

RESISTANCE

resistance: the act of avoiding, opposing, or standing up for oneself against, a person, force, idea or influence.

Discussion

In Gestalt therapy, resistance is recognized as a strength, as a creative adjustment for managing in an imperfect and difficult world. It may be a defense against facing something painful, difficult, or threatening, a protection of one's privacy and integrity, a form of organismic self-regulation and self-support to protect oneself or to meet an important need, or a way of maintaining one's difference from the environment (PHG, 1951, in Wheeler, 1991, Ch. 5). However, resistance can also be a problem, when it interferes with a person's awareness, contact, movement towards meeting a need, or letting go of unfinished business.

Resistance can take many forms: (1) lateness, missed appointments; (2) blocking or avoidance of certain feelings, thoughts, memories, behaviors; (3) lack of acceptance of parts of oneself; (4) unresolved internal struggles between conflicting needs of the self; (5) body processes, such as muscle tension, not breathing fully, sensory desensitization; (6) fixed Gestalts (patterns of behavior) that have become rigid character structure; (7) counter-reaction to a therapist's perceived intrusiveness or pressure; and more.

In accordance with Gestalt's paradoxical theory of change, the therapist accepts and supports "what is", i.e. the resistance. (Polsters, 1976, p. 260) Gestalt therapy does not label this interference as resistance or denial or pathology (Kepner 1993, pp. 61-2). Rather, resistance is seen as an "opportunity for intervention" (Zinker 1994, p. 187). It serves as a signal that a sensitive issue has been touched upon. Then the work is to bring to awareness the meaning and purpose of the resistance, in order to understand how it is helping and/or hindering the person and the work.

The Gestalt therapist is very much interested in the "how" of the resistance, e.g. what process does the patient use to avoid something painful, to protect him or herself. In this aspect of the therapy, what is resisted or avoided is of lesser importance than the avoidance process. (Breshgold, 1989, pp. 86-7)

In contrast, resistance in traditional psychoanalysis was considered to be "opposition, frequently unconscious, to allowing memories or desires, which have been repressed, as unacceptable or disruptive to emerge into the conscious mind" (OED, 1989). Patients were expected to share all their associations without censoring (Yontef, 1993b, p. 6). The holding back of one's thoughts or feelings, or the lack of acceptance of the therapist's interpretations were labeled as resistance. (Perls, 1947/1992, p. 130). This was seen as a self-destructive tendency to be overcome or eliminated by the therapist.

Illustrative Quotations:

• **PHG** : Resistances are "taken as active expressions of vitality." "...in the defensive characteristic, there is always a beautiful affirmative, childlike feeling: indignation in the defiance, loyal admiration in the clinging, solitude in the loneliness, aggressiveness in the hostility, creativity in the confusion. (1951, pp. 248, 285)

• **Laura Perls** "Any *fixed* Gestalt in time becomes a block." "In Gestalt therapy we work through the resistances [by] de-automatizing those behavior patterns which have become impediments by bringing them into the foreground where they can be experienced again as conscious activities that the patient can then take responsibility for: 'This is what *I* am doing. What does that do for me? Do I want to do that now? What else could I do?'" (1992, pp. 138-39)

• **Polsters**: “We view [resistance] as... a struggle *between* or *among* parts rather than...[a resistance to] what might be in his or her own better interest.” “It is a “move beyond the concept of resistance into the view of the individual as a population of ideas, wishes, aims, reactions, feelings, which vie for full expression. Giving voice to these multiple factors is like giving suffrage to a previously disenfranchised segment of the population. It allows these parts of the person to vote and be attended to rather than relegating them to dissension and sabotage (1976, pp. 275, 273).”

• **Polsters**: “This concept of resistance has, of course, had a useful history. Through it contradictory motivations inhibiting behavior and feelings have been recognized. People do interrupt behavior and feelings which *seem* to be in their best interest. People *should*...enjoy themselves at picnics. They *should* succeed at work, cry when sad, play with their children, have orgasms when sexually engaged, etc. When it is obvious to us and to themselves that they should be doing these things but are not, we look for resistance. Ideally then, the resistance would be obliterated, leaving the individual free to be the person he could or should be.

