# 16 Session AEDP & The AEDP Research Project: Bridging the Clinician-Researcher Divide

**AEDP Research Team** 

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#### **Overview of Presentation**

# Part I: An overview of AEDP Psychotherapy Research

- Research Program & Design
- Key findings from Outcome Studies
- Studies In Progress

# Part II: Clinical Illustrations with Session Videos and empirical data

- Healing from the get-go
- Corrective Emotional experience
- Core State and Transformational affects



# **AEDP Practice-Research Network (PRN)**



Collaboration between practitioners and researchers (Castonguay, 2011)

Practice-based evidence



Seamless integration of research and practice
Congruent with AEDP philosophy
Contributing to AEDP theory and practice

#### **Ethos of AEDP Research**

#### **Ecological validity**

- Private Practice Settings
- Relatively Diverse Patients
- Responsiveness/Flexibility (Vs. Manualized)
- Videotaping
- Transdiagnostic

#### Rigor and Comparability

- 16 sessions
- 6- and 12-month follow-ups
- Major Outcome Measures
- Process Measures
- Videotaping Sessions

# **AEDP** Research is growing Strongly

#### Phase I

- 66 Patients
- Benchmarking

#### A total

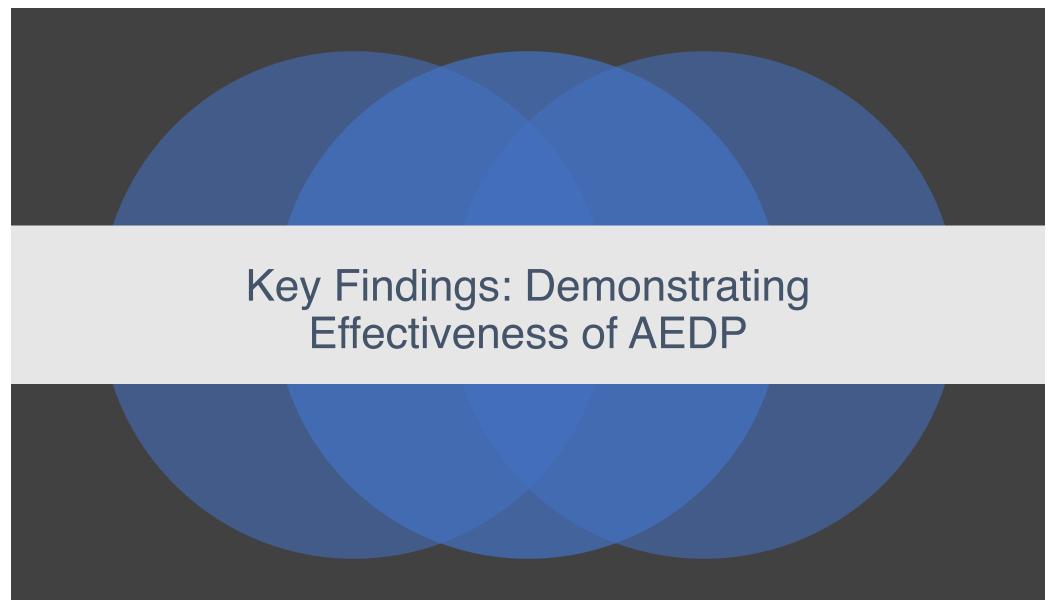
120 patients

45 therapists

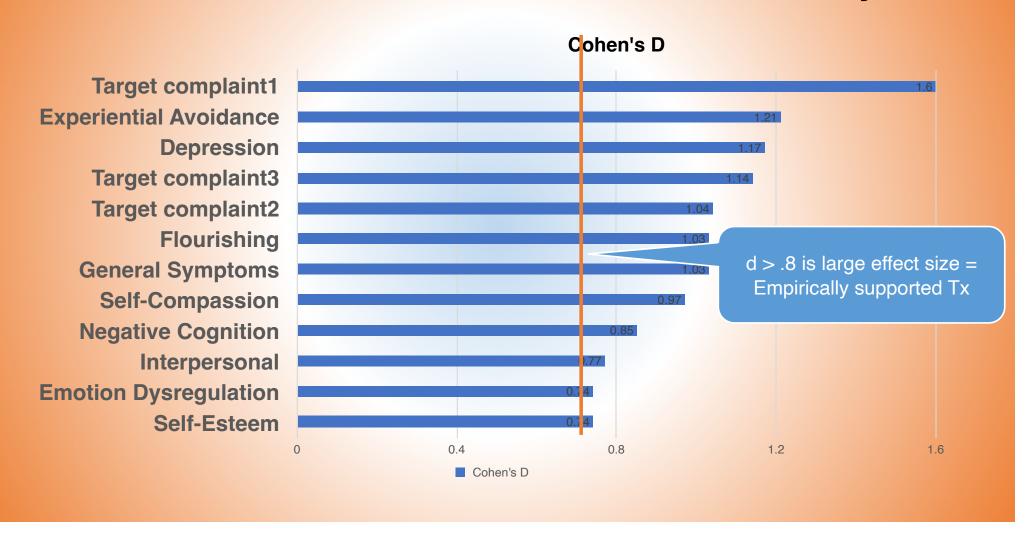
Over 1900 sessions

#### Phase II

- 54 Patients
- Adding Uniquely AEDP Process e.g., Flourishing Scale



# How effective is AEDP?: Phase I Study

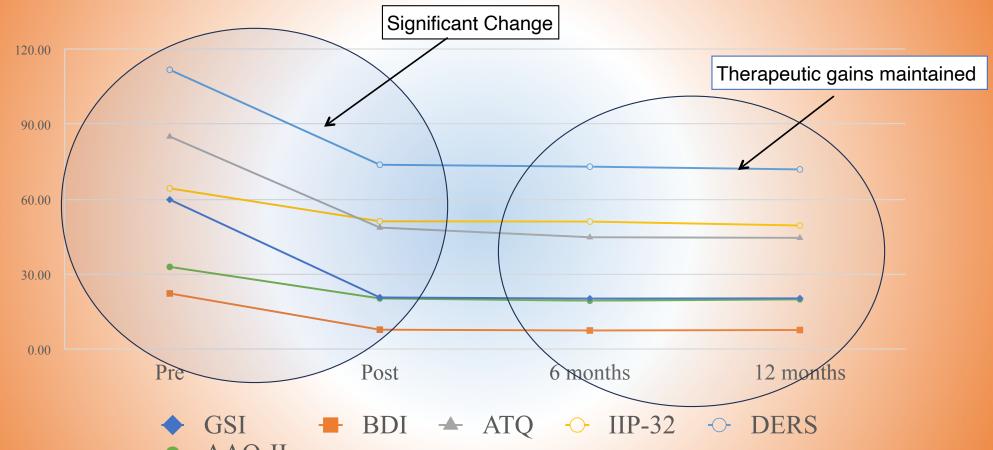


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FOLLOW UP for the 62 patients (Iwakabe et al., 2022)

