

# The Pervasive & Persistent Power of Projections

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Projections are usually unconscious, and serve the ego by externalizing what our parents, community, and culture do not approve of in our behavior. We anticipate how others are going to respond to us based on how our parents treated us during our development. We learn to repress or deny parts of ourselves in order to not incur their disapproval. We project onto others *now*, how our parents treated us back then.

Then, we betray our true self, in order to be accepted. Projections often occur with significant others like our spouse, lover, friend, sibling, or boss. Sometimes our projections are generalized beyond specific individuals to, for instance, all men, or all women, or all authority figures.

One origin of projection is trauma. Early experiences that cause fear, anxiety or shame tend to get projected onto later life experiences. These generalizations often serve a protective purpose, attempting to prevent a re-occurrence of similar experiences that could physically or emotionally harm us. But the tendency to generalize goes way beyond what is accurate or useful. If you can become aware of your projections and learn how pervasive, persistent, and powerful they are in your life, you can begin to alter the power they have over you.

New methods of treating these projections and the traumas that are their origin constitute a new frontier in psychology that can change your life.

## How projections develop

Let's first understand how projections develop before describing how they can be successfully treated.

Linda's mother had her on a diet just before she turned five years old. Her grandmother called her Miss Chubby, and her father supported the weight loss program. This started an unrelenting campaign by Linda's mother to monitor her weight throughout Linda's life. Obsessed with her own weight and appearance, and obsessed with Linda's mother's weight, the grandmother launched a family legacy that later permeated Linda's entire life. A series of three athletic coaches also became part of the chorus monitoring Linda's weight in her adolescence and she soon became bulimic (gorging and vomiting).

I would not have suspected this as part of Linda's history when she walked into my office. An attractive woman of average height and build, she looked perfectly "normal", including her weight. She reported, however, that she wanted to work on how to lose weight. Having already

undergone surgery on her legs, and preparing to embark on additional surgeries, she perceived herself as “fat” and believed everyone else saw her as “fat.”

Linda’s view of herself as “fat” is a phenomenon called introjection: she had unconsciously taken on her mother’s and grandmother’s views of her as her view of herself. In other words, she saw herself as they saw her.

Linda’s belief that everyone viewed her as being fat provides an example of projection. How her mother and grandmother saw her set the stage for Linda to believe how everyone saw her.

In another example, Katie grew up with a mother who admitted she never wanted to give birth to her. She abandoned her to a sister upon birth, and undermined her at every turn from the time she took her back at age six months, to the age of thirteen, when Katie left home. Katie’s therapy focused on how she anticipated everyone in her current life would relate to her in a similar fashion. She expected others to reject her, abandon her, betray her, criticize, judge and undermine her like her mother did. She consciously realized that she was often paranoid but couldn’t help herself.

Katie’s expectation that others would treat her like her mother treated her constitutes a very powerful form of projection. She was largely unconscious of her expectations and therefore not in control of them. Katie’s projections expanded to the point that she anticipated almost everyone would undermine her. Projections have a way of spreading far and wide beyond the original traumatic experiences. Projections also have a persistent quality, as illustrated by Katie’s dealing with this for over four decades.

### **Projections prove powerful, pervasive and persistent.**

“You are nothing but a set of obsolete responses.”

*The Cocktail Party* by T.S. Eliot

Projections grow powerful because they are usually unconscious and often emanate from unresolved traumatic experiences. Becoming negatively impacted by traumatic experiences, we anticipate that others will behave in the negative way we experienced earlier in life and we strive—even unconsciously—to avoid anything or anyone that resembles that experience. It becomes a conditioned response—like Pavlov’s dogs salivating to a bell. While being triggered by any experience even remotely reminiscent of the trauma, we often remain both unaware of this process and not in control of it.

Since traumas create a tendency to anticipate something similar happening in the future, we either work very hard to avoid similar people and situations, or we prepare ourselves mentally in an effort to protect ourselves from the trauma happening again. Early trauma often gets metabolized into a belief. Traumatized children often come to believe they deserve how they are being treated. Children frequently blame themselves rather than discerning that the parent is the one who has the problem.

Telling Katie that her colleagues at work were not really out to undermine her seldom helped. She already knew that on a conscious level, but projections come from our unconscious, and their acting out bypasses our rational mind. Projections therefore have power, because we usually remain unaware both of engaging in them, and that they originate from unresolved trauma.

