Therapist Self-Disclosure and Therapist Transformation: A Qualitative Study on AEDP Therapists’ Working with Immediate Experience

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Accelerated Experiential Dynamic Psychotherapy (AEDP)

• Developed by Diana Fosha

• Rooted in
  • Short-Term Dynamic Psychotherapy of H. Davanloo
  • Experiential Therapies
  • Attachment Theory and Research
  • Psychology of Emotions
  • Affective Neuroscience
Process of AEDP

• **The focus**

  • **Affect:** Clients access, experience, explore, and reflect on their emotions.

  • **Attachment:** A dyadic Regulation of Affect

  • **Change:** Meta-processing of experience of change and transformational affects (healing affects, mourning-the-self, tremulous affects, mastery affects)

  • **Healing:** “Transformance” as a core motivational force toward maximum vitality, energy, and authentic self experience
AEDP: Relational Attitude Stance

The emotional atmosphere should be one in which the patient feels safe and the therapist brave. The patient’s sense of safety within the therapeutic relationship is enhanced in part by the therapist’s risk taking (Fosha, 2000, p.213)
AEDP and Therapist Self-Disclosure

- Explicit empathy and affirmation (Fosha, 2000)
- Explicit therapist self-disclosure of her own feelings of compassion, warmth, or appreciation (Prenn, 2009)
- TSD is a highly intimate moment in which the therapist makes herself vulnerable for the sake of the patient and the patient’s truth (Russell & Fosha, 2008)
- Meta-processing of client response to therapist’s self-disclosure (e.g., “What was it like for you to hear me say that?”)
Varieties of AEDP Self-Disclosure

• "(responding to the client’s metaphor of change), that is so beautiful."

• "I am glad that you told me that (the client is scared). It helps me a lot to know that."

• (Th being angry at the client’s annoying boss). "I feel so angry listening to this. He is always doing this."
Research Questions

• How do AEDP therapists use self-disclosure in working with their clients?

• How AEDP therapists are transformed themselves from working in a highly disclosing manner?
Method

- Participants 18 Experienced AEDP therapists (12 female)

- Recruited over a mailing list

- OVERALL Clinical Experience 10 years to over 40 years

- AEDP Clinical Experience 2 years to 12 years

- Interviews

- Semi-structured interviews (50 to 90 min) over skype

- Informed Consent was obtained verbally preceding the interview

- Topics included (a) their professional and training history, (b) transformation toward a highly experiential way of working with clients, (c) successful and unsuccessful clinical examples, (d) future directions and challenges.
1. The data was transcribed.

2. The first author used Nvivo for a formal qualitative analysis based on grounded theory approach.

3. Open coding was followed by focused coding to generate categories.

4. Higher order categories were generated by uniting related categories.

5. During these three phases, the second author examined the emerging results against the transcripts and made suggestions and engaged in ongoing discussions to come to a shared, consensual, final understanding of the data.
Results

• THE THERAPIST PERSPECTIVE ON:

• THERAPY CHANGE PROCESSES (WHILE WORKING WITH IMMEDIATE EXPERIENCE FROM AN AEDP FRAMEWORK)
  • 18 THERAPISTS OFFERED 240 REFERENCES/EXEMPLARS, WHICH WERE SORTED INTO 13 CATEGORIES

• THERAPIST CHANGE PROCESSES (WHILE LEARNING TO WORK WITH IMMEDIATE EXPERIENCE FROM AN AEDP FRAMEWORK)
  • 17 THERAPISTS OFFERED 139 REFERENCES/EXEMPLARS, WHICH WERE SORTED INTO 5 CATEGORIES
### Transversal AND Distinctive AEDP THERAPY

### CHANGE PROCESSES (18;240)

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When TSD were used (Context)

• often and freely used to form a attachment relationship between therapist and client.

• are used in critical points in therapy when

  • Clients are defensive or avoiding emotional experience

  • Clients are in a highly vulnerable state (deep shame, core loneliness, despair, terror)

  • Clients have allowed previously avoided or defended painful emotions

  • Clients are experiencing positive emotions such as joy, gratitude, affection, etc.

