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Dyadic Accompaniment for Healing Sexual Trauma in a 16 session Treatment

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Abstract: The case of Priscilla is a contribution to the ongoing AEDP 16-session research project on treatment outcome and efficacy. The outcome measures in this case confirm the ongoing research findings that Accelerated Experiential Dynamic Psychotherapy (AEDP) is an effective treatment for post-traumatic stress disorder (PTSD), in both open-ended and in time-limited treatments. One aspect of the AEDP 16-session research is therapists' requirement to rigorously adhere to AEDP methodology. Fidelity to AEDP with this patient who suffered complex PTSD symptoms demanded systematic and disciplined use of therapist attunement, inter-relational interventions, and dyadic regulation of the patient. This article demonstrates the AEDP healing process resulted in improved functioning in pre, post and in-treatment outcome measures in numerous areas of emotional well-being. Symptoms previously bemoaned as unbearable and associated with reported suicidal feelings are absent by session 16. Our coordinated termination is experienced as a success; deep unending pain transforms into joy and gratitude, with exuberance, as we progress further into the 16 sessions. The healing is 'inter' and intra-relational with a felt sense of transformation both within herself and with current family and community, beginning with the establishment of dyadic trust, and ending with a bi-lateral secure attachment for the dyad.

Case history of Priscilla¹

The patient is a 50-year-old married lesbian and parent of two teenagers. She entered therapy with the expressed desire to resolve intrusive flashbacks related to a sexual assault that occurred when she was 7 years old.² She also suffered symptoms of complex trauma; her father, with

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¹ The patient's name and identifying information has been altered to protect her identity.

² A trigger warning is offered to the reader.

mother's support, was authoritative, coercive, and psychologically controlling. As a child under these parents' care, a sense of entrapment was experienced by the patient. These elements are key and identified in repetitive and chronic emotional abuse as characteristic of complex trauma (Herman, 1993).

According to Priscilla, both parents had traumatic backgrounds; her father was diagnosed with borderline personality, and her mother had multiple psychiatric and substance abuse in-patient treatments. She describes living under her parents' hyper-religious upbringing as "scary brainwashing." Her father, believing himself a charismatic religious leader, frequently moved the family to new countries for what she described as unattainable work ambitions.

Parental neglect and coercion reached devastating consequences when, at the age of 7, Priscilla and a friend wandered from home unsupervised, their absence unnoticed. She was led by her friend several doors down "...because I only had Barbies, and we both thought it was a good idea to check for a Ken doll at her house." When they rang the doorbell they encountered two men who led them inside where both girls were raped, as she describes. Upon returning home, despite shock and trauma following this egregious attack, any evident distress in Priscilla went unnoticed by her parents. Compounding this was the trauma of the family's relocation 3 years later, and then again in her early teen years. For the first time, at age twelve, Priscilla describes finding safety and connection with a close social network of supportive teachers and friends at school. Her parents ignored her fervent wish to remain in place and moved them to yet another country.

All memory of the sexual assault vanished until, as an adult, she began to consider having a child. During labor with her first child, 14 years ago, she suffered an experience of disembodiment. Flashbacks of the rape trauma filled her birthing experience with terror and anguish. The flashbacks continued along with remorse and grief that her maternal and bonding capacities during the first year of her daughter's life were impeded by her inability to recover from these intrusive memories. A similar incident occurred during her second daughter's birth, spurring her to seek treatment.

Priscilla terminated her first therapy because she experienced constant mis-attunement in her connection with the therapist. Given her history of trauma due to emotional neglect, misattunement and coercion, the patient determined that therapeutic presence would need to "go beyond mirroring" (Lipton & Fosha, 2011) to successfully process her trauma. Thus, Priscilla persisted in searching for relief, stating with clarity, "I googled until I found AEDP – I knew deep inside that there was a therapy out there – somewhere – that could help me. And I was determined to find it."

The foundational credo of AEDP is that humans are equipped from birth with a wired-in drive for healing, termed Transformance by Fosha (2000, 2021). Priscilla's determination and success in finding AEDP is a testament to that Transformance drive. AEDP therapists trust that our interventions, when precise and authentic, will be recognized by the patient as a safe and

potentially healing provision for their auspicious built-in wiring towards righting what has felt broken.

Introduction to transcripts: "Why am I even alive?"

