

A Dialogue between
Robert W. Resnick and Margherita Spagnuolo Lobb

**THE PRESENCE OF THE
GESTALT THERAPIST IN THE FIELD.
DIALOGUE ON ISADORE FROM'S LESSON¹.**

New York - August 11, 2018

*¹This interview took place in
New York, on August 11,
2018.*

*We would like to thank Jeff
Allison for the transcription.*

Summary: In this dialogue Bob Resnick and Margherita Spagnuolo Lobb hold different positions on the lesson of Isadore From on the role of the therapist in the Gestalt setting. Bob Resnick criticizes the fact that the master centralized the therapist's presence in the patient's experience. Margherita Spagnuolo Lobb explains Isadore's lesson in terms of phenomenological field and co-construction of the boundary of contact and therefore of the narrative experience that patient and therapist co-construct. The dialogue represents an important deepening of the two positions, often antithetical in Gestalt psychotherapy, between the individualistic and the relational perspective. Not reaching an approach of their theoretical positions, the authors propose to experiment in a workshop, to find in practice their differences and similarities.

Key words: *Gestalt therapy, phenomenological field, contact boundary, therapeutic function, Spagnuolo Lobb, Bob Resnick.*

Margherita Spagnuolo Lobb: So hello Bob.

Robert W. Resnick (Bob): Hello!

Margherita: Thank you for accepting to have this interview.

Bob: You're very welcome. Thank you for inviting me.

Margherita: I'm very curious about what you think about certain aspects of Gestalt therapy. So as you know I would like to dialogue with you about a few points and we already had a conversation in Taormina, in 2016, but unfortunately we didn't tape it. Now it's important for me to tape it so we can let the others listen to what we have to say. I would like to start from where we started before, with the idea that Isadore From had on considering the psychotherapist as the object of interest of the client in the client's interacting with the therapist. Isadore used to say that instead of using the empty chair- put your mother in the chair – we would better ask the client “tell ME what you would like to say to your mother”. Isadore meant with this what today we might call the ‘field approach’. That is when the client says or experiments something with the therapist, this is much more effective because the therapist is a real person, a live person, and if the client says something to an empty chair, pretending to say it to the mother, this implies that the client is detaching (or distracting) from the interaction with the therapist. I heard you say that what Isadore said implies that the therapist is much more centralized. That is where I want to begin the discussion.

Bob: I want to respond on several levels. The first level is that the value of the theory is in its usefulness. You never prove a theory right or wrong; you can indicate whether it's useful or not. You can prove hypotheses generated by the theory as right or wrong. A theory is never in the final analysis right or wrong, but it is useful or not useful. So I appreciate different theoretical points of view, because they may be useful. But some of them, in my view, violate some of the basic tenets of a gestalt view in the first place.

For example, Isadore professed, he made up, he decided that he thought that this [therapist-client] relationship is always what was going on. When it is actually going on- that's what I call the "fresh fish", then we have a wonderful opportunity because both of us are involved in the interaction. If you're just telling me stories about your life out there, you can only bring your narrative. You don't have anything else. The other is not there. If something emerges between us, now the other is here and you're here, and the learning happens at the point of difference- at the point of difference where my phenomenological organization meets yours at the contact boundary, and we create something different than either of ours' individually. So when that happens I think that's wonderful. I see no reason to assume that that's what's always going on. To make the therapist central in that way is to assume that you know something that is an interesting hypothesis but there is very little evidence for it. There is very little evidence empirically for that and it tends to skew where you go. It will direct where you go. So, as I said to you in Taormina, if [I'm a patient and] I came in and I'm all upset because I had a fight with my wife this morning, "I wanted to kill her! She wouldn't understand blah blah..." and you ask me, "how is it to tell *me* this?" or "what did I do to involve that anger", I'd look at you like you're from another planet. Who's talking about *you*? I think it's presumptuous to insert yourself into this [dialogue?] unless this [dialogue?] is what's happening. If I'm annoyed, "you were 2 minutes late, or 5 minutes late" and I come in and I may have some irritation about that. "I rushed to get here and she wasn't here on time and etc." then sure, it's beautiful. But to make the assumption is a questionable thing to me. I wouldn't make that assumption. I'd be open to it, but not assume that it's ubiquitous in the relationship, always there.

