




# TREATMENT RESISTANCE

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# Inquiry

- Psychodiagnosis of character pathology
- Psychodiagnostic probe: Internal emotional problem
- Three responses

# Responses to Intervention/ Implications for Therapy

- Denial
- Projection
- Devaluation of therapist
- Devaluation of consultant
- Non-problem

# Decision Tree for Building an Alliance

- Declaration of an internal emotional problem
- Declaration of will to work on that problem
- Declare a specific example of where the problem occurs
- Explore feelings in that example

# Common Pitfalls

- Fishing for a problem
- Fishing for will
- Fishing for a specific example
- Fishing for feelings
- Premature challenge of the patient's resistance
- Getting depressed and hopeless

# What do we do?

- Remember: some patients don't tell us their problem, they *enact* their problem.
- Maintain focus on the problem (do not go past stage one)
- Responses will be forms of projection
- Avoid enacting the transference role the patient proposes
- Deactivate projections as they arise

# Character Resistance

- Transference resistance versus character resistance
- What is the relationship he proposes?
- What is the role he proposes for the therapist?
- How might we be tempted to enact that role?
- Syntonicity: elements

# Addressing denial through reminding the patient of reality

- What is his response?
- Does he acknowledge the self-defeating nature of his behavior?
- How does he position himself regarding reality?
- What transference role does he propose for the therapist?
- How might we be tempted to enact that role?
- Does he seem troubled by his life and his choices?



# Syntonicity

- If it's not a problem for him, it's not a problem we can explore.
- What role does his syntonicity invite us to pick up?
- Conflict: internal or external?
- Mirroring conflict. Degrees.
- "I guess."

# “I don’t know if it is possible.”

- What is this response? FAD?
- What role does he propose for the therapist?
- How might we be tempted to enact that role?
- What impact would this have on therapy?

# Will

- Is it his will to do therapy?
- What is missing?
- What *is* his will?
- What does he want *your* will to be?

# Pressure to Will

- Confrontation and misalliance.
- Pressure to will.
- “How do you experience this inside that this what you want to do?”
- “How do you know inside that this is what you want for yourself?”
- “What tells you inside that you want this for yourself?”

# Forms of Resistance

- Resistance to feelings
- Resistance to emotional closeness
- Superego resistance

# Superego Resistance

- “I must resist change in order to perpetuate my suffering.”
- Self-punishment as a defense against complex mixed feelings aroused by past traumas.
- “I would be delighted to die.”
- What kind of relationship does he propose?
- What might we be tempted to do?
- What is the degree of internal conflict we should mirror?

# Mirroring Who is Here

- Conflict between unconscious resistance and the UTA
- Interpersonal conflict to avoid intrapsychic conflict
- Communication as a form of projection.
- Mirroring to block projection.
- Where does the UTA need to rise?

# “I can’t.”

- What would you say?
- Why would you say it?
- What relationship does he propose?
- Why can’t he?



# Strategy with Superego Resistance

- The roles enacted.
- Why interpretation is not possible.
- Non-interpretive strategy.
- Goal.

# Projection across the Spectrum of Psychopathology

- Projection in the resistance system of splitting/projection
- Anxiety pathway; resistance system; reality testing; content of projections.
- Interventions: bracing, restructuring, building thresholds of anxiety tolerance
- Projection in the resistance system of isolation of affect
- Mirroring the enacted identification.

# Anxiety in Superego Resistance

- Mixed feelings trigger anxiety.
- How superego resistance prevents the rise of anxiety.
- What interventions prevent a rise of anxiety?
- Which interventions allow a rise of anxiety?
- Racker

# Rise of Feelings

- What will be the response?
- More feelings?
- A rise in anxiety?
- A rise in defense?
- What kinds of defenses has he used so far that might come to the fore?

# Contempt and Devaluation

- Defense against depending on someone who has something we don't have.
- When someone has what we don't have, we feel envy.
- Envy can motivate us to learn.
- If can't tolerate envy, we devalue what they have to offer.
- What effect will devaluation have on therapy?

# Contempt and Devaluation II

- Limit setting.
- Therapist not your.....
- Nothing personal. Dogs.
- Lie. 81

# Externalization

- I use a defense that hurts me, but since I don't see how I hurt myself, I assume someone else is hurting me.
- What does he think hasn't worked?
- What hasn't worked?

# Unconscious Therapeutic Alliance

- Conscious therapeutic alliance
- Unconscious therapeutic alliance
- Feelings, Anxiety, Defenses
- Negation, memories, images



# Forms of Superego Pathology

- Superego definition.
- How the memory of a past relationship can be acted out: transference resistance, character defense, projection.
- Each enactment has the function of a defense.

