



International Experiential Dynamic Therapy Association

Annual Conference 2014

Healing the Effects of Trauma

Friday, June 27 through
Sunday, June 29, 2014

Hyatt Regency Hotel
Bethesda, MD

Nagy

Co-sponsored by the Washington School of Psychiatry

WSP

International Experiential Dynamic Therapy Association

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2014 IEDTA CONFERENCE

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WELCOME FROM KRISTIN OBSORN, PRESIDENT, IEDTA



Dear Conference Attendees and Participants,

Welcome to the 2014 IEDTA Conference. This year our conference focuses on the use of Experiential Dynamic Therapies in the treatment of trauma. We are honored to have two leaders in the field of trauma treatment, Bessel van der Kolk and Christine Courtois, as our keynote speakers.

Since 2000, the IEDTA biennial conferences have provided Experiential Dynamic Therapy (EDT) researchers and clinicians an opportunity to come together to share their current research, published findings, and to demonstrate effective clinical techniques.

In a tradition inspired by the work and teaching of Habib Davanloo, David Malan and Peter Sifenos (1920-2008), the IEDTA promotes the use of audio-visual recordings of psychotherapy sessions for the purposes of close monitoring of clinical progress, and the research and development of theory, therapeutic techniques and teacher training.

Allan Abbass and Robert Johansson will both share their most recent EDT research findings based on outcome studies and meta-analyses of EDT's, neuroimaging, and two clinical trials of internet-delivered EDT's. Jeffrey Magnavita will present his research-based unifying psychotherapy framework. All three will support their conclusions with video demonstrations of 'what works'.

We are also delighted to be able to present clinical work by our own Michael Alpert, Thomas Brod, Kees Cornelissen, Patricia Coughlin, Jon Frederickson, Torben Hansen, John Rathouser, Terry Sheldon, and Beatriz Winstanley Sheldon. These presentations will demonstrate how EDT clinicians help patients face their true feelings, their adaptive capacities, and resolve the problems and symptoms related to their trauma.

In addition, we are happy to offer some innovative presentations that focus on EDT training. Monica Urru and Tony Rousmaniere will offer an opportunity for new teachers to meet and share ideas. Tony will also provide a presentation on supervision and include audio-visual segments of his own supervision with Jon Frederickson.

There are many people "behind the scenes" who have dedicated themselves to the success of this conference. We have their names listed under "Conference Committees," and I hope you'll take a moment to introduce yourself to them and thank them for all of their hard work. I also want to thank our Washington School of Psychiatry colleagues and partners in this conference, Bill Wears, Jon Frederickson and Lenore Shapiro.

This is an exciting time for the IEDTA and I'm so happy you have joined us this weekend. I hope you'll enjoy this opportunity to learn from one another, share what is unique about your work, have fun, create friendships, and discover your place in the heart of our community.

Sincerely Yours,
Kristin A. R. Osborn
President, IEDTA

IEDTA MISSION STATEMENT

The IEDTA is dedicated to the practice, research and dissemination of Experiential Dynamic Therapies (EDT's), also known as Short Term Psychodynamic Psychotherapies (STPP), or Short Term Dynamic Psychotherapies (STDP).

IEDTA HISTORY

During the 1980s and 90s, Michael Alpert, MD, founder of the NJ/NY STDP Institute and organized Short Term Dynamic Psychotherapy (STDP) conferences in New York and New Jersey. These provided an opportunity for clinicians who had studied the Intensive Short-Term Dynamic Psychotherapy (ISTDP) of Habib Davanloo, MD to present their work and engage in stimulating debate and discussion in an atmosphere of openness and collegiality. These clinicians had taken the powerful techniques of ISTDP and adapted them in new and unique ways.

One outgrowth of these conferences was ongoing email discussion of EDT-related topics. An informal e-mail discussion list was begun in spring of 1998. On January 1, 1999 Michael Alpert and Allen Kalpin, MD started the STDP Email Discussion List. Allen and Michael asked six others to become an informal board for the listserv.

The IEDTA was born in 2000, when Ferruccio Osimo, MD proposed forming an international umbrella organization to encourage research, the teaching of EDT's, and to promote productive dialogue between various types of EDT practitioners. Originally named IESA (International Experiential STDP Association), the organization had its founding conference in Milan, Italy in May of 2001, which was attended by approximately 300 people. Since that time, conferences have taken place roughly every two years.

In 2004, the IESA board decided to refer to the therapies as Experiential Dynamic Therapies (EDT's), rather than Experiential Short-Term Dynamic Psychotherapies (E-STDP's) and so the name of the organization was changed to the International Experiential Dynamic Therapy Association (IEDTA). Since 2007, the IEDTA has set certification standards for EDT core training, EDT teachers and EDT supervisors.

IEDTA CERTIFIED TRAINING PROGRAMS

APT with Kristin Osborn

DEFT with Susan Warshow

IEDP with Ferruccio Osimo

ISTDP with Allan Abbass

ISTDP with Jon Frederickson

ISTDP with Patricia Coughlin

ISTDP with Robert J. Neborsky

ISTDP with Josette ten Have-de Labije and Kees Cornelissen

TYPES OF EDT REPRESENTED AT THE 2014 IEDTA CONFERENCE

EDTs are psychodynamic, experiential, relational and they focus on creating meaningful results in the shortest amount of time possible.

ACCELERATED EMPATHIC THERAPY (AET)

AET, developed by Michael Alpert, refines time-tested ways people connect with one another in order to make them conscious and powerful. Both therapist and patient begin to recognize weak as well as strong body sensations. They learn their own unique triggers and how to read their bodies from moment to moment. As they disclose and share these experiences, they form a strong alliance. The verbalizing of empathic experiences is known as Empathic Interaction. When video feedback is used self-compassion grows. Compassion melts pathological defenses and quickly leads to transformation.

ACCELERATED EXPERIENTIAL DYNAMIC PSYCHOTHERAPY (AEDP)

AEDP, developed by Diana Fosha, is a transformation-based, healing-oriented model of treatment. Unlike traditional models of therapy that are psychopathology-based, AEDP roots itself in transformational theory, a change-based theory of therapeutic action.

AFFECT PHOBIA THERAPY (APT)

APT, developed by Leigh McCullough, integrates aspects of Davanloo's ISTDP with learning theory and the affect theory of Silvan Tomkins.

ATTACHMENT-BASED INTENSIVE SHORT-TERM DYNAMIC PSYCHOTHERAPY (AB-ISTDP)

AB-ISTDP, developed by Robert Neborsky applies the clinical insights and techniques of Davanloo's ISTDP, informed by research on attachment and emotion regulation.

DYNAMIC EMOTION FOCUSED THERAPY (DEFT)

DEFT, developed by Susan Warren Warshow, utilizes carefully crafted, shame-sensitive interventions that convey compassion through verbal and embodied responses. These aim to most effectively regulate and transcend inhibitory and defensive affects and self-hurting defenses.

INTENSIVE EXPERIENTIAL-DYNAMIC PSYCHOTHERAPY (IEDP)

IEDP, developed by Ferruccio Osimo, has a particular emphasis on explicit exploration of the therapeutic relationship as a fundamental basis upon which therapeutic techniques build.

INTENSIVE SHORT-TERM DYNAMIC PSYCHOTHERAPY (ISTDP)

ISTDP, developed by Habib Davanloo, was a groundbreaking departure from previous short-term dynamic therapies because of its strong emphasis on the experience of deep emotion. All other EDT's were inspired by this model.

PERSONALITY-GUIDED RELATIONAL THERAPY

Personality-Guided Relational Therapy, developed by Jeffrey Magnavita, focuses on interacting systems that range from the biological and intra-psychic to the socio-cultural and familial.