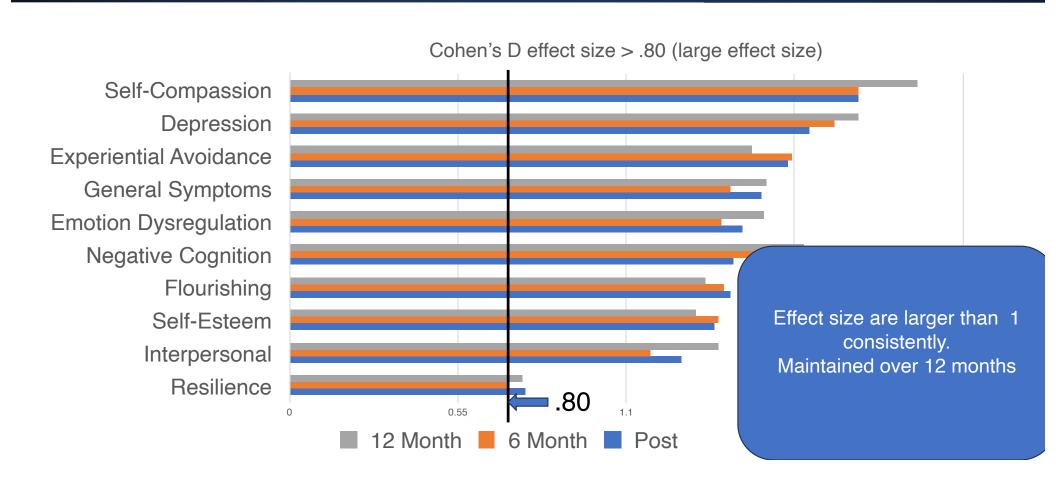
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### Outcome, 6- and 12-Month Follow-up

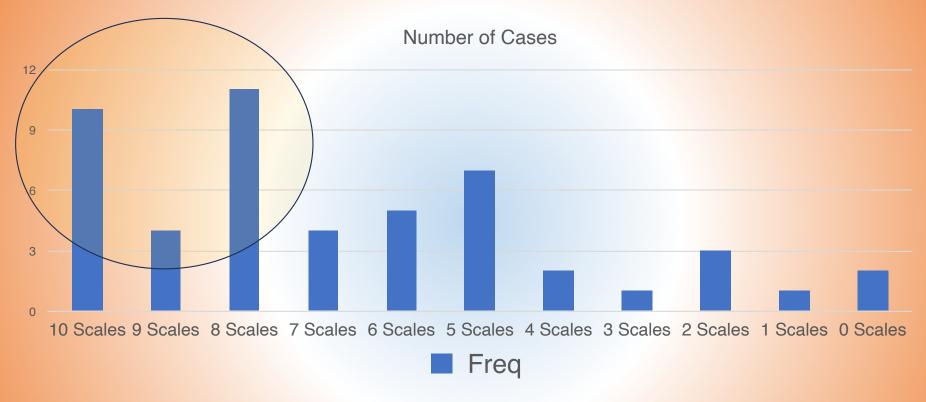


GSI (Psychological Symptoms), BDI(Depression), ATQ (negative thought), IIP (Interpersonal problems), DERS (Dysregulation of Emotions), & AAQ (Experiential avoidance)