# Character Defenses

- “I do to myself what others did to me.”
- Self-hatred
- Self-dismissal
- Self-neglect
- Relational function

# Spectrum of Identification: Syntoncity

- “I’m sometimes too hard on myself.”
- “I should criticize myself.”
- ”I hate myself.”
- “I’m evil.”

# Dosage of Intervention

- “You don’t really care about you.”
- ”You hate your appearance.”
- “You have contempt for yourself.”
- ”There’s a kind of violence you do to yourself.”

# Sequence

- Superego resistance: mirror resistance
- Character defense: Mirror self-hatred
- Transference resistance: Mirror resistance
- Emergence of UTA: Press to UTA
- Grief: greater separation of the person from the resistance

# Projection of Will

- “He’s not going to answer; he’s not going to say anything.”
- What is this defense?
- How might you intervene?

# Rise of Resistance

- Rise of feelings
- Rise of resistance
- Fantasy patient/real patient
- Patient we had/patient we have

# Transference Resistance

- “I do to you what a parent did to me.”
- Freud. Enact versus feel.
- Why interpretation fails



# Transference Resistance II

- Identify
- Clarify price and function
- Challenge
- Head-on Collision

# Transference Resistance III

- Character resistance.
- “I am the resistance; you must be the wish to get well.”
- No observing ego with whom to have a discussion.
- Mirror the resistance to “awaken” the ego in coma.

# Enacting the Transference Resistance

- Proposed relationship: One who knows and one who doesn't know.
- Enactment: therapist as “knower.”
- Result: defense identification and clarification = enacting the transference resistance

# Structure of the Transference Resistance

- Enact early relationship: patient (parent role), therapist (child role)
- Superego versus the Ego
- Unconscious resistance versus the unconscious therapeutic alliance

# Function of the Patient's Communications

- Patient enacts the identification with the unconscious resistance
- Patient projects to get the therapist to enact the unconscious therapeutic alliance.
- Projective identification: tone of voice, behavior, gesture, words.
- If the therapist "becomes" the UTA, there is a collision between the patient and therapist

# Head-on Collision

- Interventions are designed to create an intrapsychic crisis IN THE PATIENT between his unconscious resistance and his unconscious wish to become well.
- The patient avoids internal conflict through interpersonal conflict.
- Avoid conflict with the patient, so conflict occurs within him.
- When he resists, mirror the resistance.
- When he projects, block the projection.
- As the projected UTA returns to the patient, conflict and feelings arise.

# Dimensions of the Transference Resistance

- Identification with the resistance
- Projection of the UTA
- Omnipotent transference
- Regressive wish

# You're throwing the ball back in my court.

- Fantasy
- Location
- Not throwing, reminding.



# Devil's advocate

- Arguing the other side = conflict
- Reminding the patient of reality
- No conflict with the patient
- Resistance to reality = conflict

# Breakthrough to Grief

- Projection of the UTA
- UTA rises in therapist = acting out of therapist
- UTA rises in patient = increased inner conflict and feelings
- UTA overwhelms unconscious resistance = breakthrough to grief
- Drop in resistance

# Overview

- Character resistance.
- Maintain pressure to the problem.
- Unconscious defenses arise.
- Resistance shifts from non-verbal to verbal forms.
- To mobilize the UTA: maintain clear focus, block projections, mirror the resistance in the transference resistance, and mirror the syntonicity of the wish to suffer in the superego resistance.

# Overview II

- Common mistakes are based on therapists' defenses against anger:
- 1) enacting the complementary role in the transference resistance;
- 2) arguing with the superego in the superego resistance;
- 3) acting out anger through premature challenge or projection onto the patient.

# References

- Abbass, A. (2015) *Reaching Through the Resistance*.
- Coughlin, P. (1996) *Intensive Short Term Dynamic Psychotherapy*.
- Frederickson, J. (2013) *Co-Creating Change: effective dynamic therapy techniques*.
- Frederickson, J. (2017) *The Lies We Tell Ourselves*.

# Skill Building

- Skill building exercises at [www.istdpinstitute.com](http://www.istdpinstitute.com)
- Videotaped sessions for study at [www.istdpinstitute.com](http://www.istdpinstitute.com)
- Articles on deliberate practice at: [www.deliberatepracticeinpsychotherapy.com](http://www.deliberatepracticeinpsychotherapy.com)
- Advice to therapists: [www.facebook.com/dynamicpsychotherapy](http://www.facebook.com/dynamicpsychotherapy)