Complex PTSD (Herman, 1997) creates a scarred emotional landscape, and AEDP makes it possible to navigate previously exiled emotions with the accompaniment of a True Other therapist (Winnicott, 1960). According to Fosha (2000), the experience of aloneness in the face of overwhelming emotional trauma results in the formation of psychopathology. Adapting to emotional suffering with no hope for parental acknowledgment, led Priscilla to feelings of isolation, and to separate herself from her own emotions. Her poignant question encapsulates this isolation at the opening of transcript below: "Why am I even alive?"

Trauma such as rape creates a myriad of psychiatric symptoms. In Priscilla's case these included dissociation, flashbacks, nightmares, body dysmorphia, disordered eating, mental confusion, depression, anxiety, sexual dysfunction, and parenting and relationship difficulties. At the onset of therapy, Priscilla frequently refers to sensations of "not being in my body," "I feel completely collapsed and I just want to avoid people..." She shares a vague sense of "never having been seen, even right at my own birth."

The following transcript is from the 8th session, wherein Priscilla recalls returning home after the sexual assault, her 7-year old self now fragmented to the point of "utter collapse" (her words). She describes her mother looking up at her as she enters the house, angrily stating, "You smell like cigarettes; you've been smoking!" Priscilla tearfully reports a visceral image of her mother turning to walk away at the exact moment she needed comfort and recognition around this profoundly confusing and painful assault. She shares this scene repeatedly in our first several sessions, desperate for me to understand the gravity of emotional abandonment and aloneness, as markers of her life.

The transcript illustrates relational interventions that allow her to feel emotionally accompanied and safely held, within her window of tolerance, to explore the pain that she had defensively occluded. We therapeutically bypass and soften defensive protections against emotional flooding – this time revisiting them, with Priscilla closely accompanied by my fierce and explicit support. The techniques endow our dyadic connection with a sense of safety. Thus Priscilla always knows where she stands in our emotional interactions, and where I am leading her. My bold way of leading our conversation grounds our work in the" here and

now" experience; I am not ignoring her emotional needs as prior attachment figures had done (Fosha, 2000, p. 190-212).

Session 8, first transcript

A triggered memory of infancy is brought by Priscilla into the present moments' experience; she feels her terror with infancy-level, young despair stemming from neglect. She feels emotionally unseen in the here and now of our session. A pillow is used as a transitional

object (Winnicott, 1960) throughout this session.

P: When I say like why am I even here...I mean like – Why am I even alive...like why am I even here in the world? [maladaptive affect of despair and hopelessness]

Th: Right...

P: Cause it just feels like I wasn't loved and so like why did they even have me? (referring to her own birth. She then sighs and hugs a pillow at therapist's suggestion.)

Th: Yeah...Mmmmm [gentle tones, para-verbals for dyadic regulation]

P: Am I supposed to hold it like it's a baby?

Th: How do you want to hold it? [affirming the patient's agency and emerging somatic sensate

P: I just want to hold it... (eyes moist)

Th: Yeah, like you're being held...and you're reaching out...for something that's so comforting right? [instinctive tracking explicitly affirms her capacities to affectively receive comfort]

P: (sighs) [exhale indicates patient's transformational marker of the *possibility* of healing.]

Th: What would that infant or new-born part of you want to hear, Priscilla? [Make the implicit explicit; refer to the pillow as the infant Priscilla What are some of the words?

P: That I would want to hear?

Th: That part of you: that really, really young part... to hear and to say...[the unbearable is not being experienced by all of her, rather it's being felt by only a part of her.]

P: This is so hard... [adaptive striving emerges]

Th: You're doing well... [explicit affirmation]

P: I don't know...I can't say it... [possibility of dissociation]

Th: We're doing well. [privileging the positive and making my accompaniment explicit]. Are you thinking of something that you're not able to say yet? Or don't want to say yet? [accompany her in state of confusion; provide scaffolding option.]

The above interventions result from closely tracked somatic indicators that she remains within her window of tolerance. My simple words, soft tones, and abundant affirmations are dyadic regulatory interventions. Attempts to help Priscilla soothe her infant self continues, and her difficulty reveals her need for my explicit accompaniment.

Second transcript, session 8 continued:

P: No, I just don't know what to do... (looks down at pillow, held in both arms). [enter a healing portrayal including infant self, along with resourced elements of adult self—plus the resource of mel

Th: Mmm....can you feel us – you and I here together with you? [explicit accompaniment]

P: Um yeah... (head turns slightly...slight smile) [green-signal affect]

Th: What's that part like?