WSP Washington School of Psychiatry

WELCOME FROM LENORE SHAPIRO, ACTING EXECUTIVE DIRECTOR



Welcome to the 2014 Biennial IEDTA Conference! My name is Lenore Shapiro, Acting Executive Director of the Washington School of Psychiatry. I am happy to have the chance to personally welcome you to this powerful conference on trauma. The School is honored to be the co-sponsor for this important event. As seen in our mission statement, the WSP shares with the IEDTA the values of open thought and dialogue and an approach to psychotherapy that integrates psychology and biology with social and cultural perspectives.

Psychotherapy researchers continue to develop new understandings of the development, structure and functioning of the mind. The next few days offer us a rich opportunity to see expert clinical work in practice and learn more about the cutting edge of trauma treatment.

Thank you again for joining us this weekend. I know we will all find it useful, if not critical, as we think about our own clinical challenges in this area.

You can find more details about the Washington School's training programs, conferences, history and commitments at www.wspdc.org

Sincerely,

Lenore Shapiro
Acting Executive Director
WSP

MISSION OF THE WASHINGTON SCHOOL OF PSYCHIATRY

The Washington School of Psychiatry is dedicated to the promotion of human welfare through the advancement of mental health. The School offers postgraduate professional education and training, fosters the spirit of inquiry, and offers a wide range of mental health services in the Washington metropolitan area.

The School also is an active center that provides public information, education, and advocacy for the best in mental health scholarship, training and treatment. It invites individuals and organizations from the mental health professions and from the community at large to join in this task.

Building on a foundation of psychodynamic psychotherapy, the Washington School draws in other theoretical and treatment orientations. It encourages dialogue and research that integrate emerging developments from psychological, biological and socio-cultural research while preserving the valuable body of knowledge that has been gathered in the 20th and 21st centuries. In pursuit of its task, the School continues a tradition of open inquiry and inclusiveness which promotes respect for the uniqueness of every individual.

The School strives to foster an environment in which the range of significant differences among individuals (e.g. race, gender, age, sexual orientation, ethnicity, ability and disability, religion, social class) can be better understood, valued, and worked with in our teaching and therapeutic practice. We seek to challenge stereotypes and to develop cultural competence and sensitivity to racism and discrimination through self-reflection, ongoing self-evaluation, and open dialogue.

By honoring these commitments, the Washington School of Psychiatry works to shape an environment that will carry forward the vision of Harry Stack Sullivan and his colleagues.

International Experiential Dynamic Therapy
Association
Annual Conference Program
Friday, June 27 through Sunday, June 29, 2014
Washington, DC

Friday

8:30AM-9:30AM	Registration
9:30AM-9:40AM	Kristin Osborn and William Wears Welcome!
9:40AM-11:10AM	Bessel van der Kolk, USA, Keynote The Body Keeps the Score
11:10AM-11:25AM	Break
11:25AM-12:30PM	Allan Abbass, Canada Short-term Psychodynamic Psychotherapy: Evidence update and focus on PTSD
12:30:PM-2:00PM	Lunch
2:00 PM-3:30 PM	Patricia Coughlin, USA The Broken Bird: Restoring the Ability to Love
3:30PM-3:40PM	Special Presentation The Playtime Project
3:40PM-4:00PM	Break
4:00PM-5:30PM	Jeffrey Magnavita, USA The Path from Symptoms to Trauma through a Unifying Perspective
5:30PM-6:00PM	Panel Jon Frederickson, USA, moderator
6:30PM-8:30PM	Informal Gathering, Concourse Lounge

Saturday

- 8:30AM-10:00AM Christine Courtois, USA, Keynote
Treating Complex Trauma: A sequenced, relationship-based approach
- 10:00AM-10:30AM Break
- 10:30AM -12:00PM *Concurrent Sessions*
- John Hans Rathauer, USA
Working with Resistance in the Transference Using Davanloo's Interlocking Head-on-Collision
- Tom Brod, USA
The Gentle Giant in Trauma: Psychodiagnosis and Management of Vengeance
- Jon Frederickson and Tony Rousmaniere, USA
Common Emotional Reactions to Teaching & Learning EDT's: Challenges & Opportunities
- 12:00PM-1:30PM Lunch
- 1:30 PM-3:30 PM *Concurrent Sessions*
- Kees Cornelissen, The Netherlands
Projection, Transference & Trauma: A Case Illustration
- Robert Johansson, Sweden
Recent Research on Experiential Dynamic Therapy
- Albert M. Sheldon, III and Beatriz Winstanley
Sheldon, USA and Canada
Two Paradoxes of Providing a Safe Therapeutic Process for Trauma Patients
- 3:30PM-4:00PM Break
- 4:00PM-5:30PM Susan Warshow, USA
Disarming Defenses DEFTly
- 5:30PM-6:00 PM Panel Discussion
Allen Kalpin, USA, moderator

GALA

7:00pm-9:00PM

Dinner

9:00PM-11:00PM

Dancing

Sunday

8:30AM-10:00AM

Michael Alpert, USA

The Good Soldier: Using video feedback to reduce self-attack

10:00AM-10:30AM

Break

10:30AM -12:00PM

Concurrent Sessions

Torben Palmer Hansen, Denmark

The Woman Who Choked Herself

Tony Rousmaniere and Jon Frederickson, USA

Remote Live Supervision: Using videoconference for live, one-way mirror supervision

12:00PM-1:30PM

Lunch

1:30 PM-3:30 PM

Concurrent Sessions

Kristin Osborn, USA

How to Resolve Intergenerational Trauma

Tony Rousmaniere, USA and Monica Urru, Italy

Discussion Group for New EDT Teachers and Those Who Want to Teach

3:30PM-4:00PM

Break

4:00PM-5:30PM

Jon Frederickson, USA

The Man Who Had No Problem: A case of attachment trauma

5:30PM-6:00 PM

Panel Discussion

Nat Kuhn, USA, moderator

Friday
9:40_{AM} -11:10_{AM}

Keynote
The Body Keeps the Score

Bessel van der Kolk, MD



Over the past few years, new insights into trauma's impact on body, brain and relationships have spawned a range of new approaches to treatment. Many of these modalities can be considered fundamental shifts from earlier therapeutic paradigms. We will examine how neuroscience research has elucidated the ways, in the course of development, children learn to regulate their arousal systems and to focus on what is most relevant. We will then examine how trauma, abuse and neglect derail these processes and affect brain development. Since traumatic imprints are stored in subcortical brain areas and are largely divorced from verbal recall, a central focus needs to be to the somatic experiencing of trauma-related sensations and affects. These deep imprints are the engines for continuing maladaptive behaviors. Fixation on the trauma and learned helplessness require interventions aimed at restoring active mastery and the capacity to attend to the here-and-now.

With the aid of videotaped demonstrations and experiential demonstrations of affect regulation techniques, we will examine the role of body-oriented therapies, neurofeedback, yoga, theater, IFS and EMDR in resolving the traumatic past. Furthermore, we will discuss the integration of these approaches during different stages of treatment.

LEARNING OBJECTIVES

1. Attendees will learn about the recent developments in the treatment of PTSD, and the effects that they have been shown to have on the recovery of traumatized individuals.
2. Attendees will learn techniques of physical mastery, affect regulation and memory processing.

LIST OF TOPICS

- What is trauma and what are its effects on mind, brain, families, and society?
- Neuroscience: How does the brain deal with stress and trauma, Self-regulation, attachment, rhythms, attunement, mirror neurons; neglect, abuse and invisibility
- Trauma and development, Developmental Trauma Disorder
- What does a chronically traumatized brain look like and what does that mean for treatment?
- Pharmacotherapy
- Somatic therapies, Sensory Integration and meditation/mindfulness
- EMDR and trauma processing
- Power of movement and action: yoga & martial arts
- Neurofeedback
- Theater & Psychodrama
- Trauma and society - implications for policy

ABOUT THE PRESENTER

Bessel A. van der Kolk, MD has been the Medical Director of The Trauma Center in Boston for the past 30 years. He is a Professor of Psychiatry at Boston University Medical School and serves as the Director of the National Center for Child Traumatic Stress Complex Trauma Network. He is past President of the International Society for Traumatic Stress Studies. Though he identifies himself primarily as a clinician, he has published well over 100 peer reviewed scientific articles on various aspects of trauma, including his current projects: 1) yoga for treating PTSD, funded by the National Institutes of Health; 2) the use of theater for violence prevention in the Boston public schools, funded by the CDC; 3) the mechanisms of EMDR; 4) sensory integration; and 5) the use of neurofeedback in PTSD.