#### Phase II: Effectiveness Confirmed (N=54)



#### **How Pervasive is Change in AEDP?**

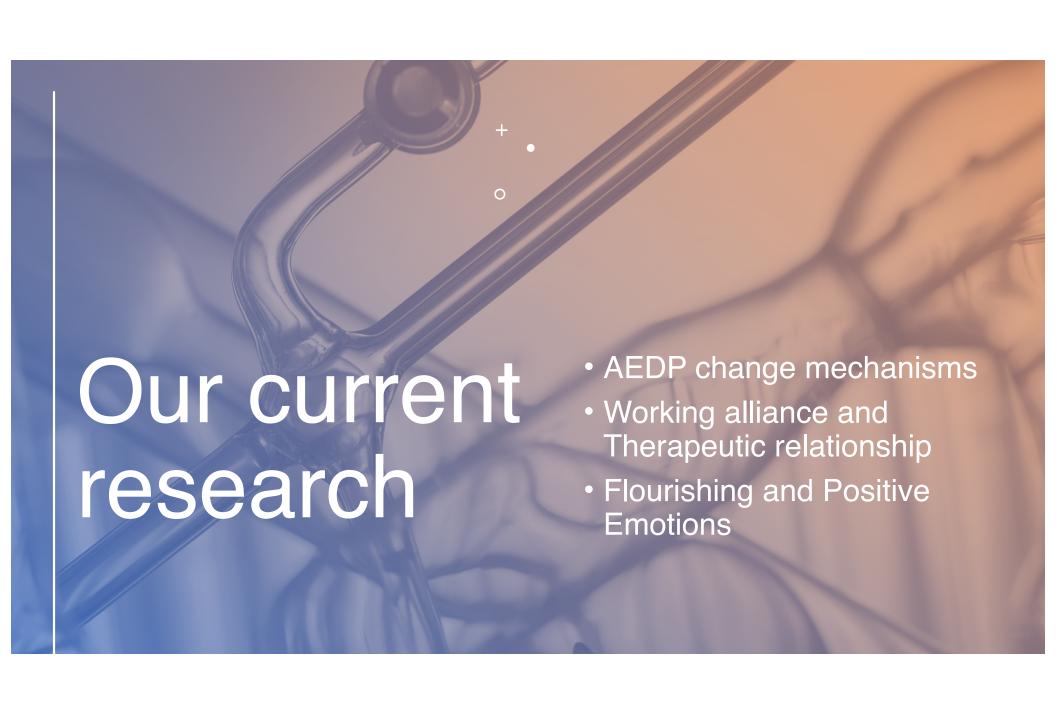


64.8% of patients (35 out of 54) or had clinically significant change on more than 6 scales.

46.3% of patients (25 patients) had clinically significant change on more than 8 scales.

# **Key Findings: Transforming Lives with AEDP**

- AEDP alleviates psychological symptoms and improves positive psychological functioning, i.e., flourishing, self compassion.
- Therapeutic gains are maintained over 1 year after termination, in the absence of additional therapy.
- Two studies (Phase I & II) show similar results, confirming the effectiveness of AEDP.
- The AEDP Outcome Research Project is steadily progressing and accumulating different types of evidence supporting the effectiveness of AEDP in private practice settings.



#### Working alliance Development and Depression



#### **Research Question**

How do the working alliance develop in AEDP? Are there different patterns of the alliance development in AEDP?

Are the developmental patterns related to outcome?

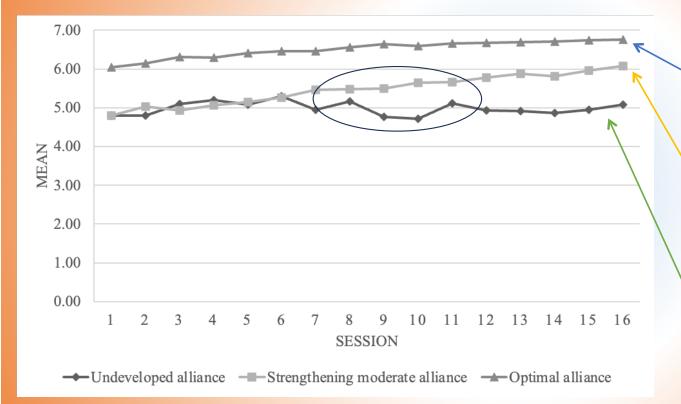


#### Method

100 dyads from both Phase I and II.

Cluster analysis

# Alliance developmental Patterns and Proportion of Clinically Significant Change in Depression



Optimal WAI = 72% of the sample **73.3**% of Patients achieved CSC (Clinically Significant Change)

Strengthening WAI = 17% of the sample 89.9% of patients achieved CSC

Undeveloped = 11% of the sample **24.9**% of patients achieved CSC

If the alliance does not improve by middle sessions (7, 8, 9) then the treatment may not be effective.

