Understanding Resistance and Treating Complex Cases

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RESISTANCE

- What is it?
- Where does it come from?
- How do we remove it?
- Relationship between defense and resistance
- Relationship between resistance and alliance
- (and is it all bad?)

Freud

- Resistance is tied to repression
- First a feelings, wish or fantasy (sexual and aggressive impulses) is banished (repressed) from consciousness for being unacceptable but then a *resistance* must be formed to keep it from entering awareness in the future.

Freud's stand vis a vis resistance

- 1895 became increasingly interested in resistance and when it would arise – realizing it provided important information and a guide to areas of disturbance
- Declared that removal of resistance was the primary task of an analysis (1914)

Types of resistance (Freud)

1 -Repression of unacceptable feelings and wishes

- 2 Transference (repeat rather than remember)
- 3 Secondary gain

4 - One from the superego: the unconscious need to suffer and be punished

Overcoming resistance

- Started by taking an active approach, but found it exhausting and gave it up
- Decided that this process of overcoming resistance needed to be worked though – a long and arduous process
- Became increasingly pessimistic, particularly about the superego's resistance. He wrote we must "bow to the superiority of the superego's resistance", which has our efforts comes to nothing.

Reich

- Found few patients were simply neurotic. Most had character disorders – rigid, habitual patterns of D that effect self care, relationships and work.
- "If one neglects such character resistances, and instead follows the line of the material, such resistances form a ballast which is difficult, if not impossible, to remove."
- Interpretation is ineffective
- Spoke to patient's will
- Became more active and confronting

Davanloo's departure

- Influenced by Freud and Reich
- Felt Freud took a wrong turn when he became passive in face of superego resistance
- In contrast, he found "it is to be welcomed as an indicator that painful conflicts are not merely being approached, but can be brought to the surface and resolved."
- Furthermore, he discovered that "each time resistance is penetrated there is a marked and unmistakable increase in the strength of the therapeutic alliance."

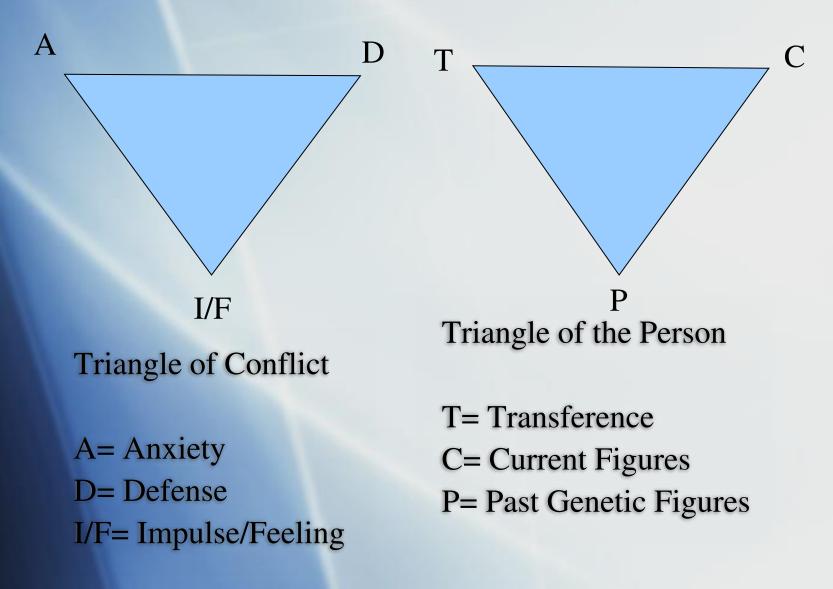
Sources of Resistance

- The patient and his disorder patient's reliance on defense creates their suffering and can form a wall that prevents them from getting help (sometimes the illness itself is resistant to our methods)
- The therapist –lack of knowledge and skill, misattunement, or counter transference
- The treatment itself need to create more effective methods when known treatments don't help, as many support defenses and low levels of functioning

Our focus

- Usually focus on the patient
- Davanloo focused on the *method/treatment* and developed innovative techniques for breaking down D and overcoming R; enabling the alliance to predominate and the unconscious to be unlocked
- Therapist must develop skills and capacities required to effectively administer treatment
- Examine our own contribution to the resistance

THE TWO TRIANGLES



GENETIC SYSTEM WITHIN THE UNCONSCIOUS

- 1- Love & Attachment
- 2- Pain & Grief
- 3~ Anger
 4~ Guilt
 5~ Character
 Defenses and
- Resistance to Closensess



Technical Interventions

- Build conscious and unconscious alliancenecessary to overcome resistance
- Acquaint patient with defenses and how they link together to form a wall (resistance)
- Examine cost and benefit
- Intensify conflict and create crisis
- Challenge patient to choose sides!
- Head on collision may be necessary
- Breakdown of D and breakthrough of I/F leading to unlocking

Responses

- Patient chooses suffering and leaves treatment
- Turns on defenses
- Passage of grief about cost
- Rise of rage underneath
- Uncover guilt and engine of self punishment

Watch for:

- Activation of healthy desire for freedom from suffering
- Intensification of internal conflict
- See how reliance on defenses are responsible for suffering and watch for emergence of grief
- Watch for signs that the ego is turning against defenses and willing to give them up
- Notice benefits of approaching feelings that have been chronically avoided
- Put pressure on patient to do something NOW
- Encourage healthy part to stand up to self defeat

Complex Case

55 year old woman

- In various treatments since age of 19
- including 2 hospitalizations and 12 step
- Anxiety, depression with suicidal impulses, acting out aggressively, getting fired
- Self destructive system (driven by guilt over murderous rage)
- If this is not undone, this therapy will also fail