He participated in the first neuroimaging study of PTSD in the first study to link Borderline Personality Disorder with childhood trauma; was co-principal investigator of the DSM IV Field Trial for PTSD. He is chair of the NCTSN DSM V workgroup on Developmental Trauma Disorder. He has written extensively about the use of neuroscience research to identify appropriate treatments for PTSD, and he completed the first NIMH-funded study of EMDR. He has taught at universities and hospitals around the world.

11:25_{AM} -12:30_{PM}

Short-Term Psychodynamic Psychotherapy: Evidence update and focus on PTSD

Allan Abbass, MD



In this presentation, Dr. Allan Abbass will review the current state of evidence for short-term psychodynamic psychotherapy, a cluster of treatments that include Experiential Dynamic Treatments. These studies include over 150 outcome studies and a dozen meta-analyses, along with new neuroimaging-based studies highlighting how the models may work. The combined models of David Malan, MD and Habib Davanloo, MD are the best studied of all the short-term psychodynamic psychotherapies with approximately 40 randomized controlled trials showing large and persistent effects across broad patient groups. He will review a preliminary case series of Intensive Short-Term Dynamic Psychotherapy treated patients with PTSD, including the health cost outcomes. He will also present a case vignette highlighting the deeper zones of unconscious impulses and feelings in a patient with early trauma to highlight the emotional underpinnings driving the many ways that PTSD can present in adulthood. He will also highlight the most important method of evidence-gathering: the individual case study.

LEARNING OBJECTIVES

1. Attendees will be able to describe the state of evidence for short-term psychodynamic psychotherapy.
2. Attendees will be able to identify the underlying emotions common in PTSD.

ABOUT THE PRESENTER

Dr. Allan Abbass is currently a Professor of Psychiatry and Psychology and founding Director of the Centre for Emotions and Health at Dalhousie University in Halifax, Nova Scotia, Canada. He is a leading teacher and researcher in the area of short-term psychotherapy, having contributed over 150 publications. He is known for simplifying the theory and technical aspects of the model with the use of algorithms and by highlighting moment to moment processes that inform intervention. He has received a number of teaching awards including a national teaching award in Psychiatry and the Douglas Utting Prize for contributions to the treatment of Depression (2013). He has been honored with visiting professorships at several international universities and institutions and provides training programs in several international centers.

2:00_{PM} -3:30_{PM}

The Broken Bird: Restoring the Ability to Love

Patricia Ann Coughlin, PhD



This is the case of The Broken Bird, a 60 year old woman who came to therapy complaining that there was something wrong with her heart. She found herself unable to love and be loved, but didn't know why. She was in a long-term relationship, but could neither commit to marriage, nor leave her marriage. She picked on him relentlessly and they had not had sex in years. She was very fond of her husband and was distressed by the fact that she treated him this way. Again, she did not know why she behaved in this manner. Ten years of a Jungian analysis had not gotten to the bottom of her difficulties or resulted in any change.

In this presentation, I hope to show a process of healing, in which all the defenses against closeness, pain and rage, regarding repeated and intense trauma to loving bonds with family members, are overcome. Facilitating all of her feelings and coming to terms with what had happened to her constituted the process of working through toward change. She is a remarkable woman - resilient in many ways. She was threatened with abandonment repeatedly (for example, when she was only 5 years old, she had to retrieve her mother, who had run away). She witnessed an attempted murder of her brother by her parents, and was sexually violated by a different brother. Despite these

traumas, she was able to go to college, leave her homeland in Taiwan, arrange to have someone marry her so she could gain entry into the US, and had establish a very successful business life. This scrappy, tough exterior helped her survive, but kept everyone at a certain distance and prevented love and deep connection.

This therapy took 30 sessions and was ultimately very successful. In the end, allowing for feelings of love between therapist and patient to be directly experienced, was necessary to finally dissolve the fear and reluctance to be truly open, present and available to another.

LEARNING OBJECTIVES

- 1) Attendees will learn to identify and remove defenses against emotional closeness.
- 2) Attendees will learn to evaluate strengths and capacities, as well as areas of difficulty, in order to work at the patient's highest level of tolerance.

ABOUT THE PRESENTER

Dr. Patricia Ann Coughlin is a Clinical Psychologist with over 30 years of experience, the last 25 of which have been focused on the practice of Intensive Short-Term Dynamic Psychotherapy. In addition to a private practice, Dr. Coughlin has held faculty positions in the Departments of Psychiatry at Northwestern School of Medicine, Evanston, Illinois; Albany Medical College, Albany, New York; and Thomas Jefferson School of Medicine, Philadelphia, Pennsylvania. Currently, she is Clinical Professor at the University of New Mexico. She has written two books, several chapters, and numerous journal articles on ISTDP. She runs training groups for mental health professionals in the US, Europe and Australia.

4:00_{PM} -5:30_{PM}

The Path from Symptoms to Trauma through a Unifying Perspective

Jeffrey J. Magnavita, Ph.D., ABBP



The path from symptoms to trauma is often difficult for psychotherapists to follow. This presentation will provide a unifying map to guide treatment. For many patients, unresolved traumatic events, or developmental and relational trauma have derailed personality development resulting in the expression of a spectrum of symptom constellations. When symptom constellations do not respond to first line treatment approaches, it is often necessary to identify, process, and restructure neurobiological and relational traces of trauma that interfere with personality functioning. In this presentation, vignettes from one case will be used to demonstrate the process in a single interview. The path from symptoms to trauma in a patient, who has limited awareness of these traumatic experiences and their impact on her personality functioning and symptomatic expression, will be revealed. A unifying framework will be used to orient the process of treatment so that the patient can receive treatment that matches her preferences and optimizes outcome.

LEARNING OBJECTIVES

1. Attendees will understand and apply a unifying framework for the treatment of trauma.
2. Attendees will identify the core components of effective trauma treatment.

ABOUT THE PRESENTER

Jeffrey J. Magnavita, Ph.D., ABPP is a leading psychologist, psychotherapist and clinical theorist, who has been practicing psychotherapy for three decades. He is the author and editor of seven professional books on psychotherapy, personality theory, and the treatment of personality disorders. Dr. Magnavita has received numerous awards for his work including the American Psychological Association's (APA) Award for Distinguished Professional Contribution to Independent or Institutional Practice in the Private Sector. He has been featured in two APA videotapes demonstrating his unifying approach to psychotherapy. He served as the President of the Division of Psychotherapy of APA in 2010 and is the producer of the video series *Psychotherapists Face-to-Face* (www.divisionofpsychotherapy.org/face-to-face). His work focuses on the unification of clinical science. He is the Founder of the Unified Psychotherapy Project (www.unifiedpsychotherapyproject.org) and the Co-Editor of the *Journal of Unified Psychotherapy and Clinical Science* (JUPSC) (www.unifiedpsychotherapyproject.org/ejournal/ojs-2.2.2/index.php). He is trained in a number of modalities and approaches to clinical treatment and his work seeks to combine the best of all approaches to maximize treatment outcome. He currently serves as the Vice-Chair of the APA Steering Committee, tasked with the development of Clinical Practice Guidelines and is a lecturer in the Department of Psychiatry at Yale University. His most recent volume with Jack C. Anchin is *Unifying Psychotherapy: Principles, Methods, and Evidence from Clinical Science*. His forthcoming volume, with APA, is *Clinical Decision-Making in Behavioral and Mental Health Practice*.

