

VIEWING THERAPY THROUGH A NEW LENS

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Abstract

This article presents a snapshot of a family in crisis and the author's spontaneous intervention. It deconstructs the intervention and the father's perceived personality type through the lens of the Enneagram Personality Typing System. It introduces a hypothesis about why the intervention was effective from the vantage of this system with comments about common transference and counter/transference relationships. A side bar with brief comments about each of the nine Enneagram types in therapy is included.

Note: The Enneagram personality system has been developed outside of traditional therapy practice models. It is currently the subject of clinical inquiry for a number of graduate dissertations. A partial list of these is included on the Enneagram-related research page of the International Enneagram Association website.

Key words: Enneagram personality types / transference and counter-transference / family crisis

“Sometimes the magic works and sometimes it doesn't,” said Chief Dan George in the movie *Little Big Man*. This philosophy resonates when I'm not sure why my actions as a therapist work or don't work. I mentally archive the mysterious cases as puzzles until new theoretical insights, even years later, provide the missing pieces. For instance, a client I'll call Linda was helped after I acted intuitively with her father during a family crisis session. The Enneagram eventually contributed to my understanding why that intervention had such a positive outcome.

Linda was a severely depressed woman who was hospitalized after a near fatal overdose. When I evaluated her, she was still lethargic and determined to end her life. She wanted to divorce her husband, yet was certain her father would reject her if she did so.

All three of Linda's older sisters and her mother were at the hospital to support her during the intake visit, although the mother remained very quiet and withdrawn. Linda's father, Harold, was not there. Family members described him as a “my way or the highway kind of guy” who was sometimes violent, often intimidating, and never admitted to any wrong. Linda's husband was not present and, as it turned out, she wasn't ready to consider the possibility of including him in her treatment.

Suicidal intentions signify a need for major change. The question, “What needs to die?” can be useful. Linda believed she had no choices. So, as we developed a bit of rapport, I suggested a family-of-origin session, to gather information and identify resources to begin evaluating her belief system.

All the sisters agreed to attend and to bring their mother. None of them wanted to risk setting off Harold’s anger by asking him to come, but they allowed me to invite him. They did not believe he would show up and, if he did, expected him to leave as soon as anyone began to talk about the unflattering inside workings of their family.

Harold did agree to attend. It was interesting to sense the change in the room when he entered, seeming to radiate control of all the space around him. I thanked them all for coming, and then asked each person’s thoughts on how the family might be a resource for Linda at this time.

The already tense situation heightened as one of Linda’s sisters saw this as her opportunity to accuse Harold of abuse. No one disagreed or defended him, and within seconds, Harold headed for the door. From a surge of pure gut energy I reacted to block his exit. “Yeah, this is just what your daughters expected,” I challenged. “They figured you would be too chicken to stay, but your daughter is suicidal and she needs your help now. She needs you to stay.” After a tense stare-down between us, his face softened and he returned to his chair. It could not have been easy for him to realize he was going to hear more about the destructive effects his bullying and abuse had had on the family.

With the information they gave me, I drew a large genogram to frame the current circumstances in a developmental context. As one might predict, violence and misused authority shadowed Harold’s own childhood. Despite his gruff efforts to minimize this fact, it seemed to help his daughters to learn more about both their parents’ stories in relation to their own. By the end of this long session, Harold acknowledged damage he had caused his family and he apologized. In response, his family neither abandoned him nor backed away from their truths.

When Harold revealed his own humanity, he seemed to open the door for Linda to live outside of his control. He had demonstrated his love for her by staying and facing the consequences of his actions. Linda’s energy increased as she appeared empowered by this new information. Released from her limiting beliefs about Harold’s omnipotence, she was free to make an adult choice about staying married or not. I don’t know if she remained married. I referred her to a therapist in the community, and she was released from the hospital without suicidal ideation.

The experience with Harold and Linda stayed in my “interesting case archives,” based partly on how I felt at the time. I was fully energized by the encounter, despite the lengthy session and brutal content. Having put us all in the spotlight, I certainly didn’t want to make things worse. I was anxious for a good outcome. I took a big risk, calling people names and blocking their exit—not my normal

style. If I had had the time to think, I may not have been as impulsive, and I might have lost my edge.

The critical, or “the magic” moment was when Harold decided to stay. If a client with a different personality style, but similar family dynamics, had tried to leave, the same intervention could have been totally ineffectual. I’ve had clients who needed to leave the room in anger to collect their emotions, and then return. Trying to stop them would only made things worse. Had Harold left, I felt certain he would not have returned. We make these clinical discernments intuitively, using all the information and experience we have at the time.