Margherita: Ya, I think we disagree. If I were the client, and I come to you as the therapist and I have something [a conflict] with my partner, it would be important that I'm saying that to *you*, my therapist. Not that I use you, because I'm not ok with my partner. Now if I imagine a client that comes to me because he has a conflict with his wife, as you said, and he wants to say something to me, as a therapist, our therapeutic eye looks at what happens at the contact boundary between the client and the therapist. For us, it's important to know how that client tells *me* (the therapist) about his anger toward his wife, how he tells me, how he moves toward me, how he uses his anger in telling me. Gestalt therapy works at the contact boundary, that's why Isadore used that kind of approach. He looked at anything that happens in the here and now, not because he wanted to make the therapist central, but because the therapy happens there, at the contact boundary. So, in the example I would like to see *how* you (the client) are talking to me about your partner.

Bob: And for me at times I would welcome that as a client, and other times I would see it as an interruption. "I'm telling you about something, but I'm with what I'm with. I'm really not with, at the moment, the contact between us. Switching from clinical to theoretical, it also is contradictory to the phenomenological method. The phenomenological method is to, as much as

possible, be able to bracket, to put aside your beliefs, your theories, interpretations, etc. and allow yourself to be affected by the freshness of the person expressing whatever they're expressing. If you have a pre-set belief that whatever that person is talking about has something to do with you, then I question it and I think it's in violation of the bracketing of the phenomenological method, which when it's useful that's fine. Otherwise you get stuck in being an ideologue and following ideology rather than reality.

Margherita: I think we might switch a little bit the terminology, because it's not anything you say has to do with me, but anything you say is *said to me*. So I'd switch, and I think we agree on this.

Bob: Yes.

Margherita: So when the client comes because he is angry with his wife, and he tells that to you, it's important that you know this, the *how* he's telling that to you.

Bob: If you don't assume, which I would not... it sounds like you would, "when you're telling me this, how you're telling me this has something to do with *me*"... he or she might be telling that story or that emotional outburst, exactly the same way to *any* therapist. It may not have to do with our relationship.

Margherita: I don't think the person would say the same content in the same way to a different therapist. I don't think so. I think that the freshness of our encounter means that, as a client, I'm different with different therapists.

Bob: I'm thinking of Erv Polster and the population of selves. Of course we "self" as a verb now in different situations with different people differently, but I'm sure you've had the same experience that every therapist has had, where one day you open the door and the client starts... I mean they started in the waiting room... and they just start [speaking rapidfire]...

Margherita: Ok but this can be a desensitization at the beginning. Then they have to look at you, because you are the therapist, the person who is telling him or her something...

Bob: But they *don't* have to, they're not. Obviously they don't have to. They're just coming in "You can't believe what happened today...". That, I think would be the same with almost *any* therapist they were with.

Margherita: Yes but then when you go on, you have to be at the contact boundary with them. And that's made of you and the client.

Bob: When you say that I think of Isadore saying "a Gestalt therapist is a well-paid electrician or plumber"- I think he said plumber sometimes and electrician sometimes, which is antithetical to a real dialogic relationship...as if you have to build a contact boundary... the contact boundary is there and you do your part. You don't do the client's part. You meet the client with who you are at the place of where they are.

Margherita: But you're a person and you contribute with your own

personality.

Bob: Of course, or course.

Margherita: I think that when Isadore said, for instance, [in response to a client who said “I had a little dream”], “yes, little like I am”, he was referring to what today we call a field approach. Because if I tell you, “I had a little dream”, where do I take the concept of “little”?

Bob: I’m not little as you can see, and I’m tall, so if somebody says that to me, and again, if they had me as a therapist instead of Isadore who was pretty little, and they said to me “I had a little dream last night”, I would listen to them and wait for more. I wouldn’t assume or start interpreting that “Oh, it was a ‘little’ dream, therefore they’re calling me ‘fat’ or therefore, if I’m Isadore, that it has to do with me because I’m little.”

Margherita: It’s part of the listening... when a client tells you “I had a little dream” and as a therapist you wonder “where have they taken the concept of little from?”

