











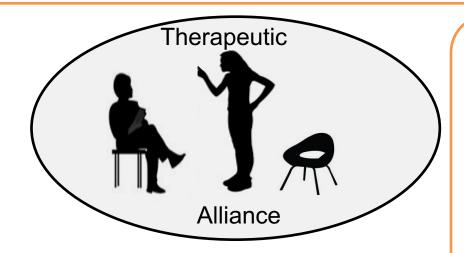
The mentalizing background of the rupture-resolution episodes during adolescents psychotherapy: a little process-research contribution for clinicians in trouble



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Empirical and theoretical background

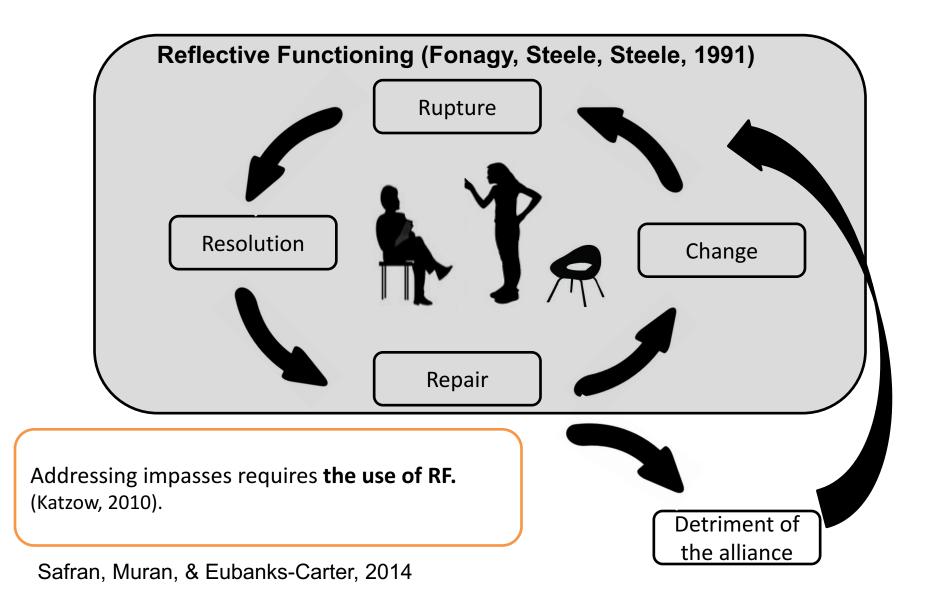
Weaker and more unstable compared to adults (Horvath, Del Re, Flückiger & Simons, 2011) Therapeutic alliance has to be **permanently addressed** due to the typical relationship difficulties on interventions with adolescents (Shirk, Karver, & Brown, 2011).



Therapeutic alliance in psychotherapy with adolescent **could be a change** factor even more relevant than with adults (Kazdin, 1990; Bhola, & Kapur, 2013)