Seasoned therapists familiar with various client defensive styles can still be blinded by their own personal defenses. A client’s personality can provide a pleasant or provocative experience for the therapist, while at the same time, lessening the possibility of change for the client. For example, we all know clients who use their charm and interpersonal warmth to avoid what may be painful. They have often been nurturing everyone since they were children, and psyching out the wounded healer is automatic. I have felt “special” in these relationships. This feeling is a red flag for me.

At another extreme, aggressive people like Harold have a nose for “weakness.” They are likely to judge and discount the therapist who hesitates too long searching for the proper words. They respect emotional honesty, and then they begin to develop trust. Harold demanded instinctive and immediate action. I enjoy this engagement of my own life force and knowing the Enneagram helps me employ it more consciously.

Introduction To The Enneagram

Years after working with Linda and her family I was introduced to the Enneagram Transpersonal Model for understanding personality. This multifaceted system elegantly describes nine distinct ways people filter experiences to support their predisposed worldview. Initially, its esoteric language and the idea of personality by the numbers turned me off. Yet, its compelling insights drew me in. This article reveals my appreciation of this system.

I initially learned to understand the Enneagram by attending “oral tradition” or “panel” sessions. Panels are composed of individuals with a common personality style who are interviewed about their habits of attention and underlying motivations. I also participated in panels in order to discover more about myself. This method of teaching is designed to develop one’s self-observation capacities and does not always reflect how we might idealize ourselves! My tendency to work harder when my feelings are intense, my relentless inner critic, and my over-identification with an ethical stance were similar to others on the “Type One” panels.

When strangers discover unique commonalities, it can inspire spirited conversation. This is similar to the way people at a party stumble onto the fact that they attended Catholic grade schools and then carry on as if they all went to the same school, or how children of immigrants from a particular country share idiosyncrasies of their common heritage. Likewise, those of the same Enneagram personality note common themes that are inherent rather than cultural.

Insights gleaned from an understanding of the Enneagram have been useful to proponents of the human potential movement, spiritual study groups, popular psychology, and even some business circles for decades. Ironically, at least in the United States, clinical psychology has been slow to appreciate this approach to understanding personality type.

I have found that applying this lens to clinical work offers a valuable resource. Its diagnostic acuity is remarkable; it is democratic in recognizing strengths and in predicting unhealthy traps of each personality type. The Enneagram is not a model of therapy. However, when appropriately used, it can enhance any treatment approach, suggesting a general direction for treatment that is influenced by the parameters of type, not withstanding individual qualities. It offers a fresh map of defensive patterns, and a foreshadowing of likely transference and counter transference territory, thus inviting better outcomes. The spiritual dimension of the typology is unique in the way it directs the therapist to listen for hidden inner resources.

In my quest to apply this system to my work, in addition to observing panels, I mined the work of other Enneagram authors and teachers for clinical applications. I sought a practical understanding of how the Enneagram would apply to psychotherapy process and outcomes. I also interviewed people about their personal therapy, looking for common themes. What worked, and what did not? “Given what you know about your Enneagram type,” I questioned, “what advice would you give a therapist?” I asked them to give examples of how they would respond within different scenarios. Some relevant quotes are included in this article. (Quotes from type Eights were previously published in *The Enneagram Field Guide*, Bartlett, 2003)

Harold Through the Lens of the Enneagram

As I learned more about the Enneagram through interviews, various clients I had worked with in earlier years came to mind. Harold was among them. When viewed through the Enneagram lens, he was operating from the personality type of “Eight,” described by various popular Enneagram authors as: “People who need to be strong, to prevail over circumstance,” (Condon, 2007); those who may “claim power whether others like it or not” (Bast and Thomson, 2005); exhibiting “...traits of toughness, manifesting through such descriptors as “confrontativeness,” “intimidation,” “ruthlessness,” “callousness” (Naranjo, 1994); and who, “...exaggerate everything they do. And they do it in a way that the rest of us would label ‘negative’” (Rohr, 1992).

As these words indicate, when acting defensively, Eights are often aggressive and impulsive. They can be overpowering and insensitive to others. They focus their attention on power, overt control, excess strength, and vengeance. They deny the impact of their bullying on others, ignoring their own vulnerability and giving them a false sense of omnipotence. This often results in damaged relationships, as Harold discovered.

Fortunately, individuals of this style also possess an instinctual sense of truth and the inherent ability to relate to others without prejudice. When they are healthy, they share their abundant power and energy, making them natural leaders who will work for the common good. Unguarded, they can reveal the tender side of their emotions. Suggesting this positive side, authors David Daniels and Virginia Price label type Eight “the Protector” (Daniels, Price, 1997).

Whether because of actual circumstances or selective memory, common childhood themes are reported by each Enneagram type. Eights often say they learned to conceal their openness as they observed a world in which the weak are often victimized, and truth is defined by the most powerful. This scenario became evident as Harold described his childhood. Eights, especially American men, get their tough exteriors reinforced. They embody the John Wayne archetype. Their capacity to handle pain without acknowledging it, and the support they get from others for being strong, steer them away from self-reflection. We generally do not see Eights in therapy until they have a major crisis.

