TRANSFORMING RESISTANCE: CURRICULUM

1) THEORY

a. Emotion, Attachment and Development
   i. Attachment trauma and implications for the therapy relationship
   ii. Attachment styles
   iii. What are feelings? What are not feelings?
   iv. Understanding relevant brain structures. The emotional brain remembers.
   v. Understanding the unconscious nature of mind and the reactive nature of feelings
   vi. The primary feelings
   vii. Internal emotional conflict
   ix. Defensive exclusion
   x. Reflective self function
   xi. Observing ego

b. Psychodynamic concepts
   i. Therapeutic framework and boundaries
   ii. Self disclosure
   iii. Transference /countertransference
   iv. Defense analysis
   v. Character styles
   vi. Defense analysis
   vii. Resistance and alliance

c. Cognitive Map: Triangles of Experience & Relationship
   i. Triangle of Experience (patient, intrapsychic)
      1. Understanding the corners of the triangle
      2. The feelings — anxiety — defense—feelings sequence.
      3. The basic psychotherapy “fork in the road.”
      4. Differentiating or enlarging the triangle of experience.
         a. Differentiating: stimulus/ trigger from feeling, anxiety from feeling, feelings from defenses, anxiety from defenses
   5. Feelings
      a. physiological activation (autonomic nervous system) of different feelings
      b. Three components of feelings
      c. Associated impulses, action tendencies, urges, fantasies
      d. How (unconscious) feelings get mobilized
      e. Complex feelings in the therapy relationship
6. Anxiety
   a. What is anxiety? The function of anxiety.
   b. The three pathways of anxiety.
   c. Understanding patient's capacity for anxiety.
   d. Red, yellow or green light: assessing when anxiety is in or out of the tolerable range.

7. Defense
   a. Development of defense mechanisms
   b. Defensive exclusion
   c. Syntonic versus dystonic
   d. The function of defenses
   e. The cost of defenses
   f. Types/categories of defenses
   g. Understanding specific defense mechanisms

ii. Triangle of Relationship (interpersonal)
   1. Unconscious links within the Triangle of Relationship
   2. Attending to the therapy relationship concurrently with other relationships
   3. Transference and countertransference

d. Cognitive map: 4 states, 3 state transformations
   i. NOTE: there is much overlap between these 2 cognitive maps; While similarities and differences will be acknowledged, the emphasis will be on an integrated model, giving trainees a broad range of options for various scenarios
   ii. Development of psychopathology
   iii. State 1: stress, distress and symptoms
       1. Defenses and their consequences, under/over regulated affect, this regulated affects, inhibitory affects
   iv. 1st state transformation:
       1. (co-creating safety)
       2. transitional affects
       3. heralding affects
       4. green signal affects
   v. State 2: processing of emotional experience
       1. Categorical emotions coordinated relational experiences, intersubjective experiences, authentic self-states, ego states, receptive affect of experiences, attachment strivings
   vi. 2nd state transformation
       1. (emerging resilience)
       2. adaptive action tendencies
       3. post breakthrough affects: relief, hope, strength etc.
   vii. state 3: meta-processing of transformational experience and transformational affects
       1. post breakthrough affects: relief, hope, strength, novelty
       2. mastery affects: pride, joy, competence
       3. healing affects associated with recognition and affirmation: gratitude, appreciation
       4. mourning of the self: emotional pain
       5. tremulous affects associated with growth: fear/excitement, positive vulnerability
          a. the crisis of change
          b. understanding risk of premature termination and resistance
viii. 3rd state transformation
   1. (patient – therapist secure attachment)
   2. positive valuation of the self
   3. energy, vitality, openness, aliveness
ix. state 4: Core State & The Truth Sense
   1. a sense of things feeling right, acting adaptively and naturally
   2. calm, flow, ease, relaxation
   3. sense of well-being, confidence
   4. openness, clarity
   5. vitality, energy, openness, aliveness
   6. empathy, self empathy, compassion for self and others
   7. cohesive and coherent autobiographical narrative

