) the therapist’s stance how to remain open to experience and their role as participants; and, finally, 3) the personal and the collective, embedding the transpersonal and constructivist-systemic aspects of constellation work, and their use in one-to-one setting. According to the therapists’ understanding of their own and their clients’ embodied experience, physical sensations, feelings and movements signify the attunement and resonance with the surrounding energetic field. Resonance is stronger with deeper attunement, and requires an all-encompassing pre-reflective state where representatives connect with their somatic responses and allow the resonating part of themselves to unravel its essence. Hence, insights into the hidden dynamics of transgenerational entanglements can be gained, and what becomes conscious can be further worked on in the therapeutic space. The findings of this study also show that the advantages of constellation work in individual psychotherapy outweigh the disadvantages, which predicts a promising future for the further adaptation of this approach to one-to-one context.
CHAPTER 1: INTRODUCTION

A new paradigm shift is in progress in mental health practices towards less acknowledged and more implicit processes that are unconscious and inaccessible for introspection (Schore, 2014). Concurrently, the unification of mind and body within psychotherapy slowly advances with the integration of the scientific findings of neuroscience, mindfulness and body-oriented research in the different fields of psychology. According to counselling theoretician Cottone (2013), the current movement in counselling philosophy evolves within the social constructivist framework, which radically claims that there is no individual psychology, as the individual cannot be separated from its social context.

The present study fits well into this configuration when it seeks to explore a phenomenon called the *knowing field*, which has not been the focus of mainstream psychology (Cohen, 2008), but has constructivist, systemic and phenomenological roots. The term *knowing field* (wissende Feld) was coined by Albrecht Mahr (1999), a German physician, psychoanalyst and psychotherapist to describe the phenomenological field most discernibly detected in Bert Hellinger’s psychotherapeutic model of Systemic or Family Constellations (Lynch as cited in Opatrný, 2013; Mané, 2009). The constellation facilitator and the group participants, who become representatives of people or elements in constellations, attune to the *knowing field* to learn about the underlying dynamics of presenting issues and the hidden transgenerational “loyalties” (Böszörményi-Nagy & Spark, 1973).

In the last decade, there has been a gradual gravitation towards family constellations used in individual context (Broughton, 2010; Franke, 2003; Madelung and Innecken, 2004). However, research on the phenomenon that takes form most unmistakably in constellations work is still scarce (Cohen, 2008; Rupert, 2011). The general aim of this research study is to
explore how information from the *knowing field* can become accessible for both therapist and client in individual context to enhance therapeutic effectiveness.

The following research objectives are set to achieve the above aim:

1. To explore participants phenomenological experience of the *knowing field*.

2. To investigate participants’ understanding of the embodied experience (both as observers and as representatives) during the phenomenon of *representative perception* (the representatives’ attunement and resonance).

3. To examine participants application of systemic-constructivist thinking in individual setting.
CHAPTER 2: LITERATURE REVIEW

This section outlines the main theoretical contributions associated with the research objectives. It begins with Albrecht Mahr’s understanding of the knowing field, which sets the ground for the subsequent comprehensive account of the major field theories that are relevant to the framework of this study. It is then followed by a description of the facilitator’s position or attitude in family constellations that allows the emergence of the observable phenomenon. The review also encompasses research conducted on corresponding embodied experience; and finally it concludes with an evaluation of the one-to-one context in relation to the aim of this study.

Field Theories

According to Mahr (1999; 2005), one way of viewing the knowing field: as a spiritual-energetic healing force which settles problems through us, better than we find resolutions ourselves. His position that unconscious somatic experiences exist must have emanated from his psychoanalytic background (Breuer & Freud, 1893). Mahr’s observations and empirical knowledge acquired through constellation work reinforced his stance that human bodies were knowledgeable about consciously inaccessible truth, beyond recollection or under repression; and that they had the capacity to reveal this veracity. The dynamic relationship with the knowing field manifests itself in feelings and body sensations that urge representatives to act in certain ways that lead towards systemic solutions. In an alternative way, Mahr explains, one can perceive the knowing field as a universal information repository where both the living and “the reality of [the dead’s] present essence” (Mahr as cited in Cio-Inspiratie, 2012) reside (Cohen 2008; 2009). Nevertheless, these two conceptualisations of the knowing field are so closely interwoven and constantly interplaying with each other that they may only have been distinguished for the purpose of theoretical investigation.
Cohen (2008; 2009) aptly points out that in the literature of natural science, Mahr’s concept of the knowing field is perhaps most illustratively associated with developmental biologist Rupert Sheldrake’s (1987a; 2009) morphic field [from Greek morphē form, shape]: a non-energetic field per se that organises the form and behaviour of developing organisms or morphic units (for example: atoms, crystals, animals and social groups) by passing on information from previous comparable forms. Morphic fields can be of different kinds: morphogenetic, behavioural, social, cultural and mental fields. The implication of Sheldrake’s research for human systems and psychotherapy is that conscious and unconscious collective memory through morphic resonance—the formative and stabilising effect of former field structures on a morphic field (Sheldrake; nd)—is inherent within each field (Sheldrake & Jenkinson, 2013). For example, a newly learnt adaptive behaviour, including aversive responses to traumatic experiences, is passed on to other members of the same species, like in the Rose’s experiment when new-born chicks, having been introduced to a small yellow light, avoided it the same way as their forerunners who had been injected by a sickening chemical when they were pecking at it (Mollon, 2008, p. 219; Sheldrake, 1992).

Sheldrake’s radical views and research findings have received adverse criticism and have been much debated in scientific and lay circles. Nonetheless, it was also revealed that many of these attacks were due to misunderstandings of his concepts (Dace, 2014), which can also be viewed as a habitual response to revolutionary ideas. Wilber (1984), who calls Sheldrake’s theory meticulous, innovative and clear, constructively examined three areas where it can be critiqued. Firstly, he opposes the purely non-energetic nature of the fields, arguing that some kind of subtle energy needs to be assumed that contributes to any kind of formative faculty of the morphic fields. Secondly, he questions their non-local characteristics, namely, that the fields seem to take formative effect regardless of space and time, insisting that there must be
occurrences of locality, meaning that actual time-space prevalence cannot be excluded in information transfer. Thirdly, Wilber objects to Sheldrake’s contention that archetypal forms do not exist from evolutionary point of view. Rather, he holds that certain unchangeable categories, for example, development, form or causation, subsist that are present everywhere in our universe, and around which even Sheldrake builds his own theory. Even though Sheldrake (1987b) claims his idea of morphic fields to be very similar to Jung’s concept of collective unconscious, his theory goes beyond the human experiential context and is applied to the whole universe.

The Phylogenetic Inheritance
Prior to Jung’s collective unconscious, Freud’s phylogenetic relics in the unconscious will be reviewed, which is also closely linked with the former. Freud (1900-1901) first introduced his views on phylogenesis in relation to regression in dreams postulating that earliest childhood condition was reactivated in the dreamer, determined by an underlying phylogenetic picture of human evolution as an integral part of the human psyche. In connection with his theory of sexuality, he claimed that in psychoanalysis, ontogenetic factors were given priority over phylogenesis, as disposition can only be triggered and revealed by experience (Freud, 1905). However, in the case history of the Wolfman, Freud regarded his patient’s fear of castration as the victory of phylogenetic heredity over personal experiences (Freud, 1918). The Lamarckian influence of the inheritance of acquired traits also appeared in his speculations about affects (Freud, 1916-17; 1926; Hoffer, 1992). He contended that affects had phylogenetic basis, meaning that they originate from the universal and innate aspect of the human species, which led him to the “phylogenetic memory” of the individual. Although Freud elaborated on this idea throughout his writings, his investigations into phylogenesis did not seem to leave the realm of the individual.
The Collective Unconscious and Synchronicity

Jung (1968) regarded the Freudian unconscious as *personal unconscious* and the material Freud labelled as of phylogenetic origin, Jung called *collective unconscious*. Although Jung believed that the collective unconscious consisted of universal elements, the *archetypes*, he was mainly concerned with their influence on human thought and behaviour. Jung’s notion of synchronicity, which refers to “meaningful coincidences” (Jung, 1960; Main, 2004), indicating the occurrence of certain events that are meaningful, but not related by causation, is explained by the work of the collective unconscious; and is interconnected with his friend’s, physicist Wolfgang Pauli’s development of quantum mechanics (Mansfield, 1941).

The Akashic Field

In association with quantum physics, philosopher and system theorist Ervin László’s (1995; 2004) theory of the “Akashic field” (“A-field”), or sometimes referred to as “zero-point energy field” has been considered: a subquantum information field that carries universal memory. Every human consciousness is a constituent element of this field, in which individual consciousness is a holographic expression of it (Charman, 2015). According to László, our brain works like an apparatus that retrieves and records information from the zero-point field, and in altered state of consciousness (during meditation, dreaming or relaxation) our capacity to tune into a broader range of frequencies in the field increases (McTaggart, 2002). Although he has received criticism for lacking some independent verification of his hypothesis about information-transporting holograms—as it is only explained by virtue of the human brain, which is the phenomenon itself that the hypothesis meant to justify (McDaniel, 2009)—, his ideas have greatly shaped contemporary consciousness research and transpersonal psychology (Grof, 2012).
The Gestalt Field

Finally, among the field theories, Lewin’s (as cited in Parlett, 1991) Gestalt field will be reviewed here, the meaning of which is best grasped when one is looking at the overall situation in a holistic way. Lewin (as cited in Parlett, 2005) imported concepts from nineteenth century physics, especially from magnetic field theory, when he proposed that multiple influences take effect to create a certain result under a set of circumstances at a specific time. In a psychological setting, this field, or life space, can be understood as an interconnected whole of forces that impacts on the individual’s or group’s behaviour at a given time (Burnes & Cooke, 2013). The field is the atmosphere wherein therapy occurs, including the therapist, the client and the complexity and development of their relationship and interaction (Parlett, 2005). Individually constructed meaning of a particular behaviour will unfold in the field, in a larger context, as well as relative to its place in the field; its characteristics are determined by the present experiencing, affected by implications of the past and future.