According to many interviewed who identify with this personality type, the most likely reason for them to seek therapy is the threat of losing significant people from their lives, i.e., if someone important to them “has had it” with their behavior. An Eight said, “My wife was leaving me. I had to see how I hurt people ‘who matter’, and how I had denied the importance of other people’s feelings. I deny feeling really bad about hurting people, and this works until people who matter leave.” Another Eight added, “I had to give up the belief that it’s okay to hurt people.” Seemingly, Harold’s entire family had also “had it” with his tyranny.

When Harold headed for the door, his anger was intimidating. One of the Eights I interviewed gave me a glimpse of how Harold may have felt. Describing his own therapy, this man said: “Anger is a quick closing of the door against what is about to happen. On this edge Eights are out of touch with their feelings, except for anger, so wrapped in denial, and so afraid. When a threatening moment comes, along with it comes the risk of being exposed and the weak self being uncovered. The defense is to shut down, to suddenly not care about the process, and to deny the moment that had just loomed close and threatening.” Harold probably felt ashamed of the harm he had caused, as well as anxiety about what he was going to hear. Other relevant comments from Eights about how they act when they feel defensive in therapy are:

- “I test, and challenge you, to see if you are willing to be there with me. I need to know.”
- “I have spent my whole life with people not getting me. I assume you aren’t going to get me either. I come to therapy with a chip on my shoulder.”
- “A therapist needs to understand we will be suspicious and filled with angry denial, and if she can’t stand up to that, we will go elsewhere. You need to understand, we want help more than we will indicate.”

Eights say therapy has a chance to succeed with them if the therapist sees past the defensive attitude and the fear they mask. They perceive some therapists as intimidated, while other therapists adopt a false toughness. They warn that they read the therapist quickly and give up in disgust if the session doesn’t look hopeful. Their recommendations to therapists working with them include:

- “Therapy needs to be fast and hard-hitting early on.”
- “I need to perceive that you have something of power to offer.”
- “For the therapist to meet the Eight energy effectively and ‘hold the space,’ they need to be very direct, offering a solid dose of reality.”

The Transference Relationship

Sometimes the personality type of another is immediately clear to me, and sometimes not. These days, some clients come to therapy already familiar with their type, hoping to make use of it in their treatment. I have some guesses about the Enneagram personality type of Linda, and other family members in this case, but not enough to write about. Regardless, a working knowledge of my own personality type is a most reliable resource. When treatment relationships are not so easy and the chemistry feels off, before the thread is lost, I have another resource—me. With this awareness I can shift toward a more effective use of self. If one accepts the proposition that the relationship is a curative element in psychotherapy, knowing what type bias the therapist brings to the relationship is most valuable.

As I mentioned, my Enneagram style is One, described by popular authors as people with: “a strong unconscious tendency to compare reality with what should be” (Condon, 2001); who “often see only what is wrong, what needs fixing” (Bast and Thomson, 2005); “the Perfectionist,” (Daniels and Price, 1997); and “the Reformer” (Riso–Hudson). I can taste the accuracy in these words! When I’m caught up in the defense, I’m inclined to focus on ideas about how life should be. This life-long practice guards against personal criticism and protects my ego, as it separates me from reality. This orientation can invite a disappointing therapy outcome.

Fortunately, the defenses of my One style are offset by a deep appreciation for people exactly as they are. The transpersonal language of the Enneagram coins

this “Holy Perfection.” This is a nice touchstone when I’m in the thick of a difficult moment, and I’m reminded I have no control over outcomes. My clients continue to teach me that when the conditions are right, they will break through in their own way.

The basic personality styles of Eights like Harold, and Ones like me, have a lot in common. Both share a desire for a just and fair world. Both are willing to commit energy to the greater good as they see it. Each of these personality structures emanate from gut instinct and manage anger as a leading force in relationships. However, despite these similarities, they appear very different.

Similar to how overachieving or defiant behavior may be rooted in the same family dynamics, Enneagram Ones and Eights have opposing strategies. Ones have to be good and follow the rules, and Eights challenge the rules—as each perceives “the rules.” Each adaptation is useful in one circumstance, but can lead to trouble in another.

Strong emotions, especially anger, incline a defended One to over-rely on what seems right, correct and logical. The mind is a great resource, but in the service of denying the gut, it will miss what is important every time. When bound by the fear of being incorrect, denied emotions can take a righteous tone. A defensive Eight will sense and attack the dishonesty of this righteous persona. The resulting power struggle could be called “prissy Super Ego” meets “get over yourself Id.”