P: I just feel like running away...I don't know why...I, I don't have words to explain it... Idefenses arise again in classic maladaptive affect which has festered since childhood. Therapist stays with patient, encouraging attempts at 're-doing' the traumatic memory.]

Th: There probably was some part of you that felt the abandonment stuff— erupting during my vacation...does that make sense at all? [Make explicit the implicit; she had referenced the length of my trip earlier in the session.]

P: I mean... (glances away briefly, slight one shoulder shrug) Yeah. Th: And that now it's here...for us...as a gift for you and for me.. and for us as a team, you know? [undoing aloneness; privileging the positive; enunciating our bond to repair the sense of abandonment]

P: Mm-hmm.

Th: 'Cause you deserve to feel these things and to be felt...feeling them.

P: I just don't think it had anything to do with you going away...but it doesn't really matter...When I say like "why am I even here"...I mean like why am I even alive; like why am I even here in the world like...Cause it just feels like I wasn't loved and so like why even have me...

Th: And that's the part that... (patient sighs)... I would like you not to have to feel alone. [make explicit my accompaniment in the exact moment as she experiences the nearly chronic despair which brought her to AEDP

P: Mm-hmm. Yeah...I didn't think about it that way... cause my go-to is that I am alone. Like I take it almost like a fact. Being reminded that I'm not alone is good...for me...yeah, cause that's not true. I mean it might've been true then... [transformational healing affects emerging again]

Th: What's it like right now in this second? To not be alone? Can you take it in that I am here with you?

P: I feel a little bit of relief...

Th: What's that relief feel like? [our focus on the glimmer allows us to experience it together in a prolonged way.]

P: Like...my chest was constricting... But now it's more at ease (one hand slowly sweeps down).

Th: Yeah...

P: And it feels um...like I want to curl up (shoulders rise then relax down)...[releasing tension as she experiences a new and good; she is not alone with her deep despair.] Yeah...(sighs). I think this pillow is distracting me (smiles at me; makes eye-contact and moves pillow away *from body)*

Th: (smiling back---playfully reaching for pillow) Do you mind if I hold that pillow? [radical move from psychodynamic "neutrality:" Therapist initiates intuitive, creative collaborative healing stance, to sync with patient's unconscious 'right-brain' transformational affect.]

P: NO... not at all (smiles)...you can have it... (playfully hands over pillow) [green-signal] Th: I want that pillow [implying with a twinkle in my eye that she, Priscilla, is wanted, **explicitly, by me**] (Priscilla chuckles)...I'm gonna pretend that this is you (embraces pillow and pats it)

P: (smiles) Ok...Here you go...(giggles)

Th: What's that like – to feel me holding these young parts of you...can you feel me—-feeling you as a baby?

P: Yeah...(nods)...

Th: Yeah...you're nice and (pats pillow firmly in different places)...soft and warm and substantial...I love that....

P: (smiles) Yeah...I don't know why it's so easy for you to be kind to me and like why my parents didn't. (crying begins) [enters into a strong State 2, core-affect]

P: (silently crying; a forceful sad affect)

Th: Yeah keep breathing...keep feeling the seat...mmm. What happens when you do peak at me? If regulate her anxiety through meta-messages which imply 'I am here with you in these deep feelings.' My soothing voice without particular words disarms her terror and anxiety around this level of strong emerging affect.]

P: (sighs) I just feel sad...[neurobiological core-self and affect arising out of prior amnesia, dissociation, defensel

Th: Yeah..

P: It just could've been so different... (mouth turns sideways, nods, sorrowful). Is it ok to feel sad? I feel like it's a waste of time...[mourning herself (Fosha, 2000); defense then pops back]

Th: (gently) No, it's not a waste of time; you need it... to feel it... And not be alone this time. There's a lot of sadness in you. [encourage Patient's deep sorrow accompanied by my therapeutic presence

This vignette demonstrates an energetic dialog with frozen aspects of Priscilla's past infant self that had been inconsolable, and at some points in time, not even recognized. These personality parts were exiled by Priscilla once she was raped. By "being with" her current adult self, the more resourced Priscilla who now sits across from me in the therapy chair is led through an opportunity to console those younger parts.