Bob: Maybe the dream. The dream may be little. Some people may mean it was a short dream.

Margherita: But the dream is not an experience in itself. The dream is *told* to the therapist. So we are interested not in the dream itself, but in the experience of telling the dream to someone, therefore in the way it is told to the therapist. So when the client says, “I had a little dream”, the way he says it is important for us. We are curious about aesthetic aspects of his telling the dream to us, that’s why we might be interested (as Isadore was in that moment, not always) in the word “little”.

Bob: Again, I have no difficulty that sometimes that may be true. I have great difficulty with assuming that’s always true. There’s a story- it may be true or it may be apocryphal, I’m not sure. It’s a story that Isadore started a workshop- you probably have heard this story- on a Friday night and he told the people about his approach to dreams- and a few days before the therapy session, and a few days after etc. He says: “If any of you have a dream we’ll work on it tomorrow.” And somebody came in the next morning and had a dream. And he said: “There was a big house with a door.” So Isadore said to tell it in the present tense. And the guy supposedly said: “I am a house and there is-a-dore”. (laughs) I don’t know if it’s true or if somebody made it up, but that was the story and Isadore laughed.

Margherita: Yes, it’s a bit Lacanian. Lacan used to play with words.

Bob: Yes.

Margherita: But the idea which is important to me is that the person chooses words and movements. The client chooses *how* to tell the dream to *that* therapist.

Bob: And to me sometimes the dreamer is more important than the dream. How the dream presents...

Margherita: But I don’t see there is a difference. What I’m saying, Bob, is that I don’t think there’s a difference... when I’m telling you something, I’m

*A Dialogue between
Robert W. Resnick and
Margherita Spagnuolo Lobb*

*THE PRESENCE
OF THE GESTALT
THERAPIST IN THE FIELD.
DIALOGUE ON ISADORE
FROM’S LESSON.
New York - August 11, 2018*

telling you from the wholeness of my person, and the wholeness in my person implies you in this moment. If I'm telling something to you, you are part of my experience in this moment.

Bob: I think we keep coming back to the same point of similarity and difference. The similarity that what you say is certainly true some of the time, a lot of the time, but you believe it's true all of the time and I don't see it that way. I think that's an unsupported assumption that it's true all of the time.

Margherita: I don't agree with this way of defining "the thing". I don't think it's true all the time. I think that when the person speaks to the therapist, her or his experience emerges from the wholeness of the field. So...

Bob: Sure, but also the cabinet (pointing), and also the camera, and also the bag...

Margherita: It's part of your experience.

Bob: But you don't talk about those. You talk about the therapist as if that's the *only* thing in the person's field. And it's there, the therapist is there, the therapist is important, but the exclusivity is what I differ with.

Margherita: So do you agree with the idea that what the person says belongs to the field? And so the experience of the client as it is told to the therapist can include parts, but includes actually not specifically the therapist as you say but can include other things.

Bob: *Can.* It can include anything in the field. It can include "low sugar because I didn't have breakfast". It can include "somebody said something to me in the taxi"...

Margherita: But that's not part of the actual field.

Bob: Well it's of the client's field. It's not the shared field in the moment but it's part of the ground of the client's.

Margherita: But we are speaking of the shared field, here and now, not of what happened in the taxi.

Bob: Well I would disagree with that as well. Perls was very clear that "here and now" was not something that he was interested in- that hyphenated here-and-now. He was interested in "now". And "now" is wherever the person's primary awareness is. It could be remembering, it could be fantasizing, it could be any "now". When that "now" is expressed here, then it's "here-and-now". And the "here-and-now"- he was concerned about that because in the early days encounter groups got confused with Gestalt therapy- at Esalen- they got conflated in some way. An encounter group leader would say "where are you now?", and the person would say "I'm worried about a job interview tomorrow", and the leader would say, "No, but where are you now?" His "now" is worrying about a job interview. He's not "here". So, when he can say, "I'm worrying about a job interview tomorrow", he is bringing his "now" here.

Margherita: Sure. I agree with that. Let's go back, and try to make some

clear points... We agree on the fact that what the person says to the therapist is the “now” and it’s “here” because it’s telling “now” to the therapist.