The troublesome implication is that resistance is, first, alien to the individual’s best interests and second, like a germ, its removal would permit healthy function. Psychological leeching of the unhealthy organism does not work, however, because what is called resistance is, after all, the individual’s own behavior, not a foreign body. It is through re-incorporation of the alienated energy bound up in this behavior that the individual achieves more full functioning.” (1976, p. 261)

• **Breshgold**: “In GT the therapist focuses on and is more interested in the *avoidance process* itself than in *what* is being avoided. The focus is at the contact boundary, and the goal is development of healthy ego functioning via increased awareness rather than the psychoanalytic goal of uncovering repressed material from the unconscious. ...if there us a tendency to avoid something, this tendency exists for a good reason. ...resistances [are] viewed from the perspective of the patient. The work of therapy is to explore these reasons, and to enable the patient to become fully aware of what they are. This can be described as ‘analyzing the resistance’ ...and viewed as supporting the resistance.” (1989, pp. 86-87)

• **Yontef**: “...resistance is recognized and acknowledged. ... It is not understood as something undesirable, just understood. ...Resistance is not broken down or jumped over.” “Resistances need to be respected...as something [patients] choose because [they] meet an important need.”

“Resistance is respected in Gestalt therapy. It is seen as something to be brought to awareness, examined, and understood, not something to be overcome or eliminated. The patient can then integrate or assimilate what has been understood. Resistance is unhealthy only when it is not in awareness and part of the organism’s creative adjustment.”

“Historically, Gestalt therapy has been associated with rebellion against authority and promoting nonconformity. Do we not become authoritarian ourselves when we set ourselves out as the person to decide when the defenses should be battered down?”(1993b, pp. 12, 28-9)

• **Zinker**: “...resistance is what the therapist experiences. ... the client[’s]...experience is that of taking care of himself. (1977/1978, p. 24) “Resistance...is a term that connotes external observation of a person’s reluctance. ...our own experience is that we are acting to preserve, maintain, and enhance ourselves and [our] psychological integrity”. “... resistances can be ways of filtering and regulating contact” “...retroflexion [holding back] is a basic value of civilized society. ...[It] prevents attacking and hurting others or revealing painful truths to others, ...so as not to be too harsh, too critical, too transparent, or too bold with one another” (1994, pp. 118, 142).

“We often talk about resistance as if it is an exclusively intrapsychic phenomenon. ...Resistances, however, originate in interactions. It takes two people to produce a resistance.

Resistances become intrapsychic when they become habitual as the same interactions are repeated again and again. The person responds to each new situation if it is an old situation, not noticing other things that are happening and therefore, carrying...into new situations what they learned interactively. (1994, p. 187)

- **Kepner** : "...it is considered crucial for the [abuse] survivor to learn that experience can be *managed*, that choices can be made about the pace of experience, that taking a break is a legitimate *choice*, not just 'avoidance', and that the process of therapy, unlike the abuse, is *his* to determine." "I have seen therapists...labeling...hesitation as 'resistance' and not recognizing it as a signal that pacing needs to be attended to. These signals occur indirectly because for the survivor they have never been linked before to an available choice: to take a break, do something different, say no, slow down and digest."

"*Grading* of experience has to do with choices about what *level of difficulty or intensity*...one is ready and supported to experiment with at any given time. *Pacing* has to do with the *rhythm and frequency of work* on an issue. (1995, pp. 79, 81, 82)

- **Mahoney**: "Resistance to change, often mistakenly seen as oppositional behavior, is a necessary polarity of a person's constant balancing act between conservation and change. It is the human need for coherence, continuity, structure, order, and the comfort of familiar habits and patterns of behavior, even when the "immediate benefits are offset by long-range costs."

"Resistance to change – even desired change – is common, especially when the change is experienced as 'too much' or 'too quickly.' Such resistance reflects basic self-protective processes that serve to maintain the coherence of the living system." (2006, pp. 173-4, 257)

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