Lewin regarded behaviour as a response to environmental stimuli (Burnes & Cooke, ibid). The constituents of the field are inseparable and in their interrelatedness they need to be looked at as a unified whole in order to learn about their nature and about what behavioural modifications are necessary to bring about change in one’s life. Individuals and groups belong to more distinct life spaces depending on what compelling and binding forces take effect within each of these fields. Although Lewin viewed behavioural changes as a slow, gradual process, he confirmed that crisis and certain forces in the field could result in rapid shifts. Lewin’s field theory became less popular after his death due to his emphasis on mathematical representations to the detriment of the experiential aspects in his psychological conceptions. However, since the 1990s, his original concepts have regained more and more
attention acknowledging his contribution to the identification of psychological agencies by means of his life space models (Burnes & Cooke, ibid).

The Existential Phenomenological Stance

Husserl (cited in van Manen, 2009) stated that phenomenology was a detailed investigation and analysis of the lifeworld—the realm that is experienced in the ‘here and now’ instantly and directly, before conceptualisation, categorisation and reflection took place. Existential phenomenologists, like Heidegger, Sartre and Merleau Ponty, believed that for a better understanding of human existence, lived experience needed to be studied (Cooper, 2003, p. 11).

The psychotherapeutic orientations that employ the phenomenological perspective to client work attempt to obtain understanding via the exploration of the client’s subjective world where interpretation and awareness of inner processes are acquired through perception (Brazier, 1991). Following Husserl’s subjectivity as a guideline, the phenomenological psychotherapist engages in the client’s sphere without preconceived judgements about what is true and false, or important and insignificant in the client’s emerging material. To shed light on the facilitator’s phenomenological stance in the systemic constellations context, Hellinger (as cited in Cohen, 2008) differentiated it from scientific inquiry, saying that in the former, insights can be gained by means of an inner movement of holding back his urge to know and letting his focus expand to the “greater whole” that emerges, rather than concentrating on and trying to make sense of the details, as it happens in the latter. While looking at the phenomenon from a distance, underneath it, its essence (Husserl as cited in Natanson, 1973) will begin to take shape and come to the facilitator’s awareness. It is also important, similarly to the existential therapist (Yalom, 1989), that the constellations facilitator is capable of observing without the intention to help the client’s life situation, and of bracketing his own fear of any anticipated reactions or assumptions (Woldt & Toman,
With his non-judgemental presence, he remains within the boundaries of paying “all-encompassing attention” to particular phenomena, or themes, for example, the family, energy movement, guilt—within the phenomenological field (Hellinger, 1999). This attention or awareness is not only perceptive but also produces an energy field, and has an impact on its target.

The important principle of focusing on reality in the systemic constellations approach is borrowed from existential philosophy: it is an ontological inquiry, the investigation of the givens that are immanent in human existence, for example, one cannot change the reality who their parents are even though they may dream of more ideal parents (Mandelung & Innecken, 2004).

The Therapist’s Embodied Experience: Attunement and Resonance

When the therapist, in one-to-one psychotherapy, acts as a representative of a person/element in a systemic constellation, she will also undergo what is called the “representative experience” phenomenon (Broughton, 2010). During this experience representatives perceive information—primarily in the form of physical sensations, feelings and emotions—useful for the constellation, about whom or what they are representing, from the knowing field, serving as “resonators” for them (Broughton, 2010; Hellinger, 1999; Mahr, 1999; and Ruppert 2011).

In this “trance-like state”, the representative’s personal boundaries become loose and can easily take in the information available in the field (Broughton, 2010). Sparrer (as cited in Broughton, 2010) also points out that the representative experience phenomenon shows that feelings and emotions come and go with the roling and de-roling, which indicate that they do not belong to the individual as fixed characteristics.

Franke (2003) contends that the psychotherapist’s resonance to the client’s physical and internal conditions are manifested in the countertransference feelings, observed as her “own
complementary reactions”, which feel alien or even shocking to her ‘normal’ state. For example, the feeling of unease or worry, which is an indicator of personal limitations, is also an indicator of the client’s limitations, supposing they are both participants of the same field.

Franke adds to this that a recurring pattern of change takes form in the therapist once she enters the intersubjective field with a particular client. With extensive experience in recognising countertransference feelings and with knowledge of one’s own psychic structure as well as with awareness of one’s own inner processes, flaws and shortcomings, the therapist will be able move freely in her embodied experience, and make use of the information gained in the therapeutic space in a timely and appropriate manner.

In constellations work the representative perception starts with sensation moving upright in the body from the ground, which increases into psychical need turning into movement or feelings, which is then verbalised or manifests itself as an emotional expression (Broughton, 2010).

Mayer and Viviers (2015) draw on various contemporary German theorists to explain that representative perception is linked with sympathetic vibration or resonance, a phenomenon known in physics, when a vibratory object reacts to the vibration of another object if it has harmonic resemblance to it. Applying the principles of sympathetic vibration or resonance to the human realm means that although depending on the level of their attunement, people are able to pick up on the physical, emotional, mental and spiritual vibration of another. Anderson (1998), who incorporated the notion of sympathetic resonance into intuitive inquiry research method, put forward that the universal nature of an experience can be detected through the resonance of the reader of a research report: the more universal an experience, the more resonant the reader is, who responds with “immediate apprehension and recognition” of his own experiences. In a similar fashion, considerations have been made that the universality
and simplicity of experiences may be revealed by the resonant response during representative perception.

Neuroscientific findings reveal that attunement and resonance are explained by mirror neurons (a group of neurons in the cortex responsible for enabling the observer to mirror the behaviour of the one being observed), which cause subcortical movements as part of a “resonance circuitry”, which then relay data, caused by the movements, to the right side of the brain to gain interoceptive awareness (having secondary or metarepresentations of body condition) of the bodily sensations (Siegel, 2010).

Neuropsychoanalytic research on right hemisphere activation indicates that implicit unconscious processes have explicitly become the object of investigation in relational context (Schore, 2014). Embodied resonance has been examined in countertransference studies to shed more light on the somatic phenomena experienced by analysts (Stone, 2006). According to Stone (ibid, p. 109), resonance takes place, and the analyst’s “tuning fork vibrates”, when she encounters the client at the level of the unconscious.

**Implications for Individual Psychotherapy: Focus on the Body**

Tracking and bodyreading is indispensable from the sensorimotor psychotherapist’s skills set (Ogden, Minton & Pain, 2006). In tracking, she observes how present experience develops and being organised in the client, paying particular attention to the somatic changes. In bodyreading, she recognises the habitual “action tendencies”, such as persistent tense posture. Ogden et al. assert that these tendencies reveal core beliefs and their emotional concomitants. Raising awareness by means of “experiments” with statements and movements or gestures in a state of mindfulness can result in clients learning to recognise their own habitual patterns of organising experience or information processing (Kurcz, 2013).
In a similar fashion, the constellation method also requires from the facilitator to notice small movements in the client’s body and facial expression while he is experiencing representative perception (Broughton, 2010). Broughton also emphasises that drawing the client’s attention to the tracked movement and encouraging him to follow it as it appears in his body, often results in a shift in the client’s awareness. Considerations have been made that from the perspective of constellations, the above mentioned “action tendencies” can be indicative signs of transgenerational systemic entanglements. As Broughton says that even in individual sessions, the therapist remains aware of the “presence of many”.

Working with individuals involving their social context is timely, although not recently developed (Bertrando and Boscolo, 1996). Yet, in family constellation work, it seems to be a slow and arduous journey. Despite appearances, however, endeavours are worthy (Broughton, 2010; Franke, 2003; Madelung and Innecken, 2004). For example, instead of group participants, the representative perception is brought about by client or therapist standing on floor markers, or by touching table-top markers with a finger or by visualisation. The application of systemic-constructivist perspective in one-to-one setting are thought to enrich the therapist’s resources, can expand the therapeutic relationship, and can bring into focus other important elements besides the quality of the therapeutic relationship. The purpose of this research is to contribute to further bridging the gap between systemic-constructivist and individual approaches; and between mind and body. Focusing on bodily sensations, which Madelung and Innecken (2004) call “intuitive messages”, during psychotherapy, helps to bring the client closer to the knowledge of unconscious connections.

To conclude, the different field theories discussed here indicate that unconscious energy exists and interpenetrates the physical body. By approaching this energy field with a phenomenological therapeutic perspective, the practitioner is able to look beyond the client’s conscious knowledge into the hidden ancestral dynamic in the family. Implications of the
Knowing field for individual therapy suggests that the body becomes the locus of evaluation for further therapeutic interventions. The literature reviewed here aimed at showing that the phenomena related to the family constellation method have still not been researched sufficiently to allow a statement of assertion to be formulated that the knowing field is something that belonged solely to the unfathomable, and that any attempt to explore it or to bring it closer to understanding by scientific means would be doomed to failure. On the contrary, the researcher of this study took an opposing position to this view with the intention to contribute to building a link between the knowing field and already existing and scientifically verified theories and practices by virtue of placing psychotherapists’ lived experience under investigation.
CHAPTER 3: METHODOLOGY

Interpretative Phenomenological Approach (IPA)

This research aimed at exploring psychotherapists’ lived experience of a phenomenological field called the knowing field, their corresponding embodied perception and understanding of it, and their application of the acquired systemic perspective in individual setting. The researcher’s intention with her critical inquiry into how individuals comprehended and engaged with their own experiences regarding certain transpersonal phenomena that are considered pseudoscientific within scientific circles was not to attract quantitative data to prove the opposite, but rather, to implement a flexible approach that allowed to uncover particular subjective experiences, and to analyse them in terms of their descriptive linguistic expression.

Research methods need to match the kind of therapy under inquiry. Therefore, Interpretative Phenomenological Analysis (IPA) was chosen to correspond to the characteristics of Family Constellations therapeutic method. The philosophical foundations of IPA that encompasses phenomenology, hermeneutics and idiography were consistent with the experiential, interpretative and particular-oriented objectives of this study (Smith, Flowers and Larkin, 2009). As a qualitative approach, IPA is designed to explore, delineate, explain and deposit the way research participants understand their lived experiences. The IPA researcher’s task, informed by Heidegger’s hermeneutic phenomenology, was two-fold: to capture the participants attempt how they construct meaning of what they are going through. This research strategy has measured up to the selected aims as it was compatible with their “epistemological position”: concentrating on the participants’ experiences and understandings of specific observable occurrences (Smith et al., 2009).
Sample

As a qualitative research method, IPA is carried out with small sample sizes. Three middle-aged participants (two females and one male) were chosen who were ready and competent to present a unique perspective of the phenomenon under inquiry—the embodied experiencing of the knowing field. Their psychotherapeutic orientations needed to incorporate familiarity and sufficient experience with the family constellation work, which criteria tuned in well with the integrative model of psychotherapy. Their approach to client practice also involved excessive experience with working with the body. Therefore, the selected three participants were all IAHIP\textsuperscript{1} accredited integrative psychotherapist with years of experience in this particular therapeutic approach. To protect their anonymity, pseudonyms were used throughout this research paper (Caitlin, Anette and Richard). Caitlin and Richard were recruited via IAHIP website, whereas Anette’s was enlisted “via opportunities” (Smith et al., 2009, p. 49) through the researcher’s own connections.