• When therapists feel vulnerable.
What are characteristics of AEDP TSD?

• Self-disclosure of feeling toward the client
  • Feeling with and sharing with clients
  • Expressing concern, care, and/or worry

• Self-disclosure of positive emotions, such as joy, affection, enthusiasm, and pleasure.
  • Spontaneous and genuine expression of enthusiasm and excitement

• Letting the client know that the therapist enjoy being with him or her
  • Attachment and Intersubjectivity are central
TSD process in AEDP

• A) **Centering**: Getting in touch with the somatic core

• B) **Opening** self to be Affected by the client

• C) **Self-Disclosure**: Saying all of it

• D) **Checking and Monitoring** (Metaprocessing)
A) Centering: Getting in touch with the somatic core

- AEDP therapists accessed an experiential core in themselves as a source so that they felt centered and mindful.
- “I feel calm and mindful. And I feel like I really slowed down, and just joined my client.”
B) Opening self to be Affected by the client

- AEDP Therapist’s experiential and reflective operation of opening up. It often involved feeling vulnerable and at the same time feeling affection.

- “I remember feeling anxious. For me, there was something quite vulnerable in showing him how much I cared. The more I have worked in this way, the more comfortable I have become with it, but in that moment I felt nervous and was quite flustered. I wanted him to know that I was listening to him and that I was invested in it feeling safe enough for us to work.”
C) Self-Disclosure: Saying all of it

- AEDP therapists attempted to tell their clients as directly and straightforwardly what they felt yet with warmth, caring, and affection.

- “You know, I love how you glow when you talk about this. What happens inside of you when you talk about this?” and there was this huge smile of recognition, and I saw the click of, ‘Yeah, that’s why I’m doing this’—in his mind—‘That’s why I’m doing this.’
D) Checking and Monitoring (Metaprocessing)

- The hallmark of SD in AEDP was metaprocessing: “what was it like for you to hear me say that?” to invite the client to reflect and talk about their reactions. This turned TDS into an intersubjective experience.

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AEDP **THERAPISTS' CHANGE PROCESSES** (17;139)

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PRESENCE (MINDFULNESS + BODYFULNESS)

- T14: Sometimes I feel like there’s a little bit more of a fog, and sometimes someone will just come into clarity and I feel like I can see them: so my visual perception…it comes from my body, not my head. It’s hard to put words to it. It feels like something that I could easily override and that I’ve overridden a lot in the past that I’m learning to not override but to respect. Very subtle, exactly. And sometimes it can be very strong. It feels very relational. It feels like I’m getting something from them…

- T13: I do feel like the more work I do of this nature, the more my body becomes a good barometer for what’s going on—either what’s going on in the relationship or what’s coming up with the client. You know, the psychodynamic voice in my head says, ‘Oh! Projective identification!’—No, no, no. It’s all, it’s resonance, it’s being in the moment, it’s empathic connexion.

- T12: But there’s a significant experience in my body of, ‘Now we’re doing work; … The client is very present and has access to core experiences. It’s a fragile state; it can come and go. But it can get stronger and stronger the more times you get there, the more the client and you get trained on how you get there and recognising it.
• T12: Um, I think what I often notice is when I feel a wave of emotion in myself which I’ve become familiar with, usually in this area of my body, I use this experience in my body to explore with my patient what’s happening with them. And sometimes—not too much—but sometimes I will self-disclose that I feel a wave of emotion and grief or I feel very present with them, I feel a very tender feeling or something arising in my chest. I might say that. And it’s often, often somewhat accurate; you know, it’s often because something has happened in the contact between us. What usually precedes this is some kind of attunement, like if there’s something that they’re experiencing and they’re trying to understand or feel it and know it experientially and I might help them in some way by showing them that I actually want to understand it too, with them. And when I get closer to it and they say, ‘Yes, yes, you understand, you understand, you feel it too, I can tell you know what’s happening’. Then there’s a huge welling of emotion and a closeness of contact. So it feels like what it is is how close we are to understanding each other’s truth of experience in the moment, it feels like the intimate thing.
WILLINGNESS FOR SHARED CONNECTION