Bob: It’s bringing the client’s or the person’s “now” to the present.

Margherita: ...to the present, to the therapist.

Bob: Yes.

Margherita: And so we deal with this. We deal with the telling, with how the client is expressing himself to the therapist. Right? We agree on that?

Bob: What do we agree about that?

Margherita: That, in the here and now, the “here” is the way that the client is expressing himself to the therapist.

Bob: Perhaps... it certainly is the way that the client is expressing himself. It may or may not have anything to do with the therapist.

Margherita: Well this is another point. You are switching to the other point. Let’s stay with what we agree on.

Bob: Ok.

Margherita: We agree that we are interested in the here and now, which means how the client expresses himself about any content- present, past-any content, to the therapist.

Bob: Ok.

Margherita: And we focus on this experience, which is an actual experience, it’s in the present. Then, whatever the person says to the therapist, to me, has to do with the intentionality of the client to the therapist. So, if I am the client and you are the therapist, and I tell you something that is important to me, you are important to me, because I’m telling you, the therapist something that I want to solve with *you*, even if it’s about my partner and I’m angry with my partner, but I don’t want to use you to try to get me better about this... I want you to be my therapist, which is not using you. So my telling you implies that you are important to me.

Bob: We don’t agree. We’re back to the same thing as far as I’m concerned, and I know you see it differently. I think sometimes it has to do with telling you, and sometimes it does not have to do with the *you* of it, it has to do with telling who’s in front of me at the moment.

Margherita: This is an important point where we disagree.

Bob: Yes,

Margherita: We disagree clearly.

Bob: And I’m a firm supporter, as I imagine you are too, of Occam’s razor, the law of parsimony, the... and I appreciate that English is not your first language and so I want to be clear in what I mean by that... it’s that the simplest explanation with the least amount of assumptions is usually more accurate than a more complex, unnecessary, meaning more than the simplest explanation.

Margherita: Well, to me it’s very simple. I think we are just different, in...

*A Dialogue between
Robert W. Resnick and
Margherita Spagnuolo Lobb*

*THE PRESENCE
OF THE GESTALT
THERAPIST IN THE FIELD.
DIALOGUE ON ISADORE
FROM’S LESSON.
New York - August 11, 2018*

Bob: Well, I think we are quite different... If I'm sitting with somebody, I don't assume that what they say necessarily has anything to do with me. When it does, I'm very glad- it's an opportunity, because as I said we both have access to that interaction, but I don't assume that anything you say has something to do with me. That's what I see as presumptuous.

Margherita: Well... what I think is that if we are sitting together, and I am telling something to you, I'm telling it to you- you are a part of my field, my intentionality, and what we focus on is how I am telling this thing to you. But you are part of my intentionality when I say that. In this we are different. I don't think there is something more simple than something else. We are different.

Bob: Ok...

Margherita: On the other side, you think that it's possible that the person says something just... I don't know... says something...

Bob: Says something *to* me that has nothing to do *with* me. And that happens.

Margherita: If I say something to *you*, how can you not be involved in this?

Bob: If you say to me "I want to go check my phone", or if you said to this person, "I want to go check my phone" it *could* be that you want to get the hell away from me, or you want to get the hell away from that person, but it might be that you just want to check your phone and you're telling whoever you're with that's what you want to do.

Margherita: But I'm telling *you* I want to check my phone, so I'm asking *you*. How did I determine myself in telling that to you?

Bob: Well if I'm the only one here, of course you're asking me. But I'm a generic person at that moment unless there's something about checking your phone that does have to do with me, so I'm certainly open to, and acknowledge that your point of view happens. I just would not assume that it's always there. And I think I told you this is the same argument that I had with Isadore 40 years ago.

Margherita: I think you just don't like what Isadore said about being always involved in the content.

Bob: I don't agree with it.

Margherita: You don't agree about the content. But we are not talking about the content.

Bob: No, I understand. You're talking about the "how"- how the person is expressing what they're expressing, but you're also implying that how they are expressing it is somehow influenced by who *you* are.

Margherita: Because there is a contact boundary that...

Bob: Whatever your reason, you're assuming it has to do with something you are, I don't make that assumption.