#### Positive Emotions and the Working Alliance





#### **Working Alliance & Positive Emotion**

Working Alliance – Essential to Successful Treatment

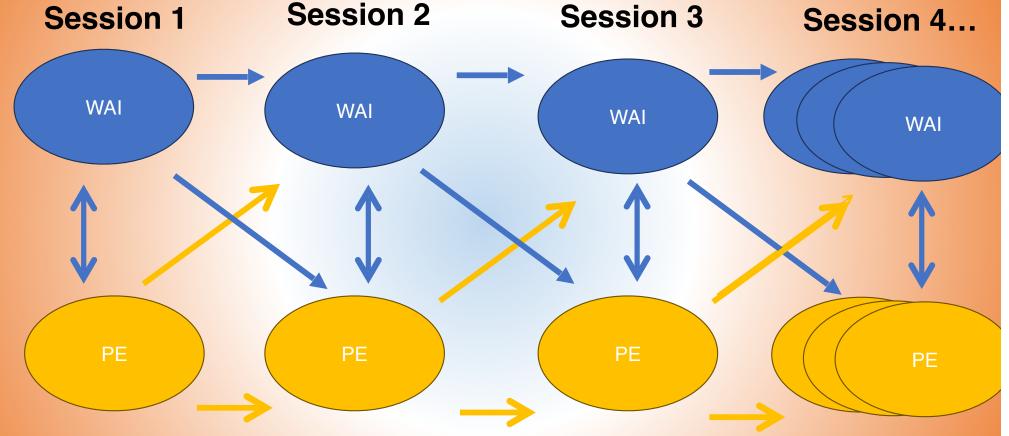
Positive Emotions – Ignites the Patient's Motivation and
Change

#### **Research Question**

Does patient in-session experience of positive emotions contribute to the working alliance or does the working alliance contribute to patient insession experience of positive emotion?

Notsu, H., Iwakabe, S., & Thoma, N. C. (2023). Enhancing working alliance through positive emotional experience: A cross-lag analysis. *Psychotherapy research: journal of the Society for Psychotherapy Research*, 33(3), 328–341. https://doi.org/10.1080/10503307.2022.2124893

#### The relationship between positive emotions and the working alliance



Positive emotions contribute to the building of the working alliance

Positive emotions are not simply the result of good therapeutic work but lead to setting next stages for good work.

# Development of Moments of Flourishing Experiences Scale (MFES)

- Vitality
- Calmness
- Gratitude and relational positive emotions
- Engagement and a sense of purpose



# **Preliminary Findings**

Flourishing level in the first session had a significant effect on the changes in general symptom, automatic negative thoughts, self-esteem, emotionality, and flourishing at termination.

First session **WAI** nor patient session evaluation on **depth** had a significant relationship with outcome variables.

Flourishing can occur from the initial session and has a unique significance (empirical validation for healing from the get-go)

Fosha, D., Coleman, J. J., Iwakabe, S., Gretton, H., Nakamura, K., Nunnink, S., Joseph, A. J., Quirk, K., & Owen, J. (2024). The development of the moments of flourishing experience scale: A new scale to measure positive, affect-based flourishing state experiences. *Counselling Psychology Quarterly*. Advance online publication. <a href="https://doi.org/10.1080/09515070.2024.2377167">https://doi.org/10.1080/09515070.2024.2377167</a>



Three vignettes were selected based on

High Post-Session Flourishing Score rated by patient

High Post-Session SEQ Depth Score (Deep, Significant)

Successful Post-Treatment Outcome

The availability of **Post-treatment note** by patient available

One vignette taken from the first, middle, and late phase.

**Permissions** are obtained from patients for sharing their videos in academic meetings

# Healing from the get-go

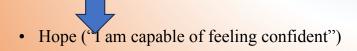
Feeling Weak to Feeling Strong

#### Case background

- Patient: Caucasian Female in late 40s
- Presenting issues: Anxiety, Self-esteem, and Stress related overeating
- Clinical Range: mild depression, Interpersonal problems, rumination, low selfesteem, emotion dysregulation, low self-compassion, experiential avoidance
- Post Treatment: Significant Improvement in all areas
- 6- and 12- month follow-up: maintained therapeutic gains

# **Process Summary**

- Segment starts after 30 min into the session.
- Process data
  - Pre-treatment Flourishing 3.5 After the first session, 6.2.
  - High Session Depth
  - High Working alliance
- Session Themes
  - Processing of anger at her father to completion
    - Relief
    - Realization (I have never done this)
  - Metatherapeutic processing of transformational affects
    - Tremulous affects
    - Mastery affects
    - Enlivenment affects



#### Patient's Note after The First Session

Releasing anger and frustration at my father - I physically felt this in my body and had to move my arms and hands to release the feelings of rage and frustration.