Data Collection

The data collection method needed to inspire participants to be creative and reflective in their thoughts, feelings and stories about the phenomena in focus. Semi-structured one-to-one interviews suited this requirement best. A tailored interview guideline (see Appendix 1) with purposeful questions were prepared beforehand that had given an initial form to the interview. The questions were designed to cover the research objectives subsuming the areas discovered by the reviewed literature. Rather than using direct reference to the researched phenomena like “How do you make sense of the representative perception or the knowing field?”, the researcher attempted to elicit implicit meaning around the processes of “gaining

\textsuperscript{1}IAHIP is an acronym for the Irish Association of Humanistic and Integrative Psychotherapy, one of the major accreditting bodies in Ireland.
insight”, “perceiving changes” “observing clients in role plays” and “understanding gut feelings”. The movement from “descriptive” to “evaluative” questions (Smith et al., 2009, p. 59) meant to encourage the interviewees to dig deeper when they had found communication easier. However, flexibility and spontaneity, within the boundaries of the research question, were also essential part of the data collection process for rich data to emerge. Smith et al. stress that it is the participant who is viewed as the expert on the topic, therefore going with the flow of the interaction is equally important, for example, probing, prompts and comparative questions were applied to elicit more information about something interesting. The researcher often gave feedback on her understanding to the participants and asked them to clarify or elaborate on particular themes that seemed to conceal useful information for the research topic. Verbatim audio record of one personal and two telephone interviews were made, in line with the participants’ availability and convenience. After completing all the interviews, the researcher transcribed the audio data for analysis.

**Data Analysis**

IPA is distinguished from thematic analysis in that it looks for patterns to fit the epistemological stance of the research objectives (Braun & Clarke, 2006). The “sense-making” of people’s lived experiences received priority and achieved by detailed case-by-case analysis. This began with reading, re-reading and listening to the original transcript several times, and doing “exploratory commenting” on the hard-copy data (Smith et al., 2009) (for a blank table template used for this purpose see Appendix 2). This was followed by seeking themes and patterns in the exploratory notes; then connecting the themes. When this was done with all the three cases, patterns had to be found across the cases, and then interpretations were be added, when the researcher carried the analysis to a deeper level. Next, a master table containing the three super- and numbered sub-ordinate themes (see Appendix 3) were created with all the extracts from the interview transcripts that had a
relevance to the particular sub-themes. After thoughtful consideration and reduction, a final table (Table 1 in Results chapter) was presented incorporating the three super-ordinate themes and a few illustrative vignettes. Finally, the researcher produced a written account of her findings that is outlined in the Results chapter.

**Ethical Statements**

This research study was conducted in accordance with the three principles of the Belmont Report (1979): respect for person, beneficence and justice. Participants’ autonomy was respected, their participation was voluntary and they were free to withdraw at any point during data collection. Although there were no potential risks identified with respect to the topic and the manner of the interview, the researcher was aware of the necessity to adjust to the participants’ individual needs with regard to the interviewer’s response and further explanation of questions not to induce uncomfortable feelings of inadequacy or inferiority, and to carry out the interviews according to her best judgment and integrity. Informed consent (see Appendix 4) were obtained from all participants that included two forms. At the recruiting stage, participants received an *Information Form* via email with details about the topic to be covered and the nature of the research regarding length and method of data collection and anonymity. From an ethical point of view, it was important to provide information about what they give their consent to before participating in this study. Subsequently, a *Consent Form* was collected from them with their signature.
CHAPTER 4: RESULTS

The findings of this research evolved through careful comparison and collation of the emergent themes captured in the three participants’ transcripts, which had gradually unfolded as a result of finding connections and patterns between parts of the whole text by means of treating each narrative separate from the other, and as it appears, also involving linguistic implications in its conceptual interpretation (Smith et al., 2009). The researcher aimed at holding the phenomenological position of IPA in data analysis and organisation, setting aside preconceptions of the structures surfacing in the other two participants’ accounts when dealing with one.

To remain in alignment with the objectives of this study, three common themes were chosen that had taken shape in the process of looking across the individual cases (Table 1). A fourth theme, which also offered abundant data, in relation to the effects of family constellation work as a therapeutic method, including the therapist’s developing self and client's risk assessment, will not be elaborated on in this paper.
Table 1: Final table of super-ordinate themes and their subset themes with vignettes

<table>
<thead>
<tr>
<th>Themes</th>
<th>Vignettes</th>
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<tbody>
<tr>
<td><strong>Focus on embodied experience</strong></td>
<td></td>
</tr>
<tr>
<td>Embodied family history</td>
<td>“So I’m already seeing the either reaching out to the family or the pushing away from it.”</td>
</tr>
<tr>
<td></td>
<td>“Change the posture and see did the feeling change.”</td>
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<td></td>
<td>“If you were an animal what kind of animal would you be with this person?”</td>
</tr>
<tr>
<td>Resonance, attunement and representative</td>
<td>“Put one finger on the stone of representing somebody and they can sense into what’s it like to be that person.”</td>
</tr>
<tr>
<td>perception</td>
<td>“There is some resonance with your own story.”</td>
</tr>
<tr>
<td>Countertransference</td>
<td>“Wouldn’t do that at the beginning.”</td>
</tr>
<tr>
<td><strong>The therapist's stance</strong></td>
<td></td>
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<tr>
<td>Remaining open to experience</td>
<td>“I don’t use words much at all.”</td>
</tr>
<tr>
<td></td>
<td>“I’m holding my non-judgmental witness to everything.”</td>
</tr>
<tr>
<td>Therapist as participant</td>
<td>“I am representing the facilitator.”</td>
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<tr>
<td></td>
<td>“I am not an observer, I am a participant.”</td>
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<tr>
<td><strong>The personal and the collective</strong></td>
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<tr>
<td>Beyond the personal</td>
<td>“I have a sense that this is not just to do with the client.”</td>
</tr>
<tr>
<td>Application of group therapy to one-to-one</td>
<td>“I cannot not work systemically.”</td>
</tr>
<tr>
<td>setting</td>
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</tbody>
</table>
Focus on Embodied Experience

This theme provided the richest data from all the super-ordinate themes that the three participants reported as the central element of the family constellations approach. Embodiment was examined from both the therapist’s and the client’s frame of reference in relation to what emerges in the field. Caitlin's description encapsulated the importance of this component, bringing her own experience illustratively as empirical evidence:

Caitlin:”... in my experience the client needs to be embodied, needs to be able to feel embodied through the constellation work.”

The embodiment Caitlin referred to happens by the employment of either animate or inanimate representatives of people or elements in the client’s life. In the researcher’s interpretation, the participant implied here that without being embodied, unconscious psychic material cannot surface. Anette explained the presence of energetic connection that is revealed by embodying ancestors:

Anette: ”The whole idea of ancestral work, working with family lines, because, you know, it sort of challenged my practical ‘here and now’ belief system … the challenge of connection to the ancestors and looking at energetically what gets passed down through generations.”

This vignette indicates the challenging nature of energetic interrelatedness, Anette mentioned, that is detected by the physical body and presented in the therapeutic space. All three therapists' professional training and experience incorporate aspects of work on the level of the body. They all reported drawing their inferences that determine the direction of their further work with their clients from focusing on the observed and perceived changes in the soma:

Anette: "I watch again the breath and the body language and the eyes, ... the visual effects, a sigh, a softening of breath and dropping of shoulders, softening of knees, whatever it is in the muscular tension that softens or moves, or becomes more rigid, whatever.”
A therapist with many years of practice in body-oriented work is able to track and identify patterns that become the ground for her hypothesis and direction for therapy. Richard gave an account of his experience of the knowing field\(^2\) in the second minute of the interview and linked it with his body as a means of finding out about the underlying dynamics between people and living things or different aspects of the self:

Richard: “And it seems that what emerges [from the knowing field] is so true in a certain way ... there is a kind of underlying essential dynamic which is revealed in the constellation, which is difficult to see in other ways, let’s put it that way ... Well, I’ve learned that my body is probably the best diagnostic tool.”

It seems that by tuning into the field, representatives, who serve as medium for the client’s psychic representations, allow a deeper truth to emerge by lending themselves, their bodies, personal consciousness and their unconscious, to a higher consciousness or collective energy that carries memory and knowledge less available in other circumstances. As if attunement, centering and resonance were embodied here in a particular altered state of consciousness.

Caitlin adds to that when juxtaposing the representative perception, a phenomenon associated with the knowing field, with the process in role plays that the latter does not seem to involve the learnt experience of tracked embodiment.

Caitlin: "The knowing field to me, in my experience, is much deeper than cognition, intellectualism and thinking.... I don’t think you necessarily need experience to be able to track what happens in the body to do that [in a role play].”

Besides this general comprehension of the embodied experience of the knowing field, three nested themes were distinguishable that all had common roots in the three participants’ transcripts:

- Embodied Family History
- Resonance, Attunement and Representative Perception

\(^2\) Albrecht Mahr’s term for the morphogenetic field that connects human systems through resonance
Countertransference

Embodied Family History

It is not a mere coincidence that the word “family” appears most frequently with constellations as it is most often applied to family systems. Consequently, if embodiment is a characteristic of this work, the family is also involved in that. All three research participants reported the application of the family constellation method for eliciting family history. Members of families are represented or embodied by people in group therapy or by the client or the therapist in one-to-one setting, or by various objects. Caitlin spoke about the “embodied genogram”, in the form of “pushing away” or “yielding”, informing her about her clients’ resistance or acceptance of their family systems while collecting family data from them:

Caitlin: “… comes the moment … I ask the client would they like to do one [embodied genogram]. Already I’m noticing whether there’s a breathing off, like often there’s a resistance or they’re just not wanting to do it. So I’m already seeing the either reaching out to the family or the pushing away from it.”