Eights, demanding they be met on a gut level, can be either a One’s worst nightmare or an invitation to freedom. When the One stays present in his or her body, there is no self-deception. This helps me understand why I felt energized when confronting Harold. A One’s tendency to sublimate impulse for reason, when directed well, can persuade others to listen rather than act. This may help to explain how my interaction with Harold changed the tone of the meeting and allowed us to proceed.

Even when hidden behind bullying, an Eight’s inherent capacity to respect truth is a spiritual resource. Cutting through denial opens the potential for healing to begin. Linda’s need touched Harold’s heart at the same time his respect for truth broke through his denial. He became the best father he could in the moment. Good enough.

Therapists often see satisfying results in clients without using a personality typology. Many of the people I interviewed were helped in exactly the best ways for their Enneagram type by therapists who had no apparent knowledge of the system. However, there were other retrospective reports, by individuals of the same type, of negative experiences. In those cases, Enneagram insights might have improved the therapy.

I helped Linda and her family well enough. Understanding the Enneagram would have simply cooled my fever by giving me a handle on what was happening. Calmer, I don’t think I would have called Harold a “chicken!”

Enneagram typing provides a psychological map of personality. It offers a way to see beyond behavior and understand positive motivation. It contains depth and complexity, but it is also intuitive and easily accessible. Following are brief introductory comments about each of the Nine Enneagram types in therapy.

Ones identify with being right. They are usually idealistic and interested in making the world better for everyone. Noticing what needs improving, their attention is drawn to ethics, fairness and “work before pleasure.” Fearful of being criticised as unworthy, they may overcompensate and become resentful. Tightly wound rational story lines often mask emotional truth in therapy. At their best, they accept their own and other’s flaws with compassion and humor, enjoying life’s pleasures.

Twos identify with their relationship intelligence. Their attention is drawn to engagement with others. They utilize flattery in pursuit of being liked and looking good, pleasing and supporting others selectively. Fearing no one can—or will—meet their needs, they repress them, sometimes giving to get. They can engage therapists warmly to avoid what is painful or appear angry and exhausted. At their best, they are true to themselves even as they recognize and support the best in others.

Threes identify with personal success. They are generally competitive, creative, optimistic, and able to accomplish whatever goals they set for themselves. Their persona is in concert with American ideals. This can be a blind spot for therapists who do not see past the successful persona. Afraid of failure, this type is amazing at achieving any agenda they perceive in therapy, even to their own detriment. At their best they value others, recognize the importance of feelings and are flexible and generous with their abundant energy.

Fours identify with being unique. They are attuned to the creative and authentic, to depth and the paradoxes of life. They can also be consumed with feeling either special or flawed, noticing what is missing, creating drama, and seeing themselves as exempt from ordinary expectations. Sensitive to abandonment, they may withdraw or be provocative, to avoid this fear. They are often in a family scapegoat role. At their best they naturally balance the material and spiritual parts of life and allow themselves to be both productive and happy.

Fives identify with being self-contained. They value their mental acuity, and their attention is drawn to gathering information, maintaining privacy and observing the external world. They guard their inner life closely, fearing others will intrude and overwhelm them. Their reserved affect is easily misread and sometimes misdiagnosed. Loneliness and

communication difficulties often precede therapy. At their best, Fives are engaged in their own life through their relationships and work, and they are willing to share their time, knowledge and emotions with others.

Sixes identify with being highly perceptive and intuitive. They are loyal, possess an offbeat sense of humor, and see the other side of any assertion. Their attention is drawn to staying safe by sorting for danger and imagining worst-case potentials. Fearing misused authority, they are hyper-vigilant in seeking certainty. This guard of doubt and mistrust can confuse others, including therapists. At their best, they are skillful problem-solvers, offering a creative vision of shared possibilities.

Sevens identify with being happy. They plan for fun, interesting, and pleasurable possibilities. Their quick mental energy helps them connect ideas and see the big picture. They do not like being limited and fear they will become trapped if they acknowledge pain. They engage others, including therapists, with charm and can reframe any negative into a positive. At their best, they value other people, and are unusually accepting and tolerant as they share their expansive sense of possibility.

Eights identify with being powerful. Their attention is drawn to overt control, excess, strength, protection and justice. They have a gut sense of where actual authority is located and are prepared to protect those who are vulnerable. They fear personal vulnerability. They expect to be met honestly and can intimidate therapists who overreact or draw back from their aggression. At their best, Eights are sensitive and natural leaders, sharing their power and energy in a community spirit.

Nines identify with being peaceful. They easily understand all points of view while seeking harmony and comfort. They connect with others in a way that allows everyone to feel valued, but they can lose sight of themselves, potentially becoming discouraged and passively angry. They fear personal conflict will lead to rejection. Therapists need to be aware of the tendency of this type to appear to go along with an agenda in therapy, even if it is not what they need. At their best, Nines recognize their own importance, communicate what is right for them, and remain empathetic with others.

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