

### Transference in Cognitive Behavioral Therapy and Its Ethical Implications

J. Vyskocilova<sup>1</sup>, M. Slepecky<sup>2</sup>, J. Prasko<sup>3</sup>, A. Kotianova<sup>4</sup>, M. Ociskova<sup>5</sup>

<sup>1</sup>Faculty of Humanities, Charles University Prague, Liptovsky Mikulas, Slovakia ; <sup>2</sup>Department of Psychiatry, ABC institut Liptovsky Mikulas, Prague, Slovakia ; <sup>3</sup>Department of Psychiatry, University Palacky Olomouc University Hospital Olomouc, Olomouc, Czech Republic ; <sup>4</sup>Department of Psychology, ABC institut Liptovsky Mikulas, Liptovsky Mikulas, Slovakia ; <sup>5</sup>Department of Psychology Department of psychiatry, University Palacky Olomouc University Hospital Olomouc, Olomouc, Czech Republic

---

Transference is part of almost all human relations, and therefore is also a part of any therapeutic relationship. Classic CBT literature deals with transference only marginally. But to the work with complex patients, the conceptualization of transference and counter-transference need to be developed, as well as dealing with ethical issues that relate to the transference.

*Method:* Articles and studies were identified through PubMed, Web of Science and Scopus databases as well as existing reviews. The search terms included "transference", "cognitive behavioral therapy", "acceptance and commitment therapy", "schema therapy", "dialectic behavioral therapy" "Compassion therapy", "ethics" in different combinations. Other relevant texts were searched by references found articles.

*Outcome:* Transference relationship can work in conjunction with therapy and helps to achieve its objectives, or restricts the therapy, distorts it or blocks. For uncomplicated psychiatric disorders and to solve simple problems CBT doesn't address the therapeutic relationship. Conversely, therapeutic relationship becomes the focus of the therapy in clients with personality disorders. It can be used to identify automatic thoughts, dysfunctional assumptions and core beliefs well as to their changing. Transference may also be misused in favor of the therapist at the expense of the client. The crossing of the borders can be done unconsciously or consciously. Ethical reflection of the therapeutic relationship is possible only when the therapist conceptualizes recognized transference of the client and also own counter-transference reactions. Self-reflection, however, must be supplemented by asking the relevant ethical questions.