5:30^{PM} -6:30^{PM}

Closing Panel Discussion Jon Frederickson, moderator



Saturday
8:30_{AM}-10:00_{AM}

Keynote
Treating Complex Trauma:
A sequenced, relationship-based approach

Christine A. Courtois, PhD, ABPP



Complex posttraumatic conditions develop in the aftermath of chronic cumulative trauma, particularly severe child abuse and neglect and insecure/disorganized attachment. It can also develop over the course of adulthood in response to other types of trauma. The objective of this keynote is to provide clinicians with an increased understanding of the nature and treatment of these conditions, drawing upon recent clinical writings and empirical findings. The recommended sequence of treatment with associated hierarchical tasks will be articulated. The importance of the therapeutic relationship to the treatment will be discussed and stressed, including the demands on the therapist and the rewards of this work.

LEARNING OBJECTIVES

1. Attendees will be able to identify the aftereffects of chronic cumulative trauma (particularly during childhood) as a complex posttraumatic condition, and will be able to identify criteria of this condition.
2. Attendees will gain an understanding of the sequencing of treatment for complex posttraumatic conditions.
3. Attendees will be able to identify a variety of treatment strategies and techniques for complex posttraumatic conditions.

ABOUT THE PRESENTER

Christine A. Courtois, PhD, ABPP, is an internationally recognized licensed psychologist for her work on the effects of incest, child sexual abuse, complex traumatic stress disorders and other types of trauma. She specializes in the treatment of posttraumatic and dissociative conditions and disorders. Dr. Courtois is the chair of the American Psychological Association PTSD Guidelines Development Panel. Dr. Courtois has authored several books in the field of trauma including *Treating Complex Trauma: A Sequenced, Relationship-based Approach*, *Treating Complex Traumatic Stress Disorders in Children and Adolescents*, *Healing the Incest Wound: Adult Survivors in Therapy*, *Complex Traumatic Stress Disorders: An Evidence-based Guide*, *Recollections of Sexual Abuse: Treatment Principles and Guidelines*, *Adult Survivors of Sexual Abuse: A Workshop Model*; and *Healing the Incest Wound: Adult Survivors in Therapy*.

Dr. Courtois is also co-founder and former Clinical and Training Director and consultant to The CENTER: Posttraumatic Disorders Program, an in-patient and day hospital specialty program in Washington, DC, where she worked for 17 years. She is active in a number of professional organizations having to do with psychotherapy practice and trauma.

10:30_{AM} -12:00_{PM} CONCURRENT

Working with Resistance in the Transference using Davanloo's Interlocking Head-on-Collision

John H. Rathouser, PhD



An audio-video vignette from an initial psychotherapy session will show strong defiance activated in the session in relationship to the therapist. The interlocking head-on-collision is used to break down heavily syntonic resistance, and demonstrates a strong breakthrough of feelings in the transference, where the therapist is now seen to be transferentially sitting in the shoes of the mother. The breakthrough ushers in a fundamental shift from unconscious defiance to the beginning of a therapeutic alliance, with a willingness to now begin to engage in an exploration of his unconscious with the therapist.

LEARNING OBJECTIVES

1. Attendees will be able to define what is meant by crystallization of the defenses in the transference.
2. Attendees will be able to list and describe the sixteen components that are selectively utilized in an interlocking head-on-collision.

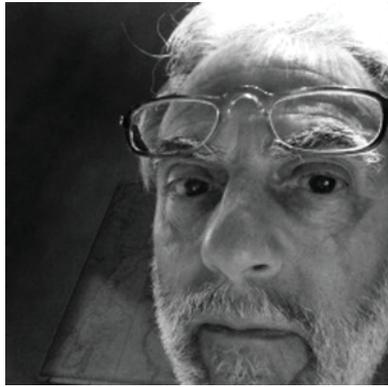
ABOUT THE PRESENTER

John H. Rathauer, PhD is a licensed psychologist with over 35 years of clinical experience. Following completion of his doctorate in clinical psychology at the California School of Professional Psychology in Los Angeles, his post-doctoral continuing education began with a five-year period of training at the Postgraduate Center for Mental Health in New York. In 1994 John Rathauer entered into training with Habib Davanloo, M.D. in Montreal, Canada, and spent eight years in Dr. Davanloo's Montreal Core Training Group. This training is ongoing, with annual weeklong metapsychology conferences, which Dr. Davanloo continues to hold in Montreal. John Rathauer's private practice in Kendall Park, New Jersey, is largely devoted to the practice of Davanloo's Intensive Short-Term Dynamic Psychotherapy (ISTDP), as well as providing training to mental health practitioners. He has offered numerous presentations on ISTDP nationally and internationally. You can contact him at johnrathauer@comcast.net.

10:30_{AM} -12:00_{PM} CONCURRENT

The Gentle Giant in Trauma: Psychodiagnosis and Management of Vengeance

Thomas M. Brod, MD, DFAPA



A case is presented to initiate a discussion about trauma and homicidal urgency (dangerousness). After presentation of the clinical situation, a 40-minute video excerpt of one session, and a very short video follow-up, we will be able to discuss the following points.

- How to differentiate primitive destructive images/ruminations/ obsessions from destructive impulses that may be acted out.
- Psychodiagnosis of patients obsessed with revenge and vengeance.
- When do the legal issues of Dangerousness (Tarasoff) need to be considered in intensive psychotherapy?
- What is the likelihood that poorly applied ISTDP can contribute to frank dangerousness in clients and patients?
- To what extent were the primitive destructive images that preoccupied the patient a product of suggestion of the therapist and super-ego identification by the patient with the therapist?
- What alternate applications of treatment might have been applied?

LEARNING OBJECTIVES

1. Attendees will be able to define three categories of vengeance as a psychoactive state and how each might be managed.
2. Attendees will develop a therapeutic schema that differentiates anger from intention to harm, and from obsessive revenge fantasies.

ABOUT THE PRESENTER

Thomas M. Brod, MD is Associate Clinical Professor, Psychiatry, Geffen UCLA School of Medicine, and he is a member of the Senior Faculty, New Center for Psychoanalysis, Los Angeles. He directs the Self-Regulation Medical Group in Los Angeles. He has studied ISTDP with Robert Neborsky and Habib Davanloo. More info at www.eegym.com

10:30_{AM} -12:00_{PM} CONCURRENT

Common Emotional Reactions to Teaching & Learning EDT's: Challenges & Opportunities

Jon Frederickson, MSW & Tony Rousmaniere, PsyD



Training in Experiential Dynamic Therapies can spark strong emotional reactions in both teachers and learners. If recognized and addressed, these reactions can be opportunities for personal growth and development of both the teacher and learner. However, if the reactions are ignored or denied, they can pose challenges to the training process, and even personal harm. In this presentation, we will discuss some of the more common emotional reactions experienced by both teachers and learners of EDT's, and provide recommendations for how both teachers and learners can recognize and address these reactions.

LEARNING OBJECTIVES

1. Attendees will be able to name a variety of common emotional reactions which occur in the teaching and learning of EDT's.
2. Attendees will learn how to address these common emotional reactions.

ABOUT THE PRESENTERS

Jon Frederickson, MSW, is founder and former Co-Chair of the Intensive Short Term Dynamic Psychotherapy (ISTDP) Training Program at the Washington School of Psychiatry. He is also Chair of the ISTDP Training Program hosted by the Norwegian ISTDP Society, Drammen, Norway. He is on the faculty of the LaboratoriumPsykoeducacji in Warsaw, Poland. Jon provides ISTDP training in Sweden, Norway, Denmark, Poland, Italy, Lebanon, Australia, and the U.S. He is the author of over twenty published papers and two books, *Co-Creating Change: Effective Dynamic Therapy Techniques* and *Psychodynamic Psychotherapy: Learning to Listen from Multiple Perspectives*. His DVDs, skill building exercises, and books are available at www.istdpinstitute.com. He writes posts on ISTDP at www.facebook.com/DynamicPsychotherapy.