This shows that even bringing family relations into the room by verbal means creating images or products of phantasy induces somatisation. Unlike Caitlin, Anette does not use genograms, but she described a different experience linking embodied family to adopted posture:

Anette: “… they adopt the posture of the other person … often quite different to how it was as themselves…. like particularly saying in an abusive situation or where somebody would dominate, then there’s speaking from that person, I would ask them to change their posture and see did the feeling change.”

This example was very illustrative of how feelings of ancestors are embodied and can be worked with.

Anette’s way of collecting family data traces behaviour pattern and belief systems of the family:
Anette: “… we don’t actually do genograms but we would look at family history … behaviour patterns and … belief systems in the family and introjects … if a belief or a behaviour or an attitude that is mistakenly believed to be yours because it’s in the system.”

According to Anette, working with constellations provided insights into these belief systems and past patterns of the client’s family, allowing the therapist to “tune in energetically” and “watch body language”. In other words, from Anette’s account it becomes clear that the body reveals the template that the client had inherited from his family, and like a map serves the basis for repetition compulsion.

Richard talked about genograms in the context of “metaphors” to identify relationship patterns between family members:

Richard: “If you were an animal what kind of animal would you be with this person? And if they were an animal what kind of animal they’d be?”

By using metaphors, the person can bring onto the somatic level what it feels like to be that animal informing the therapy about the hidden dynamics between him and other members of the family.

It seems that genograms and working with family history were given a new definition besides its graphical depiction, and can be used in various ways in constellation work. It is also apparent that therapists who were familiar with this approach felt motivated to find their own unique ways of gathering family history from their clients. This might show the correlation between creativity and an inquisitive attitude to unconscious processes, that constellations require.

Resonance, Attunement and Representative Perception

All three participants related the above three phenomena both to the knowing field and the body, where they can be observed and worked with. This is how Richard summarised the
process of using stones in one-to-one setting to bring about representative perception, through which the operation of the *knowing field* becomes discernible:

Richard: "I might work with stones, for instance, as representatives, and I’ll ask the client to put one finger on the stone of representing somebody and they can sense into what’s it like to be that person. Now how that happens is really mysterious, because that is the knowing field, and the field knows but I don’t.”

Richard had recognised later in the interview the significance of "touch” in working with stones. Touch seems to transmit resonance between living organisms when they are attuned to the field, and this way the *knowing field* is embodied. The representative experience subsumes changes in the body, as Richard gave details of ”a little movement” or ”change of expression” or ”pain”. He explained the choice of representatives in group constellation by the law of resonance:

Richard: “… there is some resonance with your own story, and you’re chosen as a representative.”

Anette described the experience of resonance in individual therapy with the therapist’s own story and pinpointed on the importance of becoming aware of that:

Anette: ”… if something resonates with you as a therapist and in the work, then you need to know what part of that is yours.”

This brings to mind the transference-countertransference dynamic that becomes enlivened in constellation work. In addition to that, Richard emphasised that representing somebody does not mean that their boundaries are dissolved or that “[you] lose yourself”, but rather “you still keep your ground” and “your self”.

According to Caitlin, both the presence and the absence of resonance carry a significant meaning for the therapist when doing constellation work with the client:

Caitlin: “… so how do I feel my own resonance with the client or/and particularly if there is not a resonating, that’s also important.”
This could indicate that resonance and attachment styles have a correlation. All participants stressed on the importance of resonating with the breath and with different body sensations of their clients. Paying attention to their own breath and the client’s breath seems to enhance the process of raising awareness, and takes resonance and therapeutic alliance into a deeper level.

**Countertransference**

All participants considered professional practice and previous therapy work as the most important factors in the ability to differentiate between countertransference responses. They all agreed that there were times when their own judgements might have be impaired regarding what they felt was more part of their own story or it belonged predominantly to the client. Therefore, feelings and somatic sensations needed to be fed back to the client for confirmation. All the therapists were inclined to ask the client to pay attention to what was going on in their body, and to describe their physical sensations and feelings to check the validity of their intuitive feelings arising in the intersubjective space towards the client.

Richard reported that the strength of the working alliance is a major determinant of how much he may reveal his countertransference information to the client:

> Richard: “I think it depends on ... the working alliance, how strong it is. So certainly, wouldn’t do that at the beginning ... just let it happen.”

There seemed to be an implication here for a potential risk of doing harm to the client with pre-mature interpretations. When the necessary level of trust has not been established for deeper work, the client might feel it as a threat that the therapist knows something about him that he is not even aware of. As Richard says: “I might name it or I might not.”

He sounded confident in trusting his intuition and judgement regarding taking directions during therapy.
All participants noted that countertransference involves the client’s transference onto the therapist, however, Anette was the most explicit about it:

Anette: “… your countertransference … involves their transference onto you.”

**The Therapist's Stance**

The data of this theme revolve around the therapist’s attitude or stance in constellation work that enables him to engage deeper and increases his presence in what is emerging in the therapeutic field. This super-ordinate theme can be broken down into two sub-themes:

- Remaining Open to Experience
- Therapist as a Participant

**Remaining Open to Experience**

Two participants, Caitlin and Richard talked about the value of remaining quiet as a facilitator of constellations. Caitlin described her experience of letting go of everything as she was stepping onto a floor marker in one-to-one setting when representing someone for the client:

Caitlin: “So there’s something about that dropping … everything, especially all the words, as I am about to get on to a place marker.”

Richard: “… often in the constellations I’m facilitating, I don’t use words much at all.”

This implies the remaining silent enables the individual to connect with the body and inner processes more profoundly. All therapists gave account of their stepping back attitude in constellations. Caitlin observed herself as a non-judgmental witness during the process to prepare for opening up to experience:

Caitlin: ”As I don’t know, obviously, what I’m going to feel when I stand on, but I’m holding my witness, my mind, my non-judgmental witness to everything.”

Similarly, Richard’s use of a ”constellation lense” equips him to ”look at the wider field”: 
Richard: “… there’s some different quality, and I can't really find exactly what it is, but something that happens in me that I pick up in myself.”

The “different quality” could refer here to the collective unconscious aspect of constellation work. Anette reported “parking her personal staff” while at the same time also being aware of it and using it to assist her in her insights about what was arising in the therapy room. Although this seems to be in relation with her personal countertransference feelings, what is pointed out here is her mindful attitude during the process.

All three participants specified the experience of facilitation as a process that cannot be planned and cannot be approached with preconceptions in the mind.

Therapist as a Participant

All participants described their experiences as therapists or facilitators in constellation work as active participants, despite the witnessing eye they hold that would assume much more of an observer’s role. This phenomenological position allows them to take an active part in the exploration of the knowing field, and attempts to bring the client’s issue to resolution in light of the insights they gain during their experience as representatives.

According to Richard’s account of being a facilitator of group constellations, he recognised that even in his role as a facilitator he was stepping into a representation—he is representing the facilitator. He explains the loss of his memory of constellations by the fact that once he steps out of the knowing field and the representative perception of the facilitator, the experience becomes less available.

Richard: “I was a little bit concerned about it [that he could not remember when clients asked him about their constellations in group setting]…. And then I realised that what happens for me … when I step in as the facilitator, I am representing the facilitator. So I’m stepping into the knowing field … when I step out of the constellation, in a certain way it’s gone.”
Richard seemed to be contented with the explanation that it was *the knowing field* that knew and not him, and therefore there was no point in searching for answers within himself.

Caitlin reported clearing her mind before entering a representation; whereas Anette spoke of an energy field:

> Anette: "I think there’s an energy field between me and the client and whoever it is that person is working with, on behalf of, or for, or speaking to. I truly believe that once we engage in a piece of work together that I am not an observer, I am a participant."

Her experience also seems to refer to something greater than herself and to the importance of her willingness to engage with that energy.

**The Personal and the Collective**

The collected data about this theme showed the participants understanding of their lived experience of the dynamics that transcended their personal world. Two sub-themes were distinguishable as a result of the analysis:

- Beyond the Personal
- Application of Group Constellations to One-to-one Setting

**Beyond the Personal**

All participants reported to have personal experience and awareness working with the collective unconscious. They all said they had a sense of interconnection with something larger than their personal realm. Grief stood out as a frequently perceptible collective experience for Richard and Anette. She called it an “energetic experience with people who have died and moved on”; whereas Richard gave a detailed account of his findings:

> Richard: “… for instance, if the client is crying, … maybe it’s a resonance again, I don’t know exactly, but I sometimes pick up something that this is not just about the personal, but something about the collective … sometimes I get the sense that maybe transgenerational or from the collective unconscious. For instance, particularly with grief, I think … I start to feel sad, not about that story but something else, I have a sense that this is not just to do with the client.”
Caitlin talked about the importance of Jung’s map of the psyche in her personal life and clinical practice:

Caitlin: “… from that map I had a real sense, not just theoretically but in my own experience of the process through down the complexes, down having access to the whole collective unconscious, and who is committed to the work ultimately moving towards our true self, individuation. And perhaps the very core of that is the more living form of our embodied spirit, the true self, the divine self and the fundamental spirit.”

Finding spiritual meaning to life seems to be a common ground for therapists working with the constellation approach.

Application of Group Constellations to One-to-one Setting

Richard and Caitlin expressed their cautiousness against introducing clients who do not have sufficient therapy experience to one-to-one constellation work. Caitlin reported that she would not use constellation work with clients who were not able to tolerate embodied experience. Both participants agreed that, unlike in individual setting, in groups even traumatised clients can have a chance to observe from a distance without participating. However, Richard would not recommend it for clients with serious affect dysregulation, and advocates for initial assessment to prevent causing retraumatisation.

All participants use tools to allow representations of people or elements to take place in one-to-one constellations: stones, markers, imagination and dialogue. The systemic perspective was, to a great degree, integrated into their individual work with clients.

Caitlin: “I cannot not work systemically.”