Third transcript: session 8 continued:

In the next segment Priscilla traverses the transformational spiral (moving from State 1 to State 4); that is, moving from State 1 defense to State 2 core affect, then unfolding into State 3 realization affects and to State 4, core state (Fosha, 2009)). Priscilla's bold expression of anger, repressed since the rape is experienced through a portrayal. The anger is expressed in very close relational contact with me. She moves into State 3 realization affects, indicating a visceral state of neuroplasticity, where the traumatic aloneness of her 7-year-old self is rescued by her empowered present-day self, held in safe connection. She eases into State 4, a profound state of peace termed "core state".

P: (asks me to hand her the pillow; both fists pound it as she weeps; then rests her head against fisted palms, sobbing)

Th: It's ok if the sound comes through...Priscilla...yeah...mmm. It needs to come out...there's a lot...There's so much pain inside (patient slightly nods) ... Just keep breathing. Ok...yeah... Can you peak at me? [regulation of strong affect; meta-messages like "Mmm" allow her to hear my voice as a listening compassionate 'True Other' during deep grief.]

P: (wipes tears, glancing at therapist) I just want to say "Love me."

Th: Right...do you want to try that? Like maybe "Love me" (one fist pounds downward) ... tantrum.. a little about that?

P: I just feel sad... (hands in front of eyes)....it feels almost grovelly like...please love me...please...I'll do anything (high pitched pleading voice).

Th: Right... because that's what you were left with; there's a lot of demand in you; try this: "LOVE me!" (Therapist's arm moves up then down vigorously). That's where that tantrum got stuck...That impulse to demand love is so great...I think kids that tantrum are just Rock Stars!

P: Yup....(sighs)...I don't know...I feel silly....

Th: Is that alright to feel a little bit silly and still proceed? [bypassing defense]

P: I guess so...(audible exhale). [green-signal sigh; marker of possibility to move the paralyzing maladaptive affect into cathartic release

Th: And demand...

P: My brain keeps saying it doesn't matter...it's not gonna change anything...(bites lip).

Th: So you're a little resistant... That's natural.....Is it alright that we're here—together —with that resistant part of you?

P: Mmm-hmmm. [green-signal affect]

Th: (forearm purposefully thrusts forward)... Yeah I can feel it in my arms... What's it like when I share my own experience? [judicious self-disclosure and check-in after]

P: (Sighs) I keep feeling my body getting weaker and weaker,; my body wants to puddle [redsignal affectl

Th: Right now? Is it that collapse? (Lowen, 1958)

P: Uh-huh.

Th: Can you wiggle your toes and feel the seat holding you? [re-regulate towards viscerally grounding sensations]

P: Ok...Demand, yeah... [coaxing her strivings to emerge]

Th: How about demand your dad stop treating women badly in his office? "Don't you dare!" [modeling dialogue to allow a release of categorical anger]

P: Mmm-hmm....Don't you dare. Okay... (softly rehearsing)...Don't you dare...

Th: Can you see if there's more voice there? [I sense her anger will be a turning point for her trajectory into healing.]

P: I was testing it out (giggles)....Seeing if it would turn into something real... I just want to say 'STOP IT.' Like...I want to yell (pained expression, giggle...then whisper)...But your neighbors....

Th: That's okay, it's fine...go ahead...

P: (loud, forceful; slams fists on pillow) STOP IT! [State 2 anger]

Th: That's right...Yes! [up-regulated voice; encourage affect]

P: (Through sobs) Stop it.... (covers face with hands)

Th: Yeah...It's okay, Priscilla.

P: I jumped to my trauma [refers to rape]

Th: (very gently) Yeah [dyadic attunement clued me into fear, following loud yell of "STOP IT!" The continues: I was there with you Priscilla—when you jumped to the rape...Yeah...I sensed that "stop it!" was "stop raping me!"...[make the implicit relational and explicit]

P: (Sobbing) And nobody listened... I wanted them to stop....

Th: Yeah...Where are you right now? [work to help her feel me with her, in order to leave the flashback state and become present

P: I'm in the...room...(eves closed, hands cradling face)...when I was raped...(sighs)

Th: Can you stay with me? Yeah, there's a lot of emotion...a lot of sadness, a lot of rage. [reminder: she's not alone during this experienced flashback]

P: Yeah...I don't really know what's happening...like in the moment...like when I'm in it I don't understand (crying) [flashback continues]

Th: Right...

P: (wipes tears and sniffs)... I feel like I'm dying... I feel like I'm doing something wrong...[dysregulation]

Th: Can you feel me right there with you? You're not alone right now? [relational; encouraging safe attachment during flashback

P: Ok....yeah...(looks right at therapist, nods).....Ok. [green signal]

Th: Remember when we brought Mazzy (therapy dog sometimes used in sessions) and in your imagination Toni came in to protect you (her wife).