At the end of the session, I felt strong. Like I can do good work and am capable of feeling confident.

I felt the need to cry for my younger self, for the dismissive and unkind way I had been treated. We stayed with that feeling and it passed. I have always pushed that feeling away and it would rise back up. When we stayed with it, it came and then receded. This was a relief.

# From Self-Criticism to Self-Acceptance: Corrective Emotional Experience in 6<sup>th</sup> Session



- Patient: Asian American female in 30s
- Presenting issues: Self-criticism, Avoidant behaviors, Low confidence
- Clinical Range: Mild Depression, Interpersonal Problems, Low Self-Esteem, Emotion Dysregulation, Low Self-Compassion, Experiential Avoidance
- Post Treatment: Significant Improvement in All Asreas

# **Outcome and Process Summary**

- Process Data
  - Pre-treatment Flourishing 2.65, Session 5 3.91, After 6th session, 5.87.
  - High Session Depth = 7
  - High Working alliance = 6.92
- Session Themes
  - Processing of Sadness to completion
    - Acceptance
    - Corrective Emotional Experience
  - Transformational affects and core state
    - Mourning the self
    - True self True other experience
  - Segment starts 22 Min into the session after the patient had two visible waves of sadness

#### Patient's Note after The 6th Session

I was feeling what I was doing (letting tears flow instead of having a full blowing sobbing) was not 'correct'. Th reassured me that I'm doing right and that she's here to support me.

This sparked another wave of tears because it felt like finally someone is accepting me as I am and not judging me for these waves of sadness.

The feeling of acceptance from Th and having her say that she's here with me and supporting me in the journey helped me go through the sadness waves and having come out the other side. I felt more empowered.

I felt this energy in the middle of my chest radiates to the rest of my body and my thoughts started to go towards "I can do anything".

# **Desire** for Freedom

# Case background

- Patient: Mixed racial male in 40s
- Presenting issues: Anxiety, Repressed anger, Feeling something is wrong and I don't know why
- Clinical Range: Moderate depression, Interpersonal problems, emotion dysregulation, low self-compassion, experiential avoidance, low flourishing
- Post Treatment: Significant Improvement in all areas
- Follow-up: Maintained most of significant changes

#### **Outcome and Process Data**

- Process Data
  - Pre-treatment MFES = 4.22, In Session 11 MFES = 6.17
  - High Session Depth = 7
  - High Working alliance = 7
- Session Themes
  - Starting from Positive emotional State
    - Dyadic Expansion Affects
    - Enlivenment Affects
    - Mastery Affects
  - Core State autobiographical narrative
    - Healing Affects
    - True self True other experience
  - The segment starts 27 minutes into the session.

#### Patient's Note after The 12th Session

(Significant and helpful aspects of session)
Hearing and feeling Richard's being proud of me. Feeling the connection and care from Richard.

Knowing that I could share openly and feel whatever I felt and it was welcomed.

I felt connected with Richard and cared for and know that he trusts me to feel all my feelings and I can return to a safe place and be calm.

It gives me **confidence** to know that he trusts me and gives me **freedom** to do this on my time. It is liberating and gives me **healthy stable energy**.

