

# TELLING THE TRUTH

## The Therapist's Dilemma

*Rob Hill*



First published in 2025 by  
Karnac Books Limited  
62 Bucknell Road  
Bicester  
Oxfordshire OX26 2DS

Copyright © 2025 by Rob Hill

The right of Rob Hill to be identified as the author of this work has been asserted in accordance with §§ 77 and 78 of the Copyright Design and Patents Act 1988.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without the prior written permission of the publisher.

British Library Cataloguing in Publication Data

A C.I.P. for this book is available from the British Library

ISBN: 978-1-80013-296-2 (paperback)  
ISBN: 978-1-80013-297-9 (e-book)  
ISBN: 978-1-80013-298-6 (PDF)

Typeset by vPrompt eServices Pvt Ltd, India



[www.firingthemind.com](http://www.firingthemind.com)

# Contents

Acknowledgements	vii
About the author	viii
Prologue	ix
1. 'Hesitating' (Part I)	1
2. The love of truth	7
3. 'Hesitating' (Part II)	17
4. Telling the truth in everyday life	19
5. Types of truth and truth-telling	27
6. 'Things left unsaid'	33
7. Truth-telling and power I: In the royal palace	37
8. Truth-telling and power II: In the therapy room	45
9. 'Are you going to shoot me?'	55
10. Shame, privacy, and awe	59
11. Narcissism: What truth must not touch	67

12. Truthtelling, love, and hate	79
13. 'Let me know when you trust me'	93
14. The impact of not speaking: Fatigue and madness	97
15. Narcissism again: Taking possession of the truth	107
16. Beyond narcissism: Sharing the truth	115
17. 'What's the point of me?'	129
18. The craft of truthtelling	133
19. Styles of truthtelling: Provocation or attunement	147
20. The last essay	155
Notes	165

## Acknowledgements

A number of colleagues and friends in particular have played an invaluable part in the development of this book, whether through reading and discussing earlier drafts, talking through with me the challenges, pitfalls, and rewards of trying to be truthful with my clients, or both. They are: Silvia Baba Neal, Vincent Conlon, Damian Gardner, Sue Law, Rose Marter, Esther Newall, Mark Osterfield, Andrea Thomas, Charlotte Sills, and Judy Sleath. Heartfelt thanks to you all. I offer particular thanks as well to Silvia for introducing me to Foucault's lectures on truth-telling and to Charlotte for suggesting the book's title.

## About the author

**Rob Hill** is a relational psychotherapist with a private practice in London, UK, in which he works with individuals, couples, and families. He also offers supervision to other psychotherapists. His psychotherapy and supervision training was at Metanoia Institute, London.

## Prologue

*'I don't like you' ... 'I want you to stop coming' ... 'I'm bored by what you are saying' ... 'I can't understand you' ... 'You're trying to control me' ....*

**T**hese are all thoughts that I have had when sitting with clients. Sometimes they are fleeting thoughts, without much weight, and they don't stick in my mind. At other times they seem significant in some way to my work with the client, and then they tend to stick. Calling them 'thoughts' and describing them as getting stuck in my 'mind' makes them sound purely cognitive—but they often come with a strong emotional charge and are as likely to be felt (and get stuck) in my body as my mind. When they do get stuck in me, they also become, inevitably, part of my internal relationship with the client.

I don't think of these experiences as unique to me as a therapist, I think that they are part and parcel of the work of being a psychotherapist. But how are we as psychotherapists trained and acculturated to respond to these inner experiences?

If you are a humanistically oriented therapist, then I imagine you might instinctively frame them as problematic, as an unwelcome interference in the warm, affirming stance of the therapist. You might think

of them as a failure in what we call ‘unconditional positive regard’ and as ‘non-Rogerian’, that is, experiences to be put to one side as much as possible before getting back to a more client-centred, affirmative place. (Although, as I will get to later, Carl Rogers himself actually came to have a more nuanced approach to these experiences than his popularised legacy allows.)

If you are a psychodynamically oriented therapist, you might see these experiences as important rather than problematic, as indicators of unconscious processes at play in the relationship, as what the analyst Harold Searles, writing in 1965, called ‘investigative data’. If you were back in the era of the ‘perfectly analysed analyst’, you might primarily frame this investigative data as transference phenomena; for example, the thought might have been—‘This bored feeling in me is *really* the feeling of my client’s mother/father.’ In more recent times, now that psychoanalysis has, to a large extent, let go of the idea of the perfectly analysed analyst, these experiences would be understood in more co-created terms—in other words as arising out of the unconscious transference experiences of both client *and therapist*. Or, another alternative, you might think about these experiences as projective identifications, that the bored feeling, for example, is really a bored feeling coming from within the client and being inserted into you the therapist, perhaps as a way of communicating something of their own experience.

Searles himself thought of these experiences not only as investigative data, but as ‘*shared* investigative data’,<sup>1</sup> as experiences that could be mutually explored with clients. And yet it is fairly unusual, in my experience, for therapists of any orientation, whether humanistic or psychodynamic, to talk openly, out loud, about these experiences with their clients.

In this book, I am interested in the extent to which psychotherapists can and should engage, truthfully and openly, with clients about their responses to them. And engage with them in such a way that the experiences are viewed neither as problematic ‘failures’ on the part of the therapist nor as purely epiphenomena of transference dynamics, but instead as experiences which hold within them important truths which might be of use to the client.



Here's another set of thoughts that are familiar to me in my work with clients. This time, the thoughts are coming from the client, and they are spoken out loud.