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1:30_{PM} -3:30_{PM} CONCURRENT

Projection, Transference & Trauma: A Case Illustration

Kees L.M. Cornelissen



In this digital video entitled, *Hide and Seek: The story of the boy who wanted to be found but never was*, a severely abused and traumatized patient, while having his first session, gives uncontrolled proof of the existence of the unconscious therapeutic alliance. Uncontrolled proof means that the messages from the patient to the therapist clearly originate from the unconscious and are not interfered with by the superego's destructive forces and pathology. Working in the transference during the session, the patient experiences an intrapsychic crisis that facilitates the unlocking of the unconscious and the trauma from the past. This trauma is worked through and eventually leads to a partial breakthrough during the therapeutic process.

LEARNING OBJECTIVES

1. Attendees will learn the proper diagnosis of superego pathology.
2. Attendees will learn the process of undoing projection, transforming the standardized and generalized perception error called projection into transference (Step one).
3. Attendees will learn how the complex transference feelings, once crystallized in the therapeutic relation are transferred back to the original object (Step two).

ABOUT THE PRESENTER

Kees L.M. Cornelissen is a trained and registered psychotherapist with a private practice in Breda, The Netherlands. He was educated as a sociologist at the Free University in Amsterdam. He is trained in Groupanalysis, Client-Centered therapy, and in Transactional Analysis among other techniques. He was educated in the theory and practice of ISTDP by Habib Davanloo in Canada, and also trained in the ISTDP continuing education program in The Netherlands by Josette ten Have-de Labije, among others. He became a teacher and supervisor of several psychotherapeutic modalities and in 2005 he developed and founded the only existing Residential ISTDP program. Later he established several ISTDP day treatment programs. He is now a trainer in ISTDP, holds a position on the board of the IEDTA, and is on the editorial board of the *Ad Hoc Bulletin*, as well as being a co-trainer in ISTDP core training groups in Norway, England, Poland and The Netherlands. He has presented at many national and international conferences, has written several articles about the application of ISTDP technique, and has written a book on residential treatment with ISTDP, *R-ISTDP* (2007). He used to work in the Viersprong, a residential centre for psychotherapy in the south of The Netherlands. He is now developing a centre of expertise in ISTDP in The Netherlands where people can receive core training and also specialize in residential treatment applications of ISTDP. Currently he is living in Antwerp in Belgium and working in private practice in the Netherlands (Bredacity).

Recent Research on Experiential Dynamic Therapy

Robert Johansson, PhD



In this research seminar, the focus will be recent research that investigates Experiential Dynamic Therapy. First, a systematic overview of the overall effects of EDT for a range of conditions will be presented. Second, data from a large effectiveness trial on Intensive Short-Term Dynamic Psychotherapy will be described. Third, the model of Internet-delivered EDT in the format of guided self-help will be described and results from two systematic research trials will be presented. The titles of the three talks are:

1. The overall efficacy of Experiential Dynamic Therapy: a meta-analysis of 27 randomized controlled trials;
2. Intensive Short-Term Dynamic Psychotherapy in a tertiary psychotherapy service: Overall effectiveness and effects of unlocking the unconscious in a sample of 500 patients; and
3. Internet-delivered Experiential Dynamic Therapy for depression and anxiety disorders: Experiences from two randomized controlled trials.

LEARNING OBJECTIVES

1. Attendees will learn how effective Experiential Dynamic Therapy is when tested in systematic research.
2. Attendees will learn about recent research on Intensive Short-term Dynamic Psychotherapy.
3. Attendees will learn about Experiential Dynamic Therapy when delivered as guided self-help through the Internet.

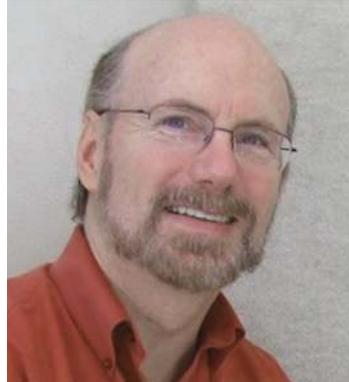
ABOUT THE PRESENTER

Robert Johansson completed his PhD in clinical psychology from Linköping University, Sweden in 2013. He and his colleagues have developed an affect-focused psychodynamic treatment protocol for delivery through the Internet, targeting depression and anxiety disorders. The treatment was in the format of guided self-help and was based on Affect Phobia Therapy and the self-help book *Living Like You Mean It* by Ronald J. Frederick. Robert Johansson is currently doing post-doctoral research and clinical training in Davanloo's Intensive Short-Term Dynamic Psychotherapy under the direction of professor Allan Abbass at the Centre for Emotions and Health, Halifax, Nova Scotia, Canada. He is also still affiliated with Linköping University and continues to do research on Internet-delivered affect-focused interventions.

1:30_{PM} -3:30_{PM} CONCURRENT

Two Paradoxes of Providing a Safe Therapeutic Process for Trauma Patients

Albert M. Sheldon, III, MD and
Beatriz Winstanley Sheldon, M Ed Psych



Paradox 1 — Patients with Trauma have often learned that relationships are not safe. Their Hippocampus and amygdala are hyperactive leading to psychophysiological reactions and automatic relational [transference] patterns which keep others at a distance. Keeping themselves safe interferes with the benefits of having a ‘safe’ relationship with the therapist. “People with trauma do not regulate their physiology with other people.” [van der Kolk]. We will explore how to co-regulate the patient’s hyperarousal using the therapeutic relationship and specific interventions to stimulate calming neurotransmitters such as oxytocin, serotonin and endorphins

Paradox 2 — When we are successful with building a safe therapeutic attachment, the closeness and intimacy that ensues paradoxically often uncovers affects such as shame, guilt, terror and emotional pain. This surprising paradox provides us with a new opportunity to restructure the ways in which affect is processed in this patient. We will do two live therapy demonstrations to enable the participants to experience this therapeutic process. The first demonstration will be with the two presenters. The second will be with one of the participants.

LEARNING OBJECTIVES

1. Attendees will be able to describe one of the paradoxes of successful work with trauma patients.
2. Attendees will be able to identify specific factors to facilitate 'safeness' and anxiety regulation in working with trauma patients.

ABOUT THE PRESENTERS

Albert M. Sheldon, MD is a Clinical Professor of Psychiatry at the University of Washington, Seattle and has conducted research and taught psychotherapy for 20 years. He has trained in many psychotherapeutic modalities including 10 years in Intensive Short-Term Dynamic Psychotherapy (ISTDP) in Montreal, Canada with Dr. Habib Davanloo. Dr. Sheldon received a three year Bush Medical Fellowship to pursue research in psychotherapy. He practices and teaches psychotherapy in Seattle, WA. Dr. Sheldon has united with Ms. Winstanley Sheldon in pioneering a different Psychotherapy paradigm: Complex Integration of Multiple Brain Systems Psychotherapy (CIMBS) utilizing extensive clinical research and incorporating the latest knowledge from neuroscience. This paradigm is based on the Conceptualization of Multiple Brain Systems taken from the latest brain research including the research in human neuroscience, brain scan research by R. Davidson, and the Mammalian Emotions research by J. Panskeep. They have also developed new experiential teaching approaches to enable therapists to incorporate (even embody) the wisdom into their own therapeutic work.

Beatriz Winstanley Sheldon, MEd Psych has practiced psychotherapy in Vancouver, BC, Canada for 25 years and trained and supervised clinical counselors, psychologists and psychiatrists for the past 10 years. She graduated with a MEd. Psych. from McGill University, Montreal, Canada where she also completed a postgraduate specialization in Intensive Short- Term Dynamic Psychotherapy. Ms. Winstanley Sheldon has united with Dr. Sheldon in pioneering a different Psychotherapy paradigm: Complex Integration of Multiple Brain Systems Psychotherapy (CIMBS).