P: Yup....

Th: And me...So someone's there...protecting you...

P: Yeah...(chin resting on wrists, tears on cheeks, sighs, seems much more relaxed)... Judy, the

world is so fucked up...ugh... isn't that pessimistic? [big green signal; alert and relational following the flashback]

Th: I'm not so sure...Just now you came out of the trauma room – you could even tell me that – that's really cool. Right? [explicit "righting" to present moment]

P: (chuckles) Ok. Yeah... I just... I see it all...playing into each other... the patriarchy and the men, and the neglect and the narcissism... compounded with weirdness about sex...in my Evangelical culture...Mmm-hmm...yeah...that was interesting... [State 3 "clicks of recognition"

Th: Wow, yes...We are near the end of our session and I'm wondering: How are you doing right now and how has this session been for you? [Metaprocess session; reflect on experience of unfolding traumatic material in tandem with me

P: I keep wondering, weirdly, how you are? Is that weird (head tilts back slightly, smiling)

Th: Well let's not judge whether it's weird or not...that's a fact that you keep wondering that....[use of therapist transparency allows patient curiosity; meet her curiosity with judicious self-disclosure as a healing component of AEDP] Do you want to ask me? Therapist as authentic caring other who traversed monumental trauma, re-working it with her]

By explicitly inviting Priscilla to ask me personal questions in this moment post flashback, I offer the reassurance she needs; I'm willing and able to provide an attuned and well-matched remedy. Thus her experience of ruptures in prior therapy relationships shifts to safety within this AEDP relationship. Moments of relational disruption are met with warmth and responsivity, as opposed to her childhood experience of emotional neglect and abuse. While it is difficult for her to believe that I might be okay when she experiences her deep pain, with my direct offer for her to ask me personal questions, she can reverse disbelief, enhancing her capacity for trust:

P: Umm. was it weird for you when I yelled?

Th: No...(shaking head, smiling)...it was good. How is it to hear that? Do you believe me? [mini metaprocess]

P: I do...I do believe you...yeah (slightly glances down) It felt good to be vulnerable.... Yeah...(appears relaxed)...and to have you remind me that like when I jumped over into my trauma and to imagine you all there with me.

Th: The resourced part of you...

P: That was new. [state 3: newness]

Th: (eyes wide, smiling) Yeah... Well what is it like to say that you felt your adult, resourced self, present... And it being so new? [metaprocess transformational experience]

P: It's empowering...yeah...it feels like...I feel proud of her...I'm so full-throttle, Judy. [State 3] I used a lot of avoidance this past month probably cause you were gone...sort of a coping mechanism [click of recognition; acknowledges entering trauma-vortex in my absence last month]

Th: I love that expression...And the way you said...'I am so full throttle Judy' ...What's full throttle—that part of you?

P: It just is like 'Get out of my way!' (elbows push out to sides, smiling) ...there's like no stopping me...like I have no time for this garbage in my life. I don't want it weighing me down anymore...[core state]...(chin juts forward)...like cause I'm safe now...

Th: I can hear your voice coming out...

P: Yeah, yeah..it feels good...I definitely feel more joyful and alive...Overall.. like a consistent feeling of gratitude for my life. I just feel awake...[core state] Yeah, like I'm showing up for myself....

Th: What is the...the joy part right now?. I feel it too...

P: (hand on heart) I feel it like right here, bubbly like effervescent. Like...I feel...(one hand lifts, fingers spread apart)...light...like I can sense light. [core state]

Final transcript: 13th session

The following transcripts provide examples of transformance emerging from the successful processing of trauma within a safe and secure AEDP dyad.

In the 13th session, Priscilla imagines the rape room without dissociation or flashback. She recalls witnessing her friend's abuse in vivid, clear detail, "...Then he was kissing me-like he was trying to be romantic." Tenderness is a trigger and makes me feel crazy," she continues. With a beast-like affect she says, "I felt crazy when Toni (her wife), kissed me gently the other night; I felt like biting her." I encourage her to affectively imagine doing something different than she was able to do at the time she was 7 and overpowered by two grown men. She imagines herself as a tiger, "biting and mutilating" the two men, eviscerating them in a slow unfolding mastery over the perpetrators of her central trauma.