Margherita: Because I am telling something to *you*, we are creating the contact boundary together. That's why I'm saying...

Bob: At that moment I may not be creating the contact boundary, I may not give a damn about the contact boundary. I may be oblivious to you. I am with whatever the content that I'm talking, the emotions that I'm feeling at that moment. So I just wouldn't assume that, and I think the difference is that you do... assume that the "how" you're telling has something to do with our relationship, most of the time if not always, and I would say it has something to do with our relationship sometimes.

Margherita: So if you take the example of what we are doing now, to me we are creating the contact boundary.

Bob: Repetitively (*both laugh*).

Margherita: The contact boundary is created any time we interact, so we show our differences, we can be present with our differences, and we are in a field also, which is sometimes irritated or... but with good will. And so since we are creating the contact boundary, this means to me that when I say something, I say it to *you*, and you say it to *me*. I'm part of your field. So it's impossible to think that you are saying something without considering who I am.

Bob: I'm split right now, because on the one hand I'm sure the things you've said about this content that we're talking about, you've said before to other people, and probably in some very similar ways. I know that's true for me- that I've said some of the things I've said to you, I've said before. Some of them I've even said to you before, and I've also said to other people. And I think it's just clear that we disagree, and I go back to what I started with- there's no right or wrong here, there's "useful" or "not useful". They're both reasonable points of view, and which assumptions- which set of theoretical assumptions to use at which time would determine when they're useful or not.

Margherita: Yes. I think it's useful if we perceive each other as reachable human beings, so that's what we want, and it's useful. Useful means that the client can find in us a human being, that he is able to rely on us, and trust us. I think we agree on that.

Bob: Almost. If we're talking about "useful"... I was talking about useful in terms of "is it therapeutic?" "Does it nourish and benefit the client?" Then it would be useful. If we just have a nice thing- that's nice, that's lovely, but can the client take it and use it in the world? Is it useful to them therapeutically. If it's only here in the consulting room, I don't call it therapy. I call it "lovely" but not therapy. Therapy- you have to be able to take it out into the real world and use it.

Margherita: I'm sorry, I'm not following you. Because you used the word "useful", and I tried to understand what you are saying...

Bob: I meant therapeutic, not useful- "did we see each other?", because seeing each other is frequently connected to being therapeutic, but it's not the value unto itself. It's a means whereby...

Margherita: Ok, like 'evidence-based'. Useful is evidence-based.

Bob: Oh no, no, no. Not reductionistic like that. Is a dialogic relationship

useful in therapy? I'm convinced it is without any "evidence-based" studies. With or without them I'm convinced it is. But someone else might think, "No, that's not what's useful to be therapeutic. What's useful for therapeutic is an understanding". I was once on a panel with a psychoanalyst who said, "the analysis is over when the analyst fully understands the patient." And I said to him, "They didn't come to you for you to understand."

Margherita: Sure.

Bob: "They need to understand", and more than understand of course.

Margherita: Of course, it's what we believe in to, we believe it's useful. I have learned that to process the contact making of the client/therapist is a powerful relational tool, which is very useful to expand and change the usual perception of the client. After all, we Gestalt therapists work to expand the perception of the client, in order to give him/her wider possibilities to be in the world. So, how do you feel now?

Bob: I want something more, I'm not sure what.... Because I feel very "sympatico" with you, I like you, I disagree with you but I disagree with you on the dimensions, not on the concepts. On the concept that the therapist is important and related and involved, I agree. On the dimensions that that's always the case I disagree.

Margherita: I don't identify with it's "always the case".

Bob: Ok, I'm interested in that. How would you describe...

Margherita: I think, as I said, that what the client says to the therapist belongs to a field, and that the therapist is included in it. So if I say "I had a little dream" to a particular therapist, this expresses an aspect of my ground experience in that moment with that therapist.

Bob: It sure sounds like *mostly* the case...

Margherita: I think Isadore wanted to *teach* something. Like if the client says something, the words that he uses belong to the field. So it might be that the "little dream" refers to the being little of Isadore, and if this is the case then it might imply that that client for instance was always denied to say spontaneous things like "oh, you're so short", you know? But he can say "I had a little dream", so he was supporting this spontaneity to be revitalized in the client, who could not say "Oh, you're so short!"