2) TECHNIQUE
   a. Establishing a therapeutic relationship
      i. Reducing resistance through promoting safety with an emotionally engaged therapist. Undoing aloneness.
      ii. Active use of therapist affect.
      iii. Importance of an attachment-based relationship.
      iv. Dyadic regulation of emotional experience, especially when intense.
      v. Explicit empathy, care, compassion, appreciation, validation, affirmation.
      vi. Reducing distance in the therapy relationship
      vii. Attention to relational affective experience
      viii. Focus on strengths, positive affect and glimmers of health
      ix. Healing orientation
   b. Components of an experiential, accelerated, psychodynamic approach
      i. Experiential approach. Experience before insight.
      ii. Therapist activity level, focus and degree of emotional engagement
      iii. Affect-centered, right brain approach
      iv. Visceral, bodily felt experience of emotion
      v. Systematic moment to moment conceptualization and intervention
      vi. Attention to phenomena under the surface (unconscious)
      vii. Concept that change occurs in abrupt steps, quantum transformations
      viii. Corrective emotional experience. The power of a different experience with a trusted other.
      ix. Promote reflection and integration
   c. Trial therapy/Initial evaluation
      i. Establishing a focus
      ii. Exploring core conflicts
      iii. Inquire about experience
      iv. Presenting problem/complaints/symptoms (neg)
      v. Goals (internal, emotional, pos.)
      vi. Timing/precipitating event(s)/why now? Connection with the past?
         Dynamic understanding.
      vii. Use of goals throughout the treatment phase
      viii. Goal to have a different emotional experience and an improved intellectual understanding
ix. Facilitating self at best, accessing internal resources

x. History emerges in emotional context

d. Psychodiagnosics
   i. Patient capacity
   ii. Developing a core formulation
   iii. Approach indicated, modifications needed
   iv. Importance of top of the triangle work and determining when this is necessary

e. Moment to moment tracking
   i. Triangle of experience
      1. Determining placement on the triangle of experience: feeling, anxiety or defense?
      2. “Enlarging” the triangle of experience
   ii. Anxiety regulation
      1. Monitoring anxiety level
      2. Determining anxiety pathways
      3. Red light, yellow light, or green light
      4. Keeping anxiety in the tolerable range
      5. Methods for regulating anxiety at all levels
      6. Anxiety: realistic or neurotic?
      7. Anxiety: intrapsychic or interpersonal?
   iii. Defense restructuring
      1. Defense analysis: which defense, syntonic/dystonic, intrapsychic versus interpersonal, associated with certain feelings, level of defense etc.
      2. How to discourage use of defenses
         a. Defense recognition
         b. Function of defense
         c. Cost of defense (intervening with syntonic versus dystonic defenses)
         d. defenses manifested in the therapy relationship
      3. Defenses against positive and negative experience
      4. Fork in the road: asking patient to abandon defense and risk another behavior
      5. Helping the patient develop self-acceptance and self compassion
      6. Differentiating defense from anxiety
   iv. Facilitating affective experience
      1. Red light, yellow light or green light?
      2. Intensifying affective experience
      3. 3 components of feeling, “ladder of emotion”
      4. Expressive/healthy feelings versus others, mixed feelings/ambivalence
      5. Methods to invite and encourage healthy emotional expression, dropping down/deepening
      6. Helping develop “the felt sense”
      7. Working toward completion
      8. Facilitating positive and negative affect
         a. Backlash from experience of positive affect (internal and relational).
      9. Portrayals
         a. Action tendencies and the immobility response
         b. When is a portrayal indicated?
         c. Facilitating portrayals
10. Goal is not catharsis, but emotional transformation by accessing healthy resources
v. Putting it all together: core formulation
vi. Triangle of relationship
   1. Tracking relationship with therapist along with others
   2. Working experientially: exploring feelings toward therapist
      a. rational versus overdetermined
   3. Links to the past
vii. Transformation: it's never too late
viii. Metatherapeutic processing
   1. How the experience of change itself is healing
   2. Reflecting on experience
   3. Throughout the session
   4. End of session
   5. Timing? Markers?
   6. Intrapsychis vs interpersonal focus?
   7. Processing before metaprocessing.
ix. Pathogenic affects
   1. Understanding the development of pathogenic affects
   2. Understanding pathogenic affects in the room
   3. Methods of intervention
x. Core State

3) PERSONAL, EMOTIONAL, COUNTERTRANSFERENCE
   a. Therapist variables
      i. Tracking of therapist’s reaction
      ii. Increasing tolerance for affect/anxiety (both in the patient and therapist).
      iii. Intervening and relating while experiencing high levels of anxiety and feeling
      iv. Become more familiar with our typical responses when anxious.
      v. Improving tolerance for the unknown, and reducing tendency to theorize, predict, develop an agenda or focus on content.
      vi. Reducing aversion to patient discomfort or interpersonal conflict.
      vii. Welcoming and using our own countertransference
      viii. Understanding and utilizing the therapists’ own “triangle”
   b. The learning process
      i. Realistic training goals
      ii. Self supervision/growth
      iii. Development of a professional self
      iv. Maintaining compassionate self-regard and self esteem throughout the training process
         1. comparisons to our ideal
         2. comparisons to the instructor/other mentors