P: Wishing I was like a tiger...in my body (tears streaming down cheeks)...During the rape I couldn't react and save myself...

Th: Right—you couldn't fend them off...

P: Yeah I wanted to be able to take them on. I want to bite them, to mutilate them.

Th: Right..Can you imagine taking them on? [initiating a portrayal]

P: (smiles) Yeah...I see us running...they're in our mouths... we're tigers running to the beach...it's near nighttime. We put them in a pile...and say "fuck you!" We dance (laughs)....We dance...And we cry and we holler and it feels so good...
Th: Wow!! Who's there with you?

P: Me and my friend...we're still tigers...and all of you guys...you and Toni...and Mazzy (therapist's dog) and God...Or the sense of light...Jackie's (first daughter) there too...[transformational signal: Jackie's birth led to her first flashback of rape. Now witnessing her mother as powerful, protective and masterful, the daughter's imaginal presence undoes some trauma as she therapeutically portrays killing the rapists]

Th: What's it like to unify your current family with this mastery of powerful strength and self-preservation? [make the implicit explicit]

P: It feels... finalized...like connecting.. like (glances up)...like...we did it together...it feels. I feel strong and love and gratitude. [core-state; mastery affects]

Conclusion

Faithful adherence to AEDP protocol can facilitate healing in 16 sessions, even in circumstances of severe childhood trauma. We created spirals of momentum towards renewed flourishing and vitality in our AEDP treatment, reviving Priscilla's innate drive for health, previously undermined by traumatic events. Thus, the AEDP model was used to allow Priscilla to emotionally heal from other complexities of a traumatic background, very directly. Carefully titrated inter and intra-relational work enlivened emotions of pride, mastery, joy, safety, and closeness. Her trauma-induced symptoms abated. Through our AEDP work, Priscilla internalized a secure attachment foundation from which to continue to heal, while remaining regulated in her relationships.

Several months out of treatment, Priscilla sent me a poem she wrote describing her experience of healing transformation into resiliency, via a core expression of rage.

"Right Here" by Priscilla

It's complicated

Because I can't stop

The hands that tick the tock On top of my blocked Memories
Behind my knees Escape, run, Blurred trees
The forestry of your body Cripples me, consumed Don't know what it means
Except that I always Wanted to be touched
Is this touch?
Is this too much? I was seven

And still am Right here, in my body And right here And right here

But listen,

Right Here is where I'm done

Fingering the numb

An explosion is coming

Ha! Try again

It's not the kind that you wanted

This cosmic thunder

This star burst, watch her

She is called Rage

Turn every page

Till you see the last sentence

That claims my humanity

My dignity

Divinity

First and last right

To my own femininity

THIS is not yours

I AM MINE

Mind, breath, spirit, body

This is me

Made of love and, now, relentless nurture I am not the substance of that enemy

I am not what happened to me I am what I am what I am

And I am me

A goddess of women who've gone before me

They ran

My god, they ran

And they warned

They screamed red and white

Deep and bright

And they told me

About the home inside of me

Where he couldn't reach

The soft parts, untouchable

The pieces that are free

To be

Exactly seven

Or any age between

Run

Run

And tell them all

Crack the seams for her Rage loud enough so she knows This isn't touch This is too much

References

- Fosha, D. (2021). "We are organized to be better than fine:" Building the transformational theory of AEDP 2.0. In Fosha (Ed.), AEDP 2.0: Undoing aloneness & the transformation of suffering into flourishing. APA Books, pp. 377-400.
- Fosha, D. (2000). The transforming power of affect: A model for accelerated change. Basic Books, pp. 190-120.
- Fosha, D. (2009). Emotion and recognition at work: Energy, vitality, pleasure, truth, desire & the emergent phenomenology of transformational experience. In D. Fosha, D. J. Siegel & M. F. Solomon (Eds.), The healing power of emotion: Affective neuroscience, development, clinical practice.
- Herman, J. (1992). Complex PTSD: A syndrome in survivors of prolonged and repeated trauma. Journal of traumatic stress.
- Levine, P. (1997). Waking the Tiger. North Atlantic Books, Berkeley, CA.
- Lipton, B. & Fosha, D. (2011). Attachment as a transformative process in AEDP: Operationalizing the intersection of attachment theory and affective neuroscience. *Journal of Psychotherapy Integration, 21(3), 253-279.*
- Winnicott, D.W. (1971). Playing and Reality. Tavistock Publications, London.