Bob: You're building, or Isadore is building there, a whole tower based on "it *might* be about me".

Margherita: It might be, sure.

Bob: Of *course* it might be.

Margherita: We agree on this.

Bob: Yes, that it *might* be, but it might be about fifteen other things. It might have nothing to do with me. But so to take it as a "might", and then start building on it as if that's already an established reality...

Margherita: As I remember Isadore's teaching, he meant the "little like I am" as an opportunity for the client to undo a retroflexion. If the client goes

some place else, the therapist doesn't insist. I don't know how much you really don't agree with this, because I think that he said it doesn't have to be always like that. I didn't get that.

Bob: Yes, and you, the therapist – usually seen as above in the hierarchy and more knowledgeable - bring this into the frame. My concern is that many clients would assume you are right and swallow your leading comment or question. Importantly, this therapist comment comes from a fixed perceptual gestalt that is a prism of meaning making – default position. This clearly violates the phenomenological method. If somebody said that, “Wow I had a big dream last night”, I wouldn't assume that was about me being big.

Margherita: I don't think that he said “always”.

Bob: Well, but that's why I was asking you if you could calibrate how much of the time do you think that what the client says, of course you share the field in the moment, but how much of it is related to, because of, something about you or our relationship. If not “always”, I say “sometimes”, “occasionally”, “wonderfully when it happens”. What would you calibrate that in your position, about how much of the time?

Margherita: I calibrate it considering how the client reacts to the possibility that I give him/her to undo a retroflexion with me. What I have learnt from Isadore's lesson is about to work at the contact boundary with the client. I resonate with the client's being-with with me, both with my empathy and with my resonance as an other in front of him/her (see my concept of Aesthetic Relational Knowledge). So I use anything that I experience at the contact boundary at the service of his/her capacity to be spontaneous with me. Not only the words of the client but also the way s/he breathes, looks at me, seats in front of me, all of these things are important for me to experience her/his contact making with me and calibrate my movements to him/her. If I come to you and I tell you I had a “big dream”, what is my experience of the big dream? How do I experience you, my therapist, and a big man, when I tell you about the big dream? If we use a phenomenological and field oriented perspective, it's obvious that I am addressing *you* with certain words, which come from my ground experience of being with you...

Bob: It's not obvious to me. It's an interpretation. Again, I wouldn't assume that I was so important to be related to the client having a “big dream”. As a client, I could have a “big dream” with a short therapist and a “small dream” with a big therapist. To be fixated to the default position that the client's comments are related to the therapist misses the opportunity both for discovering the client's meaning - and robs them of some opportunity to learn *how* to access their meaning.

Margherita: I'm speaking of field hypotheses to be verified, never to be taken as absolute. And sure, we make a lot of interpretations.

Bob: Of course we do, but if I make an interpretation I own it.

Margherita: We are not sure...

Bob: It's not about the client, it's about the speculation in my head.

Margherita: I am never sure that that is the meaning. It's a possibility. I

don't think that Isadore said that it is that way always. I think he said "It can be". At least this is what I took from his lesson.

Bob: Ok. I am fine with that. So if somebody said to Isadore, "I had a little dream", "that could be about me," says Isadore, but what about me being little assumes already it's true, and now I'm asking you a qualifying question about my interpretation as if I can define over there rather than the interpretation defines my point of view or my perspective or my hypothesis. The locus is here, not there. The "locus" defines whether I am speculating/interpreting in my head (located in me), or am I presumably describing what is happening in the client (located in them). For the therapist to interrupt the client unfolding with their dream has the danger of distracting and/or leading the client.

Margherita: I think, I assume - now we are interpreting Isadore - but I assume that he wanted to teach something. So he's being so determined because he wanted to convey an idea.

Bob: Ok, I appreciate that. I also appreciate *how* you would make the distinction about what the client says and when it's particular, or something special there. But that really wasn't my question. My question was, "Out of 100 interactions with the client, or 100 different clients, it doesn't matter really in this sense, how many of the interactions are involved in 'it's because of me, it has something- not only me- but it has something to do with me the therapist?'"...