She reported working with the client’s external and internal systems. Anette emphasised that systemic thinking enables her to look at and investigate life scripts and systems when working with people individually. Richard pointed out his preference for group setting regarding it as more powerful, or having a “magnifying effect”, where the process “might be faster”. However, he did not object to the application of the various constellation models
(business, illness, alternative medicine and short constellations) for the one-to-one context. It seems that therapists who have been introduced to systemic constellation work can no longer overlook systemic relations in the client work, as resolutions to issues were presented in such a “challenging” and “fascinating” (participants’ own words) way in family constellations that the use of this approach enriches their clinical practice.
CHAPTER 5: DISCUSSION

The objectives of this research study were to investigate psychotherapists’ understanding of their experience of the knowing field, and to explore the ways they utilise the systemic perspective, saturated by their knowledge of the constellation work, in their one-to-one therapy work. This chapter outlines how the researcher’s findings, unravelled by means of interpretative phenomenological analysis, fit into the broader framework of previously reviewed literature about the research topic. Therefore, the three super-ordinate themes and their nested sub-themes are used in the same structure and coherence as they emerged from the analysis to measure up with the existing literature. At this point, it is worth mentioning that some new literature was also introduced here, in accordance with the flexibility of the IPA method, which allows the researcher to present ”some literature for the first time in the discussion” (Smith et al., 2009, p. 113) to support newly formulated engagement with the topic.

Focus on Embodied Experience

Investigating the knowing field during the interviews invited all participants to inspect and reflect on the process of how they perceived the field in their bodies by virtue of a particular phenomenon: the representative perception. The physical sensations of “tension”, ”softening”, ”movement” were reported, as well as changes in the breath and of the feeling states, which illuminates what other studies say about the processes involved in bodily awareness of the knowing field (Broughton, 2010; Hellinger, 1999; Mahr, 1999; and Ruppert 2011).

Richard talked about the “true” nature of forces that is revealed through the embodiments in constellations, and that is hard to access in other forms of therapy. This can be substantiated by literature describing the roling and de-roling process associated with the representative
experience, which unveil the often neglected nature of feelings and emotions that they are not pre-set personality traits (Sparrer as cited in Broughton, 2010), but can be picked up from the environment as a result of the operation of the mirror neurons in the cerebral cortex (Siegel, 2010).

Caitlin spotlighted the ability to “track what happens in the body”, which, according to the extant literature (Ogden et al., 2006), turns out to be also a learnt skill of the sensorimotor psychotherapist, where the practitioner mindfully watches clients’ bodily reactions and makes sense of their organisation patterns with regard to perceptual experience. This seemingly indicates that body-oriented psychotherapists have an advantage in this work, but what it certainly shows is that tracking is a competency that can be acquired and practiced, and that it is a necessary mastery exploited in constellation work.

Embodied Family History

Family histories become laid out in front of the participants’ eyes when they attend a family constellation workshop. In individual context, the “presence of many” (Broughton, 2010) can be brought into awareness by, for example, Caitlin’s “embodied genograms”, Anette’s energetic attunement and Richard’s application of metaphors to bring familial configurations to the fore.

Via the bodyreading exercise employed by the body psychotherapist, “action tendencies” can be identified (Ogden et al., ibid), which, in family constellations, seem to relate to the habituated patterns originating from transgenerational entanglements in the family (Böszörmény-Nagy & Spark, 1973), exemplified by Anette’s awareness-raising work with posture. The researcher would even include here Caitlin’s reading of breaths that indicates either the urge of “reaching out to” or “pushing away from” the family.
Anette’s description of an “energetic” connection across generations, that is manifested somatically, harmonises with one of Wilber’s (1984) constructive criticisms of Rupert Sheldrake’s (1987a; 2009) non-energetic morphic fields saying that energy is indeed present in the morphic fields and is conducive to the organisation of the form and behaviour of social groups.

Resonance, Attunement and Representative Perception

Broughton’s (2010) clear elucidation of the sensory movement in the body was reinforced by the research participants’ accounts. Although Caitlin mentioned educating her clients about orientation, none of the three therapists described the specific direction of the sensation moving upwards in the body from the ground. Nonetheless, all of them implicated that resonance manifested itself through bodily sensations prior to feelings and culminated in movements and emotional or verbal expression, in line with what existing literature says about the sequence of events that occurs in representation experience (Broughton, ibid).

Richard’s experience as to the choice of representatives in group constellation work can be underpinned by the sympathetic vibration or resonance theory (Mayer and Viviers, 2015). According to this law in physics, those representatives are chosen by the client who have harmonic resemblance to aspects of the person to be represented. Mayer and Viviers also point out that the deeper the attunement with a person, the deeper the resonance that occurs; whereas the research participants stressed the role of raising awareness about what is resonating within them in relation to their client in increasing the level of resonance in the dyadic relationship. Caitlin’s description of non-resonance in the client or in the therapist while entering a representation might be linked to some dysfunctional workings of the mirror neurons (Siegel, 2010).
Richard emphasised the question of boundaries during representative perception, namely, that ground and sense of self was not lost in representation experience, which seems to contradict Broughton’s (2010) view of boundaries becoming more permeable when the representative enters the knowing field.

Countertransference
Franke (2003) indicated that the weight of practice played a major role in differentiating countertransference responses, which correlates with the participants’ experience as well. Anette paid particular attention to the “need to know what part of that is [hers]”, where she seemed to refer to the requirement for the therapist to be knowledgeable about her own psychic structure, possible blind spots and developmental deficits (Franke, ibid).

Stone (2006) compares the psychoanalyst’s bodily system that picks up signals from the client via unconscious communication to a tuning fork that resonates with the client. When it is unclear and confusing about whom the countertransference somatisation provides information, there was mutual agreement among the interviewed therapists on the significance of checking it with the client. This would happen through tentative questioning before they formed any premature interpretation to enable the client to connect with their own somatic information (Schaeffer, 2007). Also the focus on these “intuitive messages” during therapy can assist the therapeutic movement that is informed by the unconscious connections between therapist and client (Madelung & Innecken, 2004). However, Richard advocated not to work with it in the early days of therapy, only containing it for the client. This suggests that working with negative transference requires trust and as he added “depends on … the working alliance, how strong it is”. If the working alliance is not strong enough, retraumatisation can happen. Rothschild (2000, p. 78) points out that trauma therapy should not ‘accelerate faster than [the client] can contain’ to avoid the risk of retraumatisation. Instead, to prevent or reduce hyperarousal, the therapist needs to slow down the therapy
process by inserting brakes into it. The client needs to be brought to the edge of tolerance, without walking over the edge, and then, still feeling empowered, working towards integration can occur.

**The Therapist's Stance**

László claims that in altered state of consciousness attunement to the zero-point energy field becomes deeper (McTaggart, 2002). This corresponds well with the findings of this study how participants described their attitude and mind set when engaging in constellation work as therapists.

**Remaining Open to Experience**

Participants reported the power of silence, the holding of a mindfully witnessing stance and looking with a “constellation lens” when they are facilitating constellations. The researcher recalls the existential phenomenologist’s, Husserl’s *life world* (as cited in van Manen, 2009), that is a “here and now” experience in a pre-reflective state, preceding the workings of the prefrontal cortex. Interpretation and awareness of the client’s subjective processes are gained via perception (Brazier, 1991). The quest for Husserl’s *essence* (as cited in Natanson, 1973) can only be completed if the phenomenological therapist is involved in the client’s frame of reference.

Anette quoted “parking” her own part in countertransference, which is in congruence with gestalt therapist’s use of *bracketing* (Woldt & Toman, 2005). Similarly, Richard’s mention of the “constellation lens” could be associated with looking at the whole picture, that Lewin called the *life space*, including the wider context, the gestalt (Burnes & Cooke, 2013; Parlett, 2005). All participants adopted the ontological inquiry taken from existential philosophy (Mandelung & Innecken, 2004), constantly focusing on what emerges in the present moment: reality, which Richard depicted as “so true in a certain way”.
Therapist as a Participant

Despite their non-judgmental attitude that enables them to remain open to experience, therapists working with the family constellation method are also active participants themselves.

Richard’s account of memory loss after de-roling from the representation of the facilitator could be explained by Freud’s (1900-1901) idea of regression in relation to phylogenesis. Also Sheldrake’s (1987) interpretation of Jung’s collective unconscious that is only comprehensible in terms of the collective memory, or an “in-built memory” of the universe, accessed by representatives in constellations, can explicate for the loss of memory when they step out of the role, as the larger part of the unconscious still remains below the level of awareness. Moreover, the researcher can see a connection between Wilber’s (1984) actual time-space prevalence that plays an important function in information transfer and the “here and now” experience required from the psychotherapist to establish a phenomenological stance in constellations.

The Personal and the Collective

All participants showed fascination in connection with the mystery behind the family constellation method. Mahr’s (1999; 2005) reference to unconscious processes that the human body is capable of detecting and displaying corroborates with the findings of this research.

Beyond the Personal

The motivation for seeking meaning in the realm transcending the personal sphere was a commonality in all the participants’ narratives. The challenging experiences around a universal information repository, *the knowing field*, which contains the interconnected reality
of both the dead and the living (Cohen, 2008; 2009; Mahr, 2012) causes ambivalent feelings of caution and admiration in the professionals working in this particular field.

Richard and Anette were deeply moved by their energetic experience of collective grief as an existential theme. This unavoidable given that every human being must face in their lifetime has become a deep universal bond between human beings. “Undying grief” (Cohen, 2008), for example, could indicate transgenerational entanglements within families which work as unconscious life scripts for younger generations. Jung (1968) recognised that archetypal influences on human thoughts and behaviour if not recognised and made conscious can even lead to psychosis. Mortificatio [from Latin “to make (facere) a death (mors, mortis)”], the archetype associated with grief and mourning involves the most pain of all the archetypes, however, it encompasses the period of time preceding rebirth, therefore, carrying the seeds of happiness in the unconscious (Mehrtens, 2014). The strength of this archetype could be explained by this paradox of extreme pain and happiness that so much occupies our conscious and unconscious mind.

Application of Group Constellations to One-to-one Setting

Broughton’s (2010) emphasis of the therapist’s awareness of the client in a systemic context and her recognition of the representative perception in terms of the transferential dynamic are fundamental milestones in the therapeutic process even without setting up any constellations. Richard and Caitlin’s approach to individual setting would involve initial assessment of the affect regulatory capacity to examine whether the client is able to remain within a manageable range of “the window of tolerance”3.

