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Título: Factors intervening in the Alliance in adolescents' psychotherapy

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Aims

To study the clinical change in relation with the modifications in the therapeutic Alliance.

Theoretical frame

Clinical change and therapeutic alliance

Freud considered that a libidinal fixation and specific defenses predominated in each clinical structure. Psychoanalysis studies the clinical change in the level of defenses. The positive clinical change is the transition from a pathological defense to a more benign one. We study the defenses with the DLA, which is a psychoanalytical method that facilitates the systematic research of the drives (and the corresponding wishes) and the defenses prevailing in the patient. Regarding the defenses, the DLA has an instrument, the study of the speech acts, which is used to differentiate the pathogenic defenses from others more benign or functional in the concrete dialogue between the patient and the therapist. The pathogenic disavowal involves the rejection of an unpleasant judgment. It is developed as an Intersubjective trap that imposes a challenge or abolition to consensual rules, for example, the pragmatic (the word is used as a weapon, the differences saying and doing disappear) or the logical ones (the differences between language and reality are erased, the word coincides with an act that creates the sensitive world thanks to a cognitive omnipotence, a logical is proposed for the interlocutor). The most important goal of the disavowal is to maintain the feeling of self. At the same time, the defense in accordance with the goal is characterized by the respect for the rules and the harmony with the context.

From the application of the DLA to the study of the dialogue between patientanalyst it arises that when the patient puts the therapist as an addressee of the disavowal, clinical traps are generated and they are very difficult to identify, even for experienced analysts. The logical paradox, for example, promotes a state of cognitive trap in the interlocutor, constitutes a way of attack to the therapeutic alliance.

Regarding the drive, the DLA has a grid that shows a correspondence between certain drive and certain type of speech acts. For example, the secondary anal drive has as characteristic type of speech act the critical and self-critical judgment.

The therapeutic alliance is the link where patient and therapist have specific functions and may contribute positively or negatively to the task. In regards the alliance, Liberman operationalized the concepts of fluency and clinical trap.

Table 1: Collaborator or obstructing attitude

P intervention	Collaborator attitude	Obstructing attitude
Appropriate	Ratification unnoticed	Rectification unnoticed
Non appropriate	Rectification unnoticed	Ratification unnoticed

Sample

Adolescent patient, 12 years old.

<u>First fragment:</u> Teodoro proposes a board game to the therapist. He affirms that he knows how to play, the therapist believes him. Then, before starting the game, he boasts about being smarter than the therapist. Despite that, having just started the match, his actions reflect that he doesn't know the basic rules of the game. The scene constitutes a logical paradox (disappearance of the

differences between word and reality, logical trap). The therapist, after a brief moment of disconcert, rectifies his comprehension of the situation. He reads at loud the rules of the game and asks the patient to choose between playing according to the rules or in another way. The patient chooses to play according to the rules.

<u>Second fragment:</u> the scene is a game of cards, regarding which the patient recognizes himself as inexpert. After a game is finished he makes two significant actions: he turns around the analyst's cards and then makes a concrete question about a game decision made by the therapist. Both actions are founded in apprehending the logic of the game. The therapist answers both questions.

<u>Third fragment:</u> it starts with the beginning of the same cards game as in the previous fragment. The patient adopts a risky game strategy that becomes failed (he loses several points). Immediately, the therapist makes a joke to the patient, who admits it later. Teodoro ends the fragment with a self-criticism about his limited ability to confuse the opponent "I am learning how to play".

Analysis

A scene of clinical tune between the patient and the therapist occurred in the first fragment, in the beginning, when the patient boasts and when the logical paradox occurs, the pathogenic disavowal is operating. The therapist was able to, first, narrow the logical paradox and then he responded resorting to the framing (reading the rules of the game). When the patient agrees to play by the rules we may infer that the defense changed, the defense in accordance with the goal (accepting the rules) becomes dominant.

Table 2: Model of successful clinical attunement in the first fragment

Patient	Makes a defiant behaviour	
	Promotes a logical paradox	
Therapist	Rectifies from his erroneous supposition	

Resorts to the rules (framing)

We infer that the attunementwas successful because in the posterior scenes the patient didn't resort again to pathogenic defenses, he developed a concrete learning in the session and made a sincere self-criticism of his achievements. The change from the resistancial attitude to the collaborator attitude coincides with the transition from a distrustful position, in which the pathogenic disavowal prevailed, to another one of major confidence, inherent to the dominance of benign or functional defenses (expressed when he agrees to play by the rules, when he asks to learn or when he makes a sensible self-criticism about his level of game). The benign defenses allow him to capture the sincerity of the analyst's purposes.

In the second clinical fragment Teodoro recognizes his condition of inexpert and openly expresses his wish of learning the game of cards. He asks questions to the therapist. All these verbalizations show the command of the functional defense. The therapist's answer contributing information facilitates a genuine emotional experience: producing knowledge by appealing, as input, to information provided by the therapist. This experience is simultaneous to the one of confirming the sincerity of the therapist's purposes. The therapeutic alliance is deepened to the detriment of the distrust that reigned at the beginning of the first fragment.

In the third fragment the failure of Teodoro's game strategy promotes the scene of overcoming the frustration. Then, the analyst's joke tests the confidence in the link. Teodoro, instead of getting angry, extracts an inference with self-critical sense about his still relative domain of the secrets of the game.

Table 3: Obstacles and contributions to the therapeutic alliance

PATIENT	OBSTACLE	Promotes a logical paradox
	CONTRIBUTIONS	2)Makes a concrete question
		3)Admits a joke
		3)Makes a self criticism

THERAPIST	OBSTACLE	Gets confused with the logical
		paradox
	CONTRIBUTIONS	
		2)Contributs appropriate
		information
		3) Makes a joke in accordance
		with the goal

Results of the investigation:

I) Sequence of the clinical change (Table 4)

Table 4:

a)resistancial momment: The patient mistrusts the analyst

he establishes strategies to confuse the therapist or to avenge him

- b) the non pathogenic defense becomes successful, and it's effect consists in the fact that the patient acquires confidence in the therapist, in his posibilities to help him as much as in the sincerity of his purposes
- c) the sesión becomes a place where 1) genuine emotional learning

experiences are developed (overcoming frustration, for example) and 2) an ability of sensible self-evaluation is born (self-critical judgement)

This point (c) is detected in the second and third fragment

II) Defense, expressive resource and therapeutic alliance: The patient that applies disavowal combined with the game as basic expressive resource (instead of verbal discourse), finds it more difficult to maintain this defense as prevailing mechanism that disturbs the therapeutic alliance. We believe that this occurs because the development of the game does not "hide" the use of disavowal as well as the verbal discourse.

Conclusions

We may suggest that two factors favored the therapeutic Alliance in Teodoro:

1) the modification of the defense and 2) the combination between verbalizations and games.