Margherita: I think that...

Bob: Not all the time. I get that he or you are not saying it's all the time.

Margherita: I don't want to speak for Isadore. It's not my intention and he would have abhorred that. I prefer to speak for myself, as a former student of Isadore, who has also developed further what has learned from Isadore. I believe that the self as a process is made in contact, and in the case of the therapeutic situation, the self is made in therapist/client contact. I observe the client's movements and words as part of a situation of which I'm part. I explore the possibility for the client to be spontaneous with me, and this can involve experimenting more open ways of being with me, either telling contents addressed to me, or telling other contents.

Bob: and I'm asking: how much of the time do you believe that's true- that what the client says is in part because of who you are, in the room with them?

Margherita: Since I'm part of the client's situation in that moment, this is a condition for me, not a possibility. But I never impose to work on this, I am interested in *those* things, but am flexible of course and "dance" with the client's movements.

Bob: Yes, but only after you have suggested Tango – which colors the waters and is painting the same brush strokes on all clients – e.g. what they say or do or don't do – probably has something to do with me. Yes, I am interested too. I jump on them. That's the "fresh fish". That's where we both are here at the same time. So we absolutely agree on the value and the

importance when it's about the "between". Where we disagree is how much of the time is it about the "between us". That's where we disagree.

Margherita: Yes maybe (*both laugh*). Yes, I think it's not a matter of "how much of the time", but a matter of focusing on the intentionality of the client that is towards the therapist because this is the locus of therapy.

Bob: See, I don't share that assumption either, the intentionality assumption. I have clients who come in who are absolutely oblivious to the therapist, couldn't care less about the therapist. That's part of the work, that they don't pay much attention, but there are clients who are not that interested.

Margherita: It's not the client that has to be interested. It's the therapist that has an eye on how the client says the things to the therapist.

Bob: Yes.

Margherita: So it's not a matter of the client, it's our lens.

Bob: I think we're going in circles now. I mean we've repeated ourselves a few times. I think the difference is clear, and we've been doing it for about ten minutes. That was a joke so...

Margherita: I think we can finish also.

Bob: I'm fine with that.

Margherita: I just want to thank you for having come here for this interview, this dialogue, because I felt your interest.

Bob: Yes, I'm very interested in this. I like that you have some strong theoretical convictions. As I say I almost always, I'm not sure, no, the intentionality one for example is one that I would never assume- a person's intentionality. But a lot of the theoretical things you say I support and I agree with and then I differ when you have them across many clients or many interactions, not all but who knows how many, and I have them "some of the time that happens." So I like this discussion.

Margherita: I've experienced you as determined in something that Isadore, I think, didn't say so rigidly..

Bob: But that's what I've been trying to unpack, about "ok if not rigidly, how much?" And that's hard, I know, because it's important when it happens, but does it happen all the time? Does it happen 90%? 40%? I mean those are hard.

Margherita: I'm not on this kind of thought, because I don't think it happens most of the time or not. I think that the client approaches the therapist to be helped. And what we look at is how he does this, how he co-creates the contact boundary with the therapist here and now. And we know that the therapist is included in this.

Bob: I'm smiling now. My fantasy is that we were in a workshop- you and I - and one of the times I worked with you as client, and one of the times you worked with me as client. And to let those differences, and similarities because there certainly are similarities, unfold.

Margherita: Oh yes, that would be very nice. Practice solves always

A Dialogue between
Robert W. Resnick and
Margherita Spagnuolo Lobb

theoretical problems.

Bob: Yes. Exactly. And again, going back to Fritz, all theory is projection, just like all interpretations are projections. It doesn't mean they may not be useful, but they are also always projections, whether they are useful or not - you don't project in a vacuum. So there's usually some piece of it that's accurate.

Margherita: Projection is a perception also.

Bob: Yes, of course, but a theory in a book is somebody's phenomenological organization that they wrote down and called it a theory. It's a way of organizing and making meaning, which is what phenomenology is.

Margherita: So, thank you so much. We have an appointment to work. We have something to do together.

Bob: Thank you. Yes, and if you don't show up, then it's about *me*. (*Both laugh*)

Margherita: Of course.