The group serves as a resource in the energy distribution, therefore fragile and vulnerable individuals may also attend workshops organised for groups and observe the process. This characteristic also matches Richard’s description of the “magnifying effect” of the group, which accelerates the process. Franke (2003) highlights the group’s resonance as a helpful means to display dynamics that cannot be brought to surface by cognitive processing, which harmonises with Richard description of it as a “faster process”.

The facilitator in a group setting does not usually take on a representative role other than that of the facilitator itself (Broughton, 2010). On the other hand, in one-to-one context, the therapist needs to be able to move in and out of different roles, which requires greater engagement and skill. Also the client’s participation is more intense in individual setting as there are no other people available to serve as living representatives except himself and the therapist.

In individual context, different tools are applied to position the placeholders (floor, table or wall markers) of the people spacially around the room, or, alternatively, clients may use their visualisation to create constellation relations (Broughton, ibid).

Despite the multiple advantages of group constellations, individual setting holds a firm ground for credibility and usefulness, especially for those who are unwilling to reveal their psychic material in front of a group.

Richard’s list of the different forms of group therapy and their compatibility with the individual setting would need further research, but theoretically speaking the researcher assumes from the participant’s discourse that almost all types of group constellations can be adopted to one-to-one setting. This brings the focus back on Broughton’s stress on the philosophy of constellation work, assuming that it is not so much the techniques applied in constellations that really count as the attitude infused with understanding of the importance of
belonging, loyalty, the levels of consciences (personal, family and universal levels of conscience that bind human beings together) and the principles of transgenerational traumatology. Although Anette was convinced that constellation work is not solution focused, Franke’s (2003, p. 23) “image of resolution”, the insightful image that arises through a constellation seems to contradict this. Family constellations, either in groups or performed in individual context, work towards the resolution of problematic issues.
CHAPTER 6: CONCLUSION

This IPA research endeavoured to shed more light on the empirical knowledge, surrounding the enigma of the knowing field, that psychotherapists possess who have integrated the Family/Systemic Constellations method into their clinical work. The phenomenological approach to the research topic provided grounds for an analogous attitude to how information is acquired through the knowing field. The research participants’ awareness of their subjective embodied experience was embedded into the researcher’s broader perspective of the subject matter underpinned by the interpretative analysis of their frame of reference. As if the researcher was constantly contrasting her perception of their understanding with the ways they made sense of their own experience. Therefore, the outcome of this study is ultimately based on the researcher’s subjective filter through which particular patterns had a place to emerge to the extent of the researcher’s knowledge and absorption of the research question, whilst others were overlooked and may form the basis of further research.

The findings of this study showed that the data collection method, informed by the interview guideline, principally determined the end results. Even though it was a semi-structured interview and allowed probing and clarification, encouraging further elaboration on questions that spontaneously surfaced, still, undeniable direction and focus were employed by the researcher and gave a conceptual structure to the research. For example, instead of “genogram”, “family history” could have been used to peel off the graphical implication from the representation of family dynamics. In the same way, alternatively to specifying “role play” as the basis of comparison, it could have been left to the participants’ choice to explain the representative experience in their own terms. The researcher had been aware of the conflicting opinions regarding classic configurations of constellations and the more radical diversions from the traditional ways that, for instance, make use of psychodrama techniques, such as abreaction of affect in role plays. By refraining from the reference to controversial
issues, the researcher could have taken up a more objective position at the interviewing phase that might have led to an even more creative discourse flow on the part of the participants.

The study succeeded in measuring the research objectives revolving around the knowing field and its implications for one-to-one therapy. Focus noticeably shifted from the search for answers in the universal macrocosm to an active examining of their manifestations in the human microcosm, the body. The spacial and temporal communication in the intersubjective field between human systems involving their psychic structure as well as physical constitution became the arena for this psychotherapeutic research inquiry. The universal phenomena explored by scaling down to the subjective level of the individual experience, albeit in a non-reductionist manner, evolved into a complex, fractal-like set of patterns to exhibit an observable and fathomable map or embodiment of resonance that supposedly exists in a comparable form in the larger universe. Applying systemic constellations to one-to-one context, therefore, has a valid place in the practice of professionals who are interested in broadening their horizon with a relatively new perspective tailored to their clients and their own needs.

**Suggestions for Future Research**

Two interesting threads of themes unfolded during the analysis of this study. One of them could relate the knowing field to consciousness research, on the basis of the criteria that enable participants to enter the field and by means of which they can display the truth or reality of the client’s situation. In other words, what state of consciousness fosters direct access to the true nature of things uncovered in constellations, and how it is related to meditative practices. The other line of thought emerged from the conundrum of memory loss after stepping out of the knowing field. Suggestedly, further neuroscientific research can be conducted on the correlation between the phenomenological pre-reflective state and memory impairment.
REFERENCES:


Cio-Inspiratie. [CIO]. (June 5, 2012). Interview Albrecht Mahr Casting Light on Trauma.wmv [Video file]. Retrieved from https://www.youtube.com/watch?v=qPcpduZMgwY


http://www.bibliotecapleyades.net/archivos_pdf/mindmemory_archetypemorphicresonance.pdf


APPENDICES

Appendix 1

Interview questions

1. Can you tell me what brought you into the field of psychotherapy and in particular this approach to working with clients?

2. Please could you tell me how you make sense of your process of gaining insights on an experiential level into the client’s inner processes?

3. Can you tell me how you perceive changes within the client’s frame of reference?

4. How do you feel about the existence of any universal elements of the unconscious (e.g. Freud’s phylogenetic memory or heredity/Jung’s collective unconscious/the Transpersonal) and their impact on the client’s thoughts, feelings and behaviour?

5. How do you learn about the client’s feelings and phantasies from the countertransference information?

6. What can you observe in your clients (physical sensations, feelings and personal boundaries) when they are representing a different person in a role play?

7. What tools (real objects or visualisation) do you use to represent any kind of person or element in the client’s life and how do you think they work?

8. How do you make sense of your own resonance and attunement with your client’s physical and internal states? What happens in you during these instances?

9. Can you tell me ways you make use of your observations of the client’s body in your work with your client?

10. How do you make sense and use of your own gut feelings in the therapeutic space?

11. How has systemic thinking known from family therapy influenced your one-to-one work with your clients? In what ways? (Use of genogram, etc.)

12. Is there anything that we haven’t mentioned that you feel is relevant to say at this stage?"
Appendix 2

Table template adapted from Smith et al.’s text to IPA analysis (see REFERENCES).

<table>
<thead>
<tr>
<th>Emergent themes</th>
<th>Exploratory comments</th>
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<table>
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<tr>
<th>Original Transcript of participant</th>
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Appendix 3

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<tr>
<th>Focus on Embodied Experience</th>
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<tr>
<td>Embodied Family History</td>
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<tr>
<td>2A – ancestral work of family constellation is challenging to her here &amp; now practical belief system</td>
</tr>
<tr>
<td>A: The whole idea of ancestral work, working with family lines, because, you know, it sort of challenged my practical here and now belief system ... the challenge of connection to the ancestors and looking at energetically what gets passed down through generations.</td>
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<tr>
<td>11A – body L, breathing &amp; posture are adopted from person they represent; what they “imagine” that the other person; often quite different to how it was as themselves</td>
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<tr>
<td>12A – work with body, posture, voice to identify &amp; affect/change feelings</td>
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<tr>
<td>13A – embodiment of feeling</td>
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<tr>
<td>A: … certainly body language, I think, you can observe and breathing, and adopting sometimes, they adopt the posture of the other person…. often quite different to how it was as themselves…. like particularly saying in an abusive situation or where somebody would dominate then there’s speaking from that person, I would ask them to change their posture and see did the feeling change.</td>
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<tr>
<td>20A – body L as indicators of changes: eyes, breath, dropping of shoulders, softening of knees, muscular changes</td>
</tr>
<tr>
<td>23A – work with embodiment of past (culture, history); allowing the charge (anger); therapist tunes in energetically and watching body L</td>
</tr>
<tr>
<td>A: … and then because you’re angry it doesn’t mean you are able to express it because anger may mean not agreeing with something which was committed in your family or in your life or in your home … so you have to try and help somebody to tolerate the feelings of anger, to allow the charge, to stay with it, to have that expression.</td>
</tr>
<tr>
<td>24A – “constellation” as insight into belief systems and past patterns</td>
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<tr>
<td>A: And generally, just, you know, looking at belief systems, looking at patterns of how it was, and how would you like it to be now.</td>
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<tr>
<td>37A – systemic perspective is useful to identify behaviour patterns, systemic beliefs, introjects, family scripts</td>
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<tr>
<td>38A – by exploring having insights into the role of the system in creating templates that are the basis of repetition compulsion</td>
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<tr>
<td>A: we don’t actually do genograms but we would look at family history and we would look at behaviour patterns and we would look at belief systems in the family and we would look at what are introjects for the clients so, you know, introjected if a belief or a behaviour or an attitude that is mistakenly believed to be yours because it’s in the system.</td>
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<tr>
<td>7C – developing insights from clients’ non-verbal messages as a response to questions about family history</td>
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<tr>
<td>C: Noticing the non-verbal. Also keeping in mind those essential themes, ok, including where do you come in the family and what was it like, so getting a sense of developing insight with the client as what was it like being the eldest, the middle or maybe the child who came long after everybody else.</td>
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<tr>
<td>5C – embodied genogram: resistance as a sign of pushing away family</td>
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<tr>
<td>6C – body L reveals pushing away or yielding</td>
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<tr>
<td>C: And certainly I’m noticing, you know, you can see in somebody’s face or you can see in the body whether there’s a leading towards pushing away, whether there is a contraction or whether there is a yield.</td>
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<tr>
<td>70R – working with stones: projection is the first step, then resonance and attunement happen</td>
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<tr>
<td>R: Er … yeah, it’s a good question. I think maybe it’s starts with the projection and when the person puts a finger on the stone or stands in the place, something changes.</td>
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<tr>
<td>49R – resonance with own story in the choice of representatives (group)</td>
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<tr>
<td>R: And as you do know, as you know if you do this work at all you know that there is some resonance with your own story, and you’re chosen as a representative. Usually. There’s some connect like that woman I was telling you about earlier, she chooses somebody to represent her own grandmother who looks like her grandmother or something and she feels it.</td>
</tr>
<tr>
<td>Resonance, Attunement and the Representative Perception</td>
</tr>
<tr>
<td>19R – the knowing field as an observable phenomenon through representative perception</td>
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</table>
R: If I’m working one-to-one with the client. Right? And I might work with stones, for instance, as representatives, and I’ll ask the client to put one finger on the stone of representing somebody and they can sense into what’s it like to be that person. Now how that happens is really mysterious, because that is the knowing field, and the field knows but I don’t.