# Conclusion: Proven Impact of AEDP

- Clinically validated: Large effect size across all scales, matching other evidence-based treatments
- Lasting results: Benefits maintained one year post-therapy
- Dual focus: Reduces suffering while enhancing flourishing
- Transformation from day one: "Healing from the get-go" empirically supported
- Unique measurement: Only therapy tracking in-session flourishing in every session
- Research integrated into community: Validating theory and uncovering new clinical phenomena

# **Future Directions**

- Using moment-to-moment analysis to advance AEDP theory on flourishing and transformational affects
- Identifying effective intervention components through 9+1 Scale
- Creating research-based training tools from our growing database

# Thank you!

AEDP Institute, Senior faculty, faculty, supervisors, and therapists who participated in and supported the study.

The patients who participated in the study.

Nate Thoma, Liza Greville, Heather Gretton, Sarah Nunnink, Jenn Edlin, Jesse Owen, Bruce Wampold, Modum Bad

#### **AEDP Research Team Members**

Andrew Joseph



Kaori Nakamura



Diana Fosha



Lauren Lepow



Richard Harrison



#### **Main Findings**

Iwakabe, S., Edlin, J., Fosha, D., Gretton, H., Joseph, A. J., Nunnink, S. E., Nakamura, K., & Thoma, N. C. (2020). The effectiveness of accelerated experiential dynamic psychotherapy (AEDP) in private practice settings: A transdiagnostic study conducted within the context of a practice-research network. *Psychotherapy*, 57(4), 548 –561. <a href="https://doi.org/10.1037/pst0000344">https://doi.org/10.1037/pst0000344</a>

Iwakabe, S., Edlin, J., Fosha, D., Thoma, N. C. Gretton, H., Joseph, A., & Nakamura, K. (2022). Long-term outcome of accelerated experiential dynamic psychotherapy: Six and 12-month follow-up results. *Psychotherapy*. 10.1037/pst0000441. Advance online publication. https://doi.org/10.1037/pst0000441

Harrison, R. L. (2020). Termination in 16-session accelerated experiential dynamic psychotherapy (AEDP): Together in how we say goodbye. *Psychotherapy*, 57(4), 531-547. https://doi.org/10.1037/pst0000343



Notsu, H., Iwakabe, S., & Thoma, N. C. (2023). Enhancing working alliance through positive emotional experience: A cross-lag analysis. *Psychotherapy research : journal of the Society for Psychotherapy Research*, *33*(3), 328–341. <a href="https://doi.org/10.1080/10503307.2022.2124893">https://doi.org/10.1080/10503307.2022.2124893</a>

Iwakabe, S., Edlin, J., & Thoma, N. (2021). A phenomenological case study of accelerated experiential dynamic psychotherapy: The experience of change in the initial session from a client perspective. *Journal of Psychotherapy Integration*. Advance online publication. <a href="https://doi.org/10.1037/int0000261">https://doi.org/10.1037/int0000261</a>

DiCorcia, M., Iwakabe, S., Thoma, N. C., & Yamazaki, W. (2023). Transformational process scale: An initial validation and application to the first psychotherapy session. *Journal of Psychotherapy Integration*, *33*(3), 248–264. <a href="https://doi.org/10.1037/int0000296">https://doi.org/10.1037/int0000296</a>



# Transformance Journal:

Volume 11 Issue 1, The 16session AEDP Issue **Introduction to Special Issue** 

Shigeru Iwakabe, PhD and Diana Fosha, PhD

16-Session AEDP: AEDP, Only More So

Diana Fosha, PhD

Together We Say Goodbye: Termination in 16-session AEDP

Richard L, Harrison, Ph.D.

"Unequivocal Affirmation" of True Self in 16-session AEDP with Gay
Men:Using Relational Metaprocessing to Increase Receptive Affective
Capacity

Gil Tunnell, PhD.

Race Matters: Co-Creating Secure Attachment from the Get-Go and the Work of Identity Consolidation for a Black Patient with a White Therapist Stephen McDonnell, LCSW

<u>Dyadic Accompaniment for Healing Sexual Trauma in a 16 session Treatment</u>

Judy Silvan, LCSW

<u>Time & Slowing, Attachment & Loss in 16-Session AEDP Therapy</u>
Gail Woods, LCSW, LMFT