4:00_{PM} -5:30_{PM}

Disarming Defenses DEFTly

Susan Warren Warshow, LMFT, MSW



How do we meet the challenge when a client devalues the therapist, either directly or subtly? How do we remain non-defensive ourselves? We shall follow work with a high-achieving female executive who readily experiences criticism and unconscious shame in response to input from the therapist, or others. She is prone to being judgmental and lashing out aggressively due to splitting, projection, and regressive defenses. She has been laid off and seeks help for depression, nightmares, terror about her inability to function, and severe marital difficulties. In the course of treatment, she courageously faces the impact of her narcissistic traits on her own daughter, husband and co-workers. Deep remorse emerges as she discovers she has been unconsciously acting out traits of both her mother and father. At termination, she has changed significantly in her ability to self-nurture and exercise choice in relation to her damaging defenses.

LEARNING OBJECTIVES

1. Attendees will be able to describe how to interrupt defenses while awakening compassion for self.
2. Attendees will be able to apply techniques to build and sustain the therapeutic alliance.

ABOUT THE PRESENTER

Susan Warren Warshow, LCSW, LMFT is the founder of the DEFT Institute, is on the faculty of the ISTDP (Intensive Short-Term Dynamic Psychotherapy) Institute, and is a Certified IEDTA (International Experiential Dynamic Therapy Association) Teacher/Supervisor. She has been a featured speaker for the California Association of Marriage and Family Therapists on several occasions and has presented at the National Association of Social Workers annual conference and the IEDTA biennial international conference. She guest lectures at numerous institutions including California State University Northridge, California Graduate Institute, Los Angeles County Psychological Association, and California School of Professional Psychology. She has published five articles in the Ad Hoc Bulletin, an international journal of the Dutch Association for Short-Term Dynamic Psychotherapy (the VKDP). Susan has a private practice in Woodland Hills, California treating individuals and couples and specializes in anxiety, depression, relationship issues, and self-defeating personality traits.

5:30_{PM} -6:30_{PM}

Closing Panel Discussion
Allen Kalpin, moderator



Sunday
8:30_{AM}-10:00_{AM}

The Good Soldier:
Using video feedback to reduce self-attack

Michael Alpert, MD



The reduction of self-attacking behavior and pathological defenses are frequent goals in the Experiential Dynamic Therapies. This presentation focuses on the use of video feedback to help a traumatized patient reduce her self-attacking behavior and pathological defenses. A brief description of the process of using video feedback to avoid defenses and promote self-care will be followed by a video presentation in which a 50-year-old woman frees herself from the psychic wounds inflicted by her authoritarian father. After internalizing his harsh critical view of her, she entered a series of damaging relationships. Numbing herself and unable to receive love, due to her fear of the pain of loss, she suffered repeated depressions and lower back and hip pain. Experiencing and describing her rage towards her father relieved her physical pain. However her depression, which she hid under a smile, persisted. When she examined the expression in her eyes on a video monitor, she saw her hopelessness and seeing it evoked a tear. Recognizing that she cared about herself, waves of happy/sad tears engulfed her. She felt alive for the first time in 30 years and realized that she had been sleepwalking through life in an attempt to avoid any additional pain.

LEARNING OBJECTIVES

1. Attendees will learn how people become aware of their emotions when they examine the facial expressions that they see on their faces in a video.
2. Attendees will learn how self-care blossoms when people respond to the expressions and emotions seen on their faces in the video.

ABOUT THE PRESENTER

Michael C. Alpert, MD, MPH received his BA from UCLA and his medical degree from UC Irvine. After an internship at Bellevue hospital and a psychiatric residency at the University of Colorado, he attended the Harvard School of Public Health. There he worked with Alexander Leighton, who ignited his interest in epidemiologic and physiologic approaches to mental health. After receiving his MPH, he did an epidemiologic study of the determinants of mental health in an immigrant elderly population in New York City. Later, while searching for ways to provide mental health care to large populations, he became interested in brief psychotherapy. Following several years of work with Habib Davanloo, he established a STDP training program. During the next 30 years, he worked to develop techniques to further shorten psychotherapy and make it more effective. He first focused on loss and then on attachment. Later he became interested in the use of empathic approaches and body sensations. He found that a combination of empathic interaction, sensory exploration and video self observation could be used to cut through many entangling defenses, as well as to increase the capacity for self care. Dr. Alpert has come to the conclusion that the use of these techniques helps patients to quickly overcome a broad array of problems.

10:30_{AM} -12:00_{PM} CONCURRENT

The Woman Who Choked Herself

Torben Palmer Hansen, Cand. Psych. Aut.



In his case, The Woman Who Choked Herself, Torben Palmer Hansen will illustrate the movement from feeling bad about things to feeling about them. The woman in the case had at the initiation of the treatment been suffering from severe medical symptoms, leaving her miserable, isolated and unable to work. The condition can be understood as stemming from resistance to feelings following a traumatic event 6 years before, when her ex-husband hanged himself. We will investigate how changes in attitude towards her guilt and shame helped resolve severe traumatization that expressed itself through identification and somatization. We will demonstrate how to identify inner hostile attitudes toward feelings and how to alleviate unconscious resistance to the experience of emotions. The self-healing process that follows turning against resistance will be demonstrated by her succession of feelings, now allowed and welcomed, and by her symptom decline, renewed liveliness, peace with herself, and readiness to start new relationships. All these aspect of her Self come to the surface from where they had been waiting to emerge, right beneath her suffering.

LEARNING OBJECTIVES

1. Attendees will learn how to address psychosomatic symptoms which deflect attention away from feelings, and which serve as unconscious identification after trauma.
2. Attendees will learn how to help the sufferer to overcome symptoms and manifest lasting change by understanding and releasing resistance to feelings.

ABOUT THE PRESENTER

Torben Palmer Hansen, cand. psych. aut., has had a private psychotherapy practice in Silkeborg, Denmark since 2002. He graduated from the University of Aarhus, Denmark in 1994. Between 1994 and 1996, he worked at Aarhus University Hospital providing individual and group psychotherapy in the in- and out-patient departments. In 1996 he started his private practice. He treated whiplash-injured patients using the methods of John E. Sarno, MD in an experimental project in Vejle, Denmark from 2000 to 2001. Between 2002 and 2007 he trained in the individual dynamic psychotherapy methods of James Masterson and the couples therapy methods of Harville Hendricks. In 2007 he began his ISTDP core training with Patricia Coughlin, which he completed in 2010. He studied with Jon Frederickson in his master supervision group from 2012 to 2013. Prior to becoming a psychologist, he was a tent and sail-maker and worked in group-theatre.

10:30_{AM} -12:00_{PM} CONCURRENT

Remote Live Supervision: Using videoconference for live, one- way mirror supervision

Tony Rousmaniere, PsyD & Jon Frederickson, MSW



This presentation describes a technological setup, model and video case example for using internet videoconference for live one-way-mirror supervision, called Remote Live Supervision (RLS). RLS improves the availability of distance-based advanced psychotherapy training by permitting a supervisee to receive live one-way-mirror supervision during a real-time psychotherapy session from a supervisor anywhere in the world with a decent internet connection. A video case example of the use of RLS for ISTDP supervision is presented. The benefits and limitations of RLS are discussed.

LEARNING OBJECTIVES

1. Attendees will be able to assess suitability of RLS for patients, supervisees and supervisors.
2. Attendees will be able to articulate issues pertaining to the uses of RLS process, ethics, privacy and security.