R: Maybe there’s a little movement, you know, or change of expression, or a pain or something that they feel or so I’ll be noticing those things.

48R – personal boundaries are not lost in constellation (we have a ground and self)

51R – there are representations that are challenging to personal boundaries (“sticky, difficult”)

R: Well, what I have learnt from Hunter Beaumont and Albrecht Mahr as well and others is that when you go as a representative you don’t lose yourself… Ok? So you still keep your ground, you still keep your self.

R: “Ok, I want everybody to come into the here and now and be yourself, everybody. Now what’s happening?” So the representation, it is an attunement and a resonance but it’s not everything.

8C – resonance as lived experience / embodied experience

11C – both resonance or non-resonance are significant

12C – kinesthetic empathy, attunement feeds into that resonance

13C – resonance in the body

14C – morphogenetic field

17C – embodied experience of the knowing field is more important than theory

18C – body: paying attention to the resonance of breaths, movement tags, tension

33C – breath as transition into constellation work

34C – clients’s charge as their own embodied response to what they are saying

35C – energetic or emotional charge is a sign of embodied experience

36C – breath as a means of connection with body & then body awareness

37C – bringing embodied experience into awareness, resonance becomes better

38C – trust & safety as prerequisites for openness to let things unfold

C: … as a fundamental and central embodied experience you are holding … resonance … so how do I feel my own resonance with the client or and particularly if there is not a resonating that’s also important as well.

C: And if my breath is in the higher thoracic, is that relevant to the client, and then I might pay attention to her breath as seen and check about breath. So when we talk about kinesthetic empathy, kinesthetic attunement that also feeds into that resonance or not.

C: And also acknowledging that healing can be very much potentiated in the non-resonance. A lot of richness there as well.

C: How when I am standing with someone, er … the most powerful piece is, how my breath resonates, and how my client’s breath resonates with me …

C: And I pay attention to it. And the tension might have, er …, a particular tone that doesn’t seem part of my personal experience.

33A – being open & previous therapy and professional work as prerequisites to recognise what resonates in you with the client

A: I think you can recognise what’s triggered in you, what resonates in you, what touches, and you know what part of your story that touches even though that might not be as detailed, the same in its detail, but you resonate with the feeling.

A: Yeah. And I think that’s where resonance, you know, if something resonates with you as therapist and in the work, then you need to know what part of that is yours.

Countertransference

20C – practice as key factor in differentiation in countertransference information

21C – embodied experience as distractions from being present “other than this tightness in my chest I’m very present”

22C – body work: noticing, identifying, asking client to check in with own body

C: And I pay attention to it. And the tension might have, er …, a particular tone that doesn’t seem part of my personal experience.

C: And so I would say to the client … I wonder what would it be like just maybe to notice what’s happening in your body and maybe particularly in your chest.

14A – tuning into her own feelings to learn about the client; that’s the basis of countertransference

29A – paying attention to one’s own feelings and feed them back to the client to inform the therapy in some way to check countertransference feelings
30A – edgy & uncomfortable feelings as countertransference are indicative of client’s transference dynamics

A: Yeah, well, I understand what, I stay very very tuned in to what I am feeling as well, because in essence that’s the basis of countertransference. And you know is what I, what informs me, my gut feeling, my intuition. (14A)
A: Well, like your countertransference is really all your feelings about the client, and, you know, it involves their transference onto you. So it’s like looking, I pay attention to, you know, if I’m feeling something about a client, I think there is at least a possibility that the client is feeling some of that as well. (29)
A: And I don’t your feeling is ever wrong, it just might not be appropriate at that moment. You know but I don’t think your gut feeling is ever really wrong. So if I’m feeling edgy or uncomfortable, and not quite sure where to go, I can guarantee that my client is feeling that also.

43R – countertransference as embodied experience of the relational / collective
44R – 2x naming/revealing countertransference information requires client’s trust; raising consciousness can be threatening
46R – previous experience as a means to differentiate different types of countertransference (personal collective)
47R – negative transference is an indicator of work happening

R: Not always sure about it. Sometimes it seems obvious, like if I become the guy’s father or the woman’s father then…
R: When I become a fatherly type then I’m starting to look at my countertransference, am I treating this person as if you’d do with my own son and am I in the countertransference’s doing if what’s going on. But if it’s, and of course all is about bringing everything as conscious as possible, so we might have a conversation about that or I might say, I might say…
R: Yes. I might say, you know, “I’m feeling quite fatherly towards you right now.” I might name it or I might not. … Yeah.

The Therapist’s Stance

Remaining Open to Experience

46C – importance of dropping all the words, remain silent for attunement to happen
47C – within the space of nowhere, deeper resonance happens and the field opens up
48C – the invisible becomes visible through the body (pulsating or deadened)
49C – don’t know what’s gonna happen; facilitator as non-judgemental witness of the process

C: So there’s something about that dropping, dropping everything, especially all the words, as I am about to get on to a place marker.
C: Because within that space of nowhere, it seems to me, that’s where the deeper resonance happens and the field opens up to allowing the invisible to be visible through the moving body, feeling body, whether it is pulsating and vibrant or whether it begins to feel deadened. As I never know, obviously, what I’m going to feel, when I stand on, but I’m holding my witness, my mind, my non-judgemental witness to everything.

35A – ‘parking’ (bracketing) differentiation as prerequisite for using resonance effectively (witnessing with C and constellation lense with R?); your story vs her story (collective and personal with R?)

A: So the resonance, you can recognise resonance when you feel it at a deep level and you know something, and when you, and for me you’re able to park that as my personal stuff, and actually use it to be, also use it whilst parking it, if you like, not making it my story. But using it to inform, er… the connection, if you know what I mean.
A: I work very organically, so I never work with any prescribed idea, I just have an idea and we let it evolve. It grows itself, you know what I mean, in the work.

13R – he makes sense by articulation through language; by being quiet; by slowing down; being mindful; being present
57R – use of L changing the energy, he doesn’t use much L; he uses movement

40R – the constellation lense means looking at the wider field (sound like Gestalt (bracketing?)

26R – facilitation is not a planned action
R: There’s very few words, well, the way I work. It’s very… often I don’t, often in the constellations I’m facilitating I don’t use words much at all. I use much less words than I did before, I use movement, that the people move.
R: Er… yeah, I usually there’s some different quality, and I can’t really find exactly what it is, but something that happens in me that I pick up in myself. I … it doesn’t always happen, I miss things of course, I don’t always… but I suppose it’s a bit like when I’m sitting with somebody I might be using, I might be using that constellation lense, right? Which is looking at the wider field.
R: And I’m … because I never know, and I’m sure you can ask other facilitators about this, you never know really what you’re gonna do next, it’s not like a planned thing, but things emerge at the constellation.

**Therapist as a Participant**

19A – engaging as a participant in the field not as an observer (compared to R’s representation of facilitator)
25A – being present to open to information in the knowing field; holding the ”then and now”

A: I think there’s an energy field between me and the client and whoever it is that person is working with on behalf of or for, or speaking to.
A: But I truly believe that once we engage in a piece of work together that I am not an observer, I am a participant.

42C – clear the mind before going into representation

C: Ok. Well, certainly before I represent, either in group or in a one-to-one clinical practice, I come into my own breath that brings me out of my head and I just let everything that my client has said to me just take a back seat there and I also let go of intention, so I sort of clear my mind. You know I do practice mindfulness, I sit on the cushion every morning, that’s a really important practice.

25 R – memory loss in constellation work as a facilitator and representative; facilitator=representation; when stepping out of the knowing field, the memory is impaired

R: And I was a little bit concerned about it because I couldn’t remember. Sometimes if it’s very very strong, I’d remember it, but very often I didn’t remember it. And I couldn’t understand this, So I went to my mentors in Germany, and there was a group of us sitting around a table and I asked people with more experience than me: I just told them the story, I said, I don’t remember the constellation and they kind of smiled at me “Of course you don’t.” And then I realised that what happens for me, and it was very interesting and helpful for me, that when I step in as the facilitator, I am representing the facilitator. So I’m stepping into the knowing field. And I’m … because I never know, and I’m sure you can ask other facilitators about this, you never know really what you’re gonna do next, it’s not like a planned thing, but things emerge at the constellation, and things pop into my head, or into my body and I say, yeah, you know, it moves like that, but what I didn’t realise before is that I’m stepping into the representation of the facilitator. So when I step out of the constellation, in certain way it’s gone, for me as well, yeah?

