TEACHING NOTES · 1995

Two-Chair Work: Dialogue Handout

By Michael Soth

A companion handout to the Summary of Steps (1995), providing sample dialogue and clinical commentary to illustrate what the work looks like in practice. These notes trace the movement between chairs through a clinical example, with annotation of what the therapist is attending to at each point.

KEY THEMES

— Sample clinical dialogue for two-chair work
— What the therapist attends to in each chair
— Tracking somatic and relational process
— Common pitfalls illustrated through example
— The moment of contact between the poles

The Value of Dialogue Examples

Two-chair work is difficult to convey in abstract description alone. The feel of the work — the quality of attention required, the timing of movements, the difference between a client who is genuinely inhabiting a position and one who is describing it from a safe distance — is best communicated through clinical illustration.

The dialogue in this handout is a composite — drawn from teaching examples and supervision material — rather than a transcript of a single session. It illustrates a sequence in which a client moves between the 'critical' position (the habitual mode which insists that nothing needs to change and everything is under control) and the 'wounded' position (the emergency, the part that cannot go on as things are).

The annotations alongside the dialogue attempt to make explicit what an observer would need to notice in order to understand what is actually happening in the work — as distinct from what is being said.

Commentary: What to Notice

At several points in the dialogue, the annotated commentary draws attention to moments where the therapist might be tempted to intervene in a way that sides with one pole against the other. The 'critical' chair is often experienced as the enemy of therapeutic progress — the defensive part that resists change — and there is a strong pull, especially for humanistic therapists, to align with the 'wounded' chair and subtly undermine the 'critical' one.

The commentary illustrates why this is counter-productive: when the therapist takes sides, the client's ego — which is identified with the 'critical' position — experiences the two-chair work as an attack. The work becomes a battle between the therapist and the client's defences, rather than an exploration of the client's conflict from within.

The therapist's task is to be genuinely curious about both positions — to find what is alive and valid in the 'critical' chair as well as in the 'wounded' one, and to communicate this through their physical presence and the quality of their attention. The work deepens when the client begins to feel that the therapist is genuinely interested in both parts of them, not secretly working to eliminate one.

The Moment of Contact

The most significant moment in two-chair work is when the two poles make genuine contact — when something said or felt from one chair lands in the other, producing a

recognisable response rather than simply triggering the habitual defence. This is not resolution but recognition: the two parts of the client beginning to encounter each other rather than simply alternating.

This moment is often subtle — a change in the quality of the client's breath, a slight softening of a held posture, a moment of genuine hesitation before the habitual response. The therapist who is tracking somatic process throughout the work will notice it before it becomes verbal. The commentary in this handout draws attention to several such moments, and to the therapist's response to them — which is typically one of quiet acknowledgement rather than dramatic interpretation.

The follow-up to this moment matters: it is not the end of the work but a doorway. What happens in the relational space between client and therapist after the moment of contact — in the return to ordinary conversation, in the reflection on the experience — shapes whether the contact becomes integrated or simply passes.

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