## **Pervasive**

One might think that Katie would only project her mother onto people who reminded her of her mother. For example, someone in authority over her, an older woman, a woman who looked like her mother, a woman who had the same tone of voice or personality. Indeed, these people did “trigger” Katie. Surprisingly, men not in authority over her or colleagues and peers on her job also noticeably triggered her, if not as severely. It is remarkable how broadly the generalization occurs, perhaps because the body is “wired” to protect itself. The more severe or repetitive the originating traumas, the more pervasive the reactions become.

## **Persistent**

Katie left home at age 13, so for over thirty years she had projected what occurred between her mother and other family members onto her current relationships. Projections often do not heal spontaneously, although some people can work through them by relating to healthy people who are able to confront the inaccuracies of those projections. When we remain unaware of our projections, though, they often set up a self-fulfilling prophecy with others and they can persist indefinitely.

## **Insight is Often Not Enough**

Some people, once they are made aware of their dysfunctional projections and beliefs, can act in new and more functional ways going forward. If their trauma history was not severe or extensive, some people do profit from increased awareness through meditation and conventional therapy.

In my own practice, however, a certain percentage of my clients do not receive much benefit from conventional therapy and are either unwilling or unable to meditate. I frequently encountered a Linda or a Katie that I could not reach in a way that really made a difference using conventional therapy.

As a result, I searched for methods that would bring about deeper and more lasting change in those for whom talking and insight was not enough.

So, how do we become aware of our projections and how can we deal with them?

## **Monitoring overreactions**

One way to uncover projections is to monitor our overreactions to a situation or person. George can't stand it when his wife wakes him up suddenly from a nap. Emily flips out when her husband looks at her with a squint. Jill crumbles when John speaks in a stern voice. Jim gets irate when his wife leaves cups and glasses all over the house. When overreactions like these occur, they serve as a window to an earlier life experience that holds one or more unresolved problematic or traumatic experiences. It may be just one unpleasant memory, or it could be a series of intolerable traumatic events. Overreactions provide an excellent way of discovering projections driven by earlier life experiences.

Not all projections are negative. We can project positive things onto others based on positive experiences in past relationships. But either way, projections warp our ability to assess current reality accurately, and can lead to harmful distortions. Once aware of these past experiences that are getting triggered, we might learn to reduce the overreaction. However, if the overreaction occurs repeatedly, or becomes extremely intense, it behooves us to discover and treat the earlier traumatic experiences.

## **Treatment**

There are a number of treatment alternatives once we become aware that our projections are causing trouble. Engaging in conventional "talk therapy" is the most common option and it usually provides some assistance in gaining more insight. Sometimes, that insight can lead to emotional and behavioral benefits; however, as with Linda and Katie, that was not the case. New forms of therapy using the body's energy systems promise to reach those clients for whom talking and insight are not enough.

Many energy therapies exist today. I have trained extensively in many of them. The method that has produced the best results in my clinical experience is called Advanced Integrative Therapy (AIT). AIT (originally known as Seemorg Matrix Work) was developed by Asha Clinton, MSW, PhD in the late 1990's. Initially trained as a cultural anthropologist, then a clinical social worker, she also trained at the Jung Institute and the Institute for Expressive Analysis in New York.

AIT views most mental and emotional issues as originating from traumatic experiences from one's past. AIT blends traditional psychotherapeutic methods with the power of energy psychology, which means it resolves traumas not by just talking about them, but by having the client remember and re-experience them while holding major energy centers (chakras) on the body. Holding the energy centers removes traumatic energy from the person's energy field which, in turn, removes the emotional charge held in the body from the early traumatic experiences.

AIT uses not only the capacity of our conscious minds as conventional talking therapies do, but also benefits from the information and resources of the body and the unconscious, in order to

heal. The treatment reduces, or even eliminates the negative emotional charge around the original traumatic experiences. It reduces the frequency with which we get triggered in the present, and reduces the tendency to project onto others what happened in the past.

AIT works by holding the energy centers one by one while remembering or reliving the trauma. This treatment procedure harmonizes the negative electro-magnetic energy in the body created by the trauma and moves that energy out of the body, thereby healing the negative emotional charge around the trauma.

AIT can also help transform self-sabotaging beliefs into more self-enhancing beliefs, as well as assist in awakening positive core qualities such as integrity and wholeness. This, in turn, can open the way for spiritual development for those who seek it.

As we become increasingly free of past traumas and dysfunctional beliefs, we become less prone to getting triggered by current events, and grow less likely to project onto others what happened to us in our past. Increasingly able to deal with the reality of our current situations and relationships unencumbered by the unresolved traumas from our past, we are no longer “a set of obsolete responses”.

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