• T9: Yeah, I feel like I’m able to be more attached to the process, more able to kind of let . . . it almost feels like the information flows past me and it’s like I’m getting it but not attaching to those but more attaching on to, “How are you feeling about that” or, “Something just shifted as you said that” and more able to . . . It almost feels like I’m getting two streams, like, the right-brain flow and the left-brain flow, and really open to both in some ways. Whereas, when I’m more in my thinking & talking mode…

• T17: So I would say that the other thing that working in this way has done, . . ., is to be willing to feel love for everyone I work for. And not that I say from the beginning or at necessarily even any time, ‘I love you’, although I have also expressed that emotion when it felt right, but I would say this way of working feeds me because it’s like the research on compassion: when we are being generous with others, when we are giving to another human being in an emotional, connected, caring way, that enriches my own life. It enriches my experience of myself. I feel fuller. I feel good and right and true.
WILLINGNESS FOR SHARED CONNECTION cont.

• T9: I think I approach more and more frequently; so just the decision to approach and the ability to approach….I feel like it’s that I can actually see an approach path... 

• T4: I was already curious about this and AEDP gives me whole bunch of ways to do that, which is to share more of the warmth or wherever I was feeling 

• T7: The more exposure I have to the tapes of successful session in receiving loving gratitude and the more discussions I have with my colleagues, the less inhibited I have become… I recently had another pt who expressed intense loving gratitude to me, and I was right there for her. She expressed her loving gratitude in a raw, intimate way with tears in her eyes. I immediately became tearful and was able to put my feelings into words this time; I told her I was deeply moved by her gratitude, her courage, the depth of her work. It felt very good. It was truly transformational for her and for me. Clearly, conscious-raising efforts thru training and personal work helped me overcome my psychological blocks.
VITALITY, ENERGY AND FLOW

- T15: I’m actually getting more energised from the work in general. And there’s less energy put into keeping part of myself away from the work. I feel more engaged, because I’m not having to hold back. It feels like things are integrating more with the work and the rest of my life. So I can be more authentic with who I am with the clients, I can be more spontaneous, I can play with them more, I can have that spiritual aspect. I can get more energised by the relationship being real.

- T14: I feel enlivened and captivated and less bored. I don’t feel bored. I feel stimulated and like I’m exploring, like I’m an explorer. Like it hasn’t been discovered, so I kind of feel like, ‘whoah, this is really fun!’ like having an adventure…I feel alive. I feel, like, brighter. I feel that even when it’s sad or destructive or ugly, it still feels rich. I feel engaged, captivated. Time changes. Sometimes time moves much more slowly and sometimes time moves much more quickly. But it doesn’t matter so much, because we’re in something together that’s bigger than time.
O12. T: It actually arises in the hour, and it feels like (more gazing) it’s a way of connecting and it also feels like a way of neurologically regulating. Something starts getting rewired with those gazes. I was afraid that people would have that experience, because it’s often an experience that people have only had with their mothers and their lovers. And that it would be misconstrued. And I had to work through my own concerns about that and find out over and over again and find out that, oh no, this is tolerated and it’s quite lovely to just drop into it… But that kind of level of intimacy can be challenging and can evoke that sense of, “Oh, ok, enough of this….. it’s energising. It’s like having real connexions with people and it’s much more tiring to have people who are in some kind of rehearsed, stale, kind of defence-driven behaviours over and over again. So to have people actually be in something that is novel and emergent and real is incredibly energising. It’s exciting.
• T17: Fulfilling. I would say that working this way of skilful emotional intimacy brings deep meaning to my own life. And so it enriches my sense of who I am as a good and valuable person.
QUESTIONS?

• Can we say AEDP Therapists’ own change processes are associated with significant amounts of work with immediate experience including self-disclosure?

• Do AEDP Therapists’ own change processes may shed light on clients’ change processes and vice-versa?

• Do the common and/or distinctive features of AEDP Therapy Change Processes and Therapist Change Processes have anything to add or expand to such constructs of immediacy and self-disclosure?
THANK YOU!

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