**The Personal and the Collective**

*Beyond the personal*

35R – collective unconscious and group unconscious
36R – grief as a transgenerational burden / from the collective
37R – identifying collective grief by previous experience
38R – collective perpetration/major historical events revealed in constellation
45R – are both personal and collective co-created?
41R – psychodynamic awareness working with the collective unconscious
42R – work with the cultural as the collective unconscious (Irish-English)

R: … and sometimes I don’t know how, why or when it happens but sometimes I, for instance if the client is crying, sometimes I just, maybe it’s a resonance again, I don’t know exactly, but I sometimes pick up something that this is not just about the personal. But something about the collective. … But it’s like sometimes I get the sense that maybe transgenerational or from the collective unconscious. For instance, particularly with grief, I think.
R: So, I might be feeling something about this, like an example would be when you know with men, the grief of men particularly all around the murder and war and the collective that we’ve been involved in, the collective perpetration, you know, or slaughter, you know. And sometimes I start, the client might be crying about their own story, but I start to feel sad, not about that story but something else, I have a sense, I have a sense that this is not just to do with the client.
R: But I might be just using a kind of psychodynamic way, but then I might be aware of the collective as well, so I don’t know what’s gonna happen.
R: Yeah, I, yeah, it’s like sometimes it’s … seems like it’s a cultural thing. It’s not just to do with this person’s own personal history but it’s a cultural thing….. So I might say that “I’m just aware of this cultural thing here.” That’s a kind of collective, type of collective.
Application of Group Therapy to One-to-one Setting

<table>
<thead>
<tr>
<th>R:</th>
<th>Yeah, it’s similar. How’re you with me now? You know, (psychodynamic way)</th>
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</thead>
<tbody>
<tr>
<td>19C</td>
<td>personal experience vs. experience that doesn’t seem part of my experience (personal vs collective?) (involving countertransference)</td>
</tr>
<tr>
<td>43C</td>
<td>Jung’s map of the psyche as a huge value in her professional and personal life</td>
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<tr>
<td>44C</td>
<td>Jung’s map: she has an experience of the process through down the complexes, accessing the collective unconscious, moving towards individuation</td>
</tr>
<tr>
<td>45C</td>
<td>our embodied spirit is at the core of individuation</td>
</tr>
<tr>
<td>56C</td>
<td>systemic or intrapsychic = ? collective vs personal?</td>
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</tbody>
</table>

C: And I pay attention to it. And the tension might have, er …, a particular tone that doesn’t seem part of my personal experience. (?) |
C: I had also trained in Jung. That map is of huge value to me. Not just professionally but personally. |
C: And, and, so from that map I’ve had a real sense, not just theoretically but in my own experience… |
C: Of the process through down, you know, through the complexes, down having access to the whole collective unconscious and who committed to the work ultimately moving towards our true self, individuation, right? |
C: And perhaps at the very core of that, yeah, is the more living form of our embodied spirit, the true self, the divine self and the fundamental spirit. |
C: Ok? You know, all through my work, I … leave it for a moment to meditate on that, and will you think of the spirit of the work, yeah. It seems to me so fundamentally important. |
C: Yeah. To have the skills of including everything that is relevant and then also the skill and the art to offer, you know, a particular witnessing, whether it is systemic or whether it’s intrapsychic, and in particular, whether it’s trauma that’s showing up in front of your eyes, ok? |
C: You know, shock trauma, in particular. And of course when you talk about systemic, I don’t think, I don’t just think about the external system in the family but I work very much upon the internal systems, and especially when the nervous system has been overwhelmed. |

A: Absolutely. I mean, my own, I’ve had lots of different experiences in my life that are energetic and personal, and with people, you know, that have died and moved on, and all that sort of, I have all sort of connections. I actually knew, and I know, I work from the knowledge, I work from the place in my heart knowing that none of us on an island, we are of course all connected. |

| Application of Group Therapy to One-to-one Setting |
|---|---|
| 24R | group experience is a little bit similar to one-to-one |
| 58R | his difficulty to answer my queation about one-to-one |
| 59R | one-to-one is less powerful |
| 60R | awareness of the larger field in one-to-one setting (constellation lense?) |
| 61R | attunement and strength of working alliance as determining factors for use of constellations in one-to-one setting |
| 62R | stones or paper card boards as tools |
| 67R | he advocates for group work: magnifying effect and faster process |
| 73R | different uses of family constellation work: business, illness, alternative medicine, short const. |
| 74R | applying constellations used in groups to one-to-one |

R: Yeah. I find it easier to talk about what happens in a group than one-to-one. But it’s a little bit similar… |
R: And we check in what suits them. So that can happen in one-to-one as well. In a way, I don’t want you to say anything but they might be named. Right? This is you, your brother’s there. “Ok, stand there. What’s it like?” You know, or „Just see what happens when you stand there.” |
R: Yeah. It’s not as powerful. I don’t think it’s as powerful. |
R: Er… well, first of all, I’m, not always, but I’m often aware of the larger field when I’m sitting with somebody, just my own awareness that this person is part of a larger system and just kind of aware of that, first of all, that it’s not just an individual, but there’s more to it, more to what’s happening. And then depends where we are in the work and how I am attuned to the person, then I might use the ‘constellation’ then. I’d use stones… |
R: I use… paper, or card board things on the floor to represent. Yeah. |
R: Well, I’d use it the same as I’d in a group, just ask a person to place the, I usually write the name of the person on the cardboard, they are quite big things, one to represent women and one to represent men, and then they have a cut-out to represent the way they’re facing. And they ask the client where they are in relationship to each other, just as you would do in a group. |
R: And then I might, I’d just first, firstly just ask them to look at it. What happens when you look at it? We’d just make some observation about it what’s happening. What does it feel like when you see your mother over there looking out the window, or whatever. And then I might ask them to, it depends now, ok? Because I think the person has to have a certain…, it’s like somebody said to me: you really need to have done quite a lot of
therapy to go into representing like that, I think. I wouldn’t throw somebody straight into it at all. You know. I think you really have to do quite a lot of work before you go into standing into the place of somebody else in one-to-one.

R: I think always in group there’s a certain magnifying effect of the group, any group. I mean therapy group. It’s like a magnifying, things become magnified, yeah, in some way, and the process might be faster.

A: I would use anything, I would use cushions and chairs, or I have a, I have markers, you know, paper, or we might even draw people and put them up, you know, representations and then create a situation where that person can sit safely with me, with my support to speak to that person.

A: How do we follow the system. So systemic work is very important actually in terms of established belief systems and behaviour patterns and then how, you know, and family scripts and life scripts around, you know, what is, what happens in this family. Or what do you believe should happen to you in your life because of your family script or your family system. Because what happened with your grandparents, what happened with your parents and what’s happening, what happens with your children. So it’s quite an important element of all therapy work, I think, is the systemic, system.

A: And so we explore and examine scripts and systems all the time.

A: You know when you are a child you don’t have a map. You follow your parents’ map.

A: Only as you get older that you can draw your own map for life or you can digress from the way that was always done because that’s the system.

C: Yeah, I wouldn’t tend to offer work to clients who haven’t yet embodied or can’t be embodied, meaning that they aren’t able to tolerate anything happens in their body.

C: I only offer it to clients who are safe in their body to see anything what happens.

C: Bear in my it’s working with one-to-one. The beauty of the group work is someone who has been traumatised can actually watch it from a distance. But, I would actually, if the client wishes, I can offer my own self to represent…

C: My floor markers are here in my practice in (deleted for anonymity), and you know in (deleted for anonymity) I use a piece of paper. I publishedly educate clients about orientation and other things that I might use within the constellation. If there’s an experience of come that around maybe, for example, the burden of misplaced guilt, I might use, you know, I’ve got soft cushions but I also got meditation cushions in my place, so I might offer a weighty soft cushion that would represent the burden of something that doesn’t belong to the client.

C: So obviously that using visualisation throughout the whole again I’m tracking what’s happening in the client’s body, yeah, and certainly, you know, tracking very very particularly, you know, breath. So breath might have a reflection of light loving or or contracted breath, I would look at any movement towards and away.

C: And of course when you talk about systemic, I don’t think, I don’t just think about the external system in the family but I work very much upon the internal systems, and especially when the nervous system has been overwhelmed.

C: I also work with parts within the client and that can be brought to the constellation, yeah?

C: But also as a somatic psychotherapist, you know, I work very much on the different systems within the body.

C: An example being that if somebody is very ... disorganised, you know, in the nervous system, it tends to take them to agitation, distress and potentially overwhelm, ok?

C: I actually might support them getting in touch with bone. Your actual bone.
C: You know that’s firm and stable, palpable, constant. And so I would use another systemic in the body to act as a resource or helping regulating, ok?
C: Or acting in a very concrete way but you know you can also develop dialogues within different parts of the body, that’s also working very systemically, ok?
C: I, I find it, oh, gosh, I cannot not work systemically.
Appendix 4

INFORMATION FORM

My name is Enikő Takácsy and I am currently undertaking a BA programme in Counselling and Psychotherapy at Dublin Business School. I am inviting you to take part in my research project which is concerned with the exploration of the embodied experience of a phenomenological field called the ‘knowing field’ (term derives from Bert Hellinger’s Systemic/Family Constellations therapeutic method). To put it simply and briefly, I will be examining how the therapist knows what is going on with the client (mainly bodily experiencing). As the existence of this field has not yet been proved scientifically, I will need to refrain from giving you too much information to avoid confirmation bias. Besides the ‘knowing field’, I will also be looking at the use of the systemic thinking in individual therapy (if any). I will be exploring the views of 3 integrative therapists.

What is Involved?

You are invited to participate in this research because you have been identified as being suitable, being an integrative therapist. If you agree to participate in this research, you will be invited to attend a one-to-one interview with myself in a setting of your convenience, which should take about half an hour but no longer than 45 minutes to complete. During this I will ask you a series of questions (max. 12) relating to the research question and your own work. After completion of the interview, I may request to contact you by telephone or email if I have any follow-up questions.

Confidentiality

All information obtained from you during the research will be kept anonymous. An audio recording and a transcript will be made of the interview but again these will be anonymous and will be handled accordingly. Your participation in this research is voluntary. You are free to withdraw at any point during data collection without any disadvantage.

If you have questions regarding your rights as a participant in this research, please contact Dr. Gráinne Donohue, Research Co-ordinator, Dept. of Psychotherapy, School of Arts, Dublin Business School grainne.donohue@dbs.ie
CONSENT FORM

Protocol title:

An exploration of the embodied experience of a phenomenological field called “the knowing field” (term associated with Bert Hellinger’s Systemic/Family Constellation method) along with the use of the systemic-constructivist perspective in individual therapy.

Please tick the appropriate answer.

I confirm that I have read and understood the Information Form attached, and that I have had ample opportunity to ask questions all of which have been satisfactorily answered. ☐Yes ☐No

I understand that my participation in this study is entirely voluntary and that I may withdraw at any time during data collection, without giving reason. ☐Yes ☐No

I understand that my identity will remain confidential at all times. ☐Yes ☐No

I am aware of the potential risks of this research study. ☐Yes ☐No

I am aware that audio recordings will be made of sessions. ☐Yes ☐No

I have been given a copy of the Information Form and this Consent form for my records. ☐Yes ☐No

Participant _______________________________ _______________________________

Signature and dated Name in block capitals

To be completed by the Principal Investigator or his nominee.

I the undersigned, have taken the time to fully explain to the above participant the nature and purpose of this study in a manner that he/she could understand. We have discussed the risks involved, and have invited him/her to ask questions on any aspect of the study that concerned them.

__________________________  ____________________________  __________
Signature  Name in Block Capitals  Date