*'Perhaps I'm crazy' ... 'Sometimes I wonder if I'm selfish' ... 'Perhaps there is something very wrong with me' ... 'I don't think anyone likes me.'*

These wonderings-out-loud are normally rhetorical questions and don't demand an answer. But sometimes, less often in my experience, they come in a more direct, demanding fashion.

*'Do you think I'm crazy?' ... 'Do you think I'm selfish?' ... 'Do you think there's something wrong with me?' ... 'Do you like me?'*

If the question is asked rhetorically, then most therapists will usually just let the moment pass. (And if the therapist happens, themselves, to be thinking that the client might indeed be crazy/selfish/have something wrong with them/not be likeable then they may well also breathe an internal sigh of relief that the client isn't pushing for an answer.)

If the question is put to the therapist directly, then typically the question is turned back on the client with another question: 'Why are you asking the question now?' ... 'What does it feel like to ask that question?' ... 'What's your own answer to the question?' The list of possibilities is long. The client might well also be firmly reminded, implicitly or explicitly, with something along the lines that 'This is a space for you to find your own answers and it doesn't matter what I think.' My sense is that clients have become so used to these responses that they quickly learn to avoid direct questions. They know the response that will come and those clients for whom reaching out by asking questions is a difficult thing to do in the first place may choose to avoid the frustration, sometimes even humiliation, of reaching out and being turned down.

I am interested in what the client and we as psychotherapists might be losing by not being willing to address the difficult questions that clients are wanting to ask: difficult questions that are often at the very

centre of why they are coming for psychotherapy in the first place. I'm not wondering whether therapists should, incontinently, shoot back at the client simple, unreflective answers to these questions. That would be to disrespect the complexities and uncertainties that need to be part of any answer. But I am wondering what therapeutic opportunities get shut down if therapists and clients foreclose, unreflectively, on the possibility that the therapist has some sort of direct role to play in helping to answer these types of questions.

The inner thoughts of therapists and the questions from clients that I have used in the examples above are by their very nature weighty, tricky, and 'big'. And, on top of this, they are often arising in an intimate and charged environment in which both the client and the psychotherapist may well have impossibly high expectations of themselves and of the other person if they were to dare to address them honestly. In this environment, 'big' issues can feel, for both client and therapist, like unexploded landmines. So, for the psychotherapist to be more open and truthful is not a straightforward, riskless endeavour.

Alongside these 'big' unspoken therapist reactions and 'big' unanswered questions are a myriad of smaller unspoken therapist reactions and unanswered questions which sit less memorably in the background of psychotherapy sessions. These smaller experiences, which come and, at least ostensibly, go from moment to moment in my sessions with clients, do not have the same dramatic, 'set piece' quality as the big experiences. And yet they can congeal over time before precipitating the bigger moments. For example, passing moments of frustration in a session which might seem innocuous, and which weren't talked about, can grow over time into a level of frustration which can start to *feel* 'unspeakable'. How might a greater level of ongoing truthfulness on the part of the therapist have changed this dynamic?

This book is presented as a collection of essays, which reflects how it has been written. Over a number of years, I wrote the essays individually and shared them with colleagues without having in my mind, at least initially, the thought of turning them into a book. Alongside writing them, I was also experimenting in my own practice with truth-telling and these experiments then in turn had an iterative impact on what I wrote. In this way the individual essays were 'attempts' (one of the etymological

roots of the word essay is ‘to try’) at thinking through some aspect of truth-telling; and I wrote them alongside the ‘attempts’ I was making in my work with clients to be more truthful. Over the years of experimentation and research, I also gave myself wide discretion in deciding what topics might be connected to the dilemmas of truth-telling. For example, the essay that I wrote on narcissism and how it connects with truth-telling was then followed by two more essays connected to the same topic, as the importance of narcissism in the context of truth-telling became more and more clear to me. From the reader’s point of view, though, the essays are all reasonably self-standing, so if the routes that I have followed in them feel too much like detours, then individual essays can be jumped over without, I hope, too much being lost.

Keeping the essay structure also means that the book doesn’t, and isn’t intended to, present an integrated theory or conclusion about the dilemmas that the psychotherapist faces over whether to tell the truth. The essays are more ruminative than that, arising as they do out of the uncertainties and puzzlement that I have experienced in researching and writing them (and which I experience in my work with clients). I’m hoping to evoke curiosity, even perplexity, rather than conviction.

I want these essays to feel interesting and accessible to working psychotherapists who don’t spend time reading psychotherapy books and professional journals. To stay grounded in the lived rather than the abstract, I have sometimes drawn on case studies published by other psychotherapists as well as content from outside psychotherapy entirely—from history, from myth, and from popular culture. My desire to try to keep these essays connected with the experiential, with the ‘lived’, also led me to include a series of what I have called ‘stories’—which are mixed in among the essays. The stories are presented as first-person narratives in which I am in an inner dialogue with an imagined client. The client (there is a different client for each of the stories) remains, biographically, largely anonymous and the focus is instead on me and my own inner reactions as I work. I have called them stories because they are all fictionalised accounts, not descriptions of specific experiences that I have had with specific clients that I have worked with (although they have only been possible to write as a result of the debt

that I owe to my clients collectively). I hope that in writing the stories I have managed to communicate a sense of, to borrow Peter Lomas' phrase, two people 'reaching for each other'.<sup>2</sup> (For me still the best one-line description of psychotherapy that I have come across.) If I have communicated that to the reader, then I've successfully communicated what psychotherapy feels like to me.