ABOUT THE PRESENTERS

Jon Frederickson, MSW, is founder and former Co-Chair of the Intensive Short Term Dynamic Psychotherapy (ISTDP) Training Program at the Washington School of Psychiatry, and he is also Chair of the ISTDP Training Program hosted by the Norwegian ISTDP Society, Drammen, Norway. He is on the faculty of the LaboratoriumPsykoeducaji in Warsaw, Poland. Jon provides ISTDP training in Sweden, Norway, Denmark, Poland, Italy, Lebanon, Australia, and the U.S. He is the author of over twenty published papers and two books, *Co-Creating Change: Effective Dynamic Therapy Techniques* and *Psychodynamic Psychotherapy: Learning to Listen from Multiple Perspectives*. His DVDs, skill building exercises, and books are available at www.istdpinstitute.com. He writes posts on ISTDP at www.facebook.com/DynamicPsychotherapy.

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1:30_{PM} -3:30_{PM} CONCURRENT

How to Resolve Intergenerational Trauma

Kristin A. R. Osborn, MA, LMHC



This 90 -minute presentation provides a road map to resolving intergenerational trauma with a case illustration, entitled, *The Arena Son*. The client is a 43-year-old Asian-American professional with three children with a long history of depression and angry outbursts who sought therapy with Kristin Osborn because his marriage and family life were disintegrating. Over the course of treatment, he comes to see that he is perpetuating a cycle of abuse that began generations ago in his father's family, and that he is now inflicting the same abuse on his 12-year-old son. In this presentation, you will see how Kristin helps him overcome his avoidance of shame, guilt, anger, and closeness so that he can face his true feelings toward his father and liberate himself and his son from the family legacy.

LEARNING OBJECTIVES

1. Attendees will learn how to regulate inhibitory affects when working with trauma.
2. Attendees will learn how to approach an affect exposure using Affect Phobia Therapy.

ABOUT THE PRESENTER

Kristin A. R. Osborn, MA, LMHC is a licensed mental health counselor and was trained and certified by Leigh McCullough, the founder of Affect Phobia Therapy (APT). As the Lead APT Supervisor and Trainer, Kristin Osborn offers core training in London, Stockholm and Boston. She is President of the International Experiential Dynamic Therapy Association and is the Director of the Harvard Medical School Psychotherapy Research Program. She has a faculty appointment at Harvard Medical School at Beth Israel Deaconess Medical Center, is a member of the continuing education faculty at RINO-Noord-Holland, and serves on the advisory board for the Stockholm Academy for Psychotherapy Training. Her next chapter, "Creating Change Through Focusing on Affect: Affect Phobia Therapy," will be released by Guilford Press in 2014.

1:30^{PM} -3:30^{PM} CONCURRENT

Discussion Group
for New EDT Teachers and
Those Who Want to Teach

Tony Rousmaniere, PsyD & Monica Urru, MD



This will be a discussion group open to anyone who self-identifies as a new EDT teacher, or who wants to teach EDT's in the future. The goal of this group is to share ideas, experiences, give one another support, and build camaraderie.

LEARNING OBJECTIVE

Attendees will be able to describe two common emotional reactions to teaching EDTs.

ABOUT THE PRESENTERS

Monica Urru, MD is the President of the Italian Experiential Therapy Association and a psychotherapist in private practice in Rome. She specializes in the treatment of psychotraumatata and related somatizations in adults. She integrates ISTDP with different approaches such as EMDR, Sensorimotor Psychotherapy, and CRM neurofeedback. Dr. Urru collaborates with colleagues around the world teaching and researching to improve the effectiveness of treatment in complex somatic disorders. She is a consultant for the Military Hospital Aeronautic and Aerospace Unit in Rome and Florence. She offers supervision and core training in ISTDP in Europe and the Middle East.

Tony Rousmaniere, PsyD, is the Associate Director of Counseling at the University of Alaska Fairbanks Student Health and Counseling Center, where he directs a doctoral clinical training and research practicum. His specialty is Intensive Short-Term Dynamic Psychotherapy (ISTDP). Tony's research focus is clinical supervision and training.

4:00_{PM} -5:30_{PM}

The Man Who Had No Problem: A case of attachment trauma

Jon Frederickson, MSW



This videotaped case will show how to work with denial, projection, splitting, and projective identification to integrate the patient's personality structure and to develop an internal focus for therapy. Further, the case will show how to deactivate projections of will, ego and superego in order to mobilize the patient's will to the therapeutic task.

LEARNING OBJECTIVES:

1. Attendees will learn how to mirror denial.
2. Attendees will learn how to block projections.
3. Attendees will learn to maintain a focus on a presenting problem.

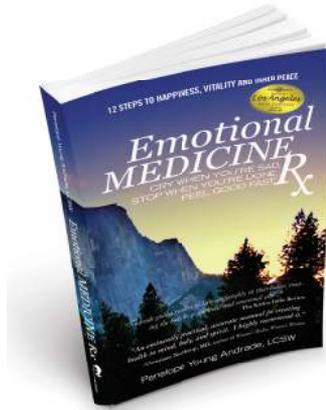
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5:30_{PM} -6:30_{PM}

Closing Panel Discussion Nat Kuhn, moderator





*Emotional Medicine Rx:
Cry When You're Sad, Stop When You're Done, Feel Good Fast*
By Penelope Young Andrade, LCSW

"This book is a treasure...shows readers clearly and precisely how our emotions can be portals to well-being. I highly recommend it."

Diana Fosha, PhD creator of Accelerated Experiential Dynamic Psychotherapy (AEDP) and author of *The Transforming Power of Affect*

"I particularly appreciated the author's personal self-disclosure as she has truly walked her talk. Filled with life enhancing, life saving wisdom—this book is invaluable!"

Susan Warren Warshow, LCSW, BCD creator of Dynamic Emotion Focused Therapy (DEFT) Faculty, CA ISTDP and Certified IEDTA Teacher/Supervisor.

"I strongly recommend this book and I recommend it to some of my clients and always order this book when I'm presenting."

Kristin A. R. Osborn, MA, LMHC Director, Harvard Medical School Psychotherapy Research Program; President and Executive Coordinator of Continuing Education, IEDTA

"This is a book that teaches us how to...follow the compass of our deepest emotions into a fuller and healthier life. You will not regret reading it."

Sue Johnson, PhD creator of Emotionally Focused Couple Therapy (EFT) and author of *Hold me Tight: Seven conversations for a lifetime of love*

Available at the Conference bookstore, Amazon.com and Barnes & Noble (BN.com).

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- second and third years consist of three, 3 day weekend immersions as well as ten 2 hour group supervision sessions per year
- second and third years are geared to-

ward developing response analysis and relevant intervention strategies and tools

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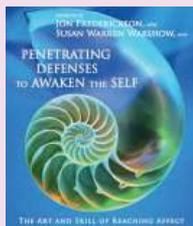
- a community of learners

Esther Rosen-Bernays, PhD, Co-Chair
Joseph Cooper, PhD, Co-Chair
Jon Frederickson, MSW
Leyla Kenny, PhD
Janet R. Merkel, PhD
Nancy Reder, MSW
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Penetrating Defenses to Awaken the Self

with Susan Warren Warshaw, MSW and Jon Frederickson, MSW



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- Accessing and Processing Buried Affects
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"Excellent clinical application and teachings."
"The tapes showed incredible skill and heart."

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Treatment Resistance: the addict who had no problem \$150

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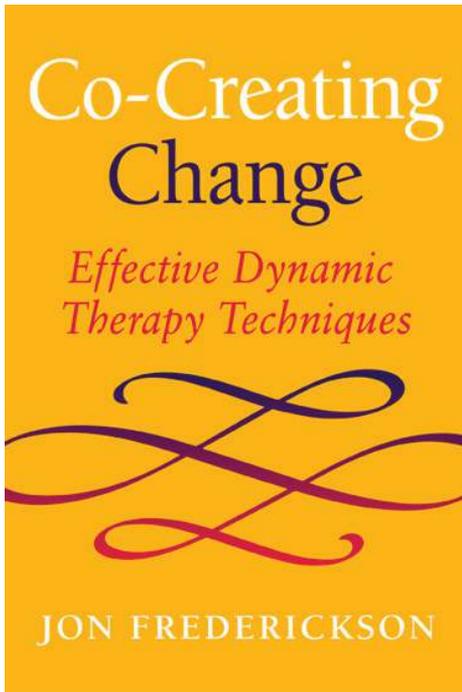
Learn to:

- Mirror denial and splitting
- Block projection and projective identification
- Develop a therapeutic alliance with a patient who denies having a problem

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Reviews

"A brilliant master class." David Malan, DM, FRCPSych.

"A must read for every practitioner of psychotherapy." Jeffrey Magnavita, Ph.D.

"An incredibly useful book." Leslie Greenberg, Ph.D.

"A tour de force." Susan Warshow, MSW

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- Used at over twenty universities around the world
- Translated into two foreign languages
- In its third printing within its first year

Review in Metapsychology Online Reviews

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International Core Group Training ISTDP

The International Core Group Training Program organized by the Netherlands Foundation for ISTDP

This program will be open to Dutch and non-Dutch colleagues, who fulfil the following criteria: registered psychotherapist, psychiatrist, MD, MFT, clinical psychologist; working in the Mental Health Care Sector. Request for dispensation is possible for colleagues, who are currently following a training program for registration as psychotherapist or psychiatrist.
Language : English, Dutch or German

Trainers/Supervisors

- Josette ten Have-de Labije
- Kees Cornelissen

The first three blocks of the first year will be given by Josette ten Have-de Labije and the fourth Block by Kees Cornelissen. During the second and third year two blocks of training/supervision will be given by either Josette ten Have-de Labije, or by Kees Cornelissen. A guest trainer/supervisor may be invited to give one or two blocks of training/supervision.

Number of Core Group Members

Each core group will consist of minimal 4, maximal 12 members.

Time Schedule

The international core group training program will take three years. Four times a year (e.g. in February/March, May, July and November), the core group members and the trainer/supervisor will meet for 2 or 3 consecutive days of 6 - 8 hours (e.g. Friday, Saturday, Sunday). The number of days is dependent on the group size. In-between these four blocks, the core - (sub)group members meet each other once a fortnight for peer-intervision. The core group members can also participate at our Masterclasses and/or workshops

Location

Location of the meetings with the trainers/supervisors is either Berlin or the Netherlands. Regarding the peer interventions : e.g. the English participants / the English subgroup will have peer-intervision in England, the Dutch subgroup in Holland, the Danish subgroup in Denmark.

Core group training program

Year 1 : 4 blocks of 2 or 3 consecutive days

The first year of the core group training program must be considered as a condensed combination of theoretical course, workshop and supervision. For all blocks of training/supervision the participants must bring video material of the sessions with their patients. The supervisors want to see the first five minutes of the session to be supervised plus 15 minutes of the part of the therapy process where the supervisee wants help. These 15 minutes must be subtitled in English or transcribed in english on paper. In that case, photocopies of these 15 minutes are given to the other core group members.

Block 1

The first block of 2 or 3 days will consist of a) an introduction to theory and method of ISTDP, b) introduction on managing the triangles of conflict and persons, c) theory

and practice of restructuring the ego adaptive capacity, d) supervision of the core group members videotaped sessions e) evaluation of Block 1.

NB : Contents of evaluation of a block may have bearing on the contents of the next block

Between block 1 - 2

Core group members are expected to implement what they have learned in their therapies with their patients and to meet each other once a fortnight for peer-intervision..

Block 2

The second block will consist of a) theory of superego pathology, b) workshop on managing the Head on Collision (role playing), c) supervision of the core group members videotaped sessions with their patients, d) evaluation of block 2

Between Block 2 - 3, as above, between block 1-2

Block 3

The third block will consist of a) workshop on managing the triangles of conflict/ persons and the Head on Collision (role playing), b) supervision of the core group members'videotaped sessions with their patients, c) evaluation of Block 3.

Between Block 3 - 4, as above,between block 1-2.

If there is a VKDP Summer School : participation.

Block 4

The fourth block will consist of a) supervision of the core group members videotaped sessions with their patients, b) role playing on the basis of supervision, c) evaluation of block 4, d) evaluation of year 1 (including evaluation of each core group members' achievement) and rubrication of needs re the program of the second year.

Year 2 and Year 3

In the second and third year the emphasis is on the supervision of the core group members' videotaped therapy with their patients and the flow of these therapy processes. Depending on the evaluation of the first year, the supervisions will be supplemented by theoretical courses, workshops and audiovisual presentations

Cost

600- 700 euro per block per group member

Accelerated Empathic Therapy (Advanced STDP) Training

New core training group Opening October 2014 in
New York City.

Those interested should contact Michael Alpert.

Michael C Alpert, MD, MPH
880 Fifth Avenue, Suite 1A
New York, New York 10021
212 213 6156
malpert@stdp.org

Take care of your body while you expand your mind at the IEDTA Conference.

Dining options are available at the hotel, but for those wanting a specialty market option there are markets nearby that offer organic and gluten-free (etc.) food options.

Market options within
walking distance:

Trader Joe's
6831 Wisconsin Ave
Bethesda, MD 20815
(301) 907-0982
www.traderjoes.com

Market options that require driving:

Bethesda Co-op
15 minutes away by car
<http://www.bethesdacoop.org>

Whole Foods Market
(Six minutes away by car)
5269 River Rd.
Bethesda, MD

Exercise options included facilities at the hotel and at nearby studios.

A nearby yoga studio offers early morning classes, so you can get a stretch into your day before sitting during conference presentations.

Exercise within the hotel:

The Hyatt Regency Bethesda gym has a fitness center with yoga mats, cardio and free weights, and it is open 24-7. There is also an indoor pool and whirlpool.

Exercise with walking distance:

Down Dog Yoga
4733 Elm Street, 4th Floor
Bethesda, MD 20817
301-654-9644

Schedule:

<https://clients.mindbodyonline.com/ASP/home.asp?studioid=-38011>



Affect Phobia Therapy (APT) **Core Training**

APT Core Training is a three-year program offered in North America and Europe. Upon completion of APT Core Training, participants are eligible to become Certified IEDTA Therapists and Certified APT Therapists. Both North American and European programs offer continuing education units for therapists licensed in the UK and USA.

Kristin Osborn is the lead teacher for APT Core Training. She offers experiential, hands-on learning that includes the use of AV segments of psychotherapy sessions, research, therapy demonstrations, and interactive exercises. Each block of training is made up of 50% theoretical and clinical instruction and 50% supervision.

Trainees learn how to assess and treat an Affect Phobia, how to develop an expertise when working with Malan's Two Triangles, and how to time their therapeutic interventions. A thorough knowledge in affect theory is essential.

Trainees are taught to differentiate between adaptive and maladaptive feelings, create a correct core conflict formulation, regulate anxiety, and confront defences, to enable their patients to access affect and create change. As foundational objectives are mastered, more advanced elements of the model are introduced.

Research is an integral part of this program. Students are trained to use the Achievement of Therapeutic Objectives Scale (ATOS) to code psychotherapy sessions. Trainees are required to record and present their own work for supervision and have the option to record their own supervision hours.



Applicants are required to provide a curriculum vitae (résumé) detailing their work as a therapist, and a statement of interest demonstrating motivation for working with an Experiential-Dynamic approach.

The North American APT Core Training takes place in Concord, Massachusetts. The European APT Core Training takes place in London, England.

For information, please go to affectphobiatherapy.com or send an email to affectphobiatherapy@gmail.com.

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The logo for the Washington School of Psychiatry, consisting of the letters 'WSP' in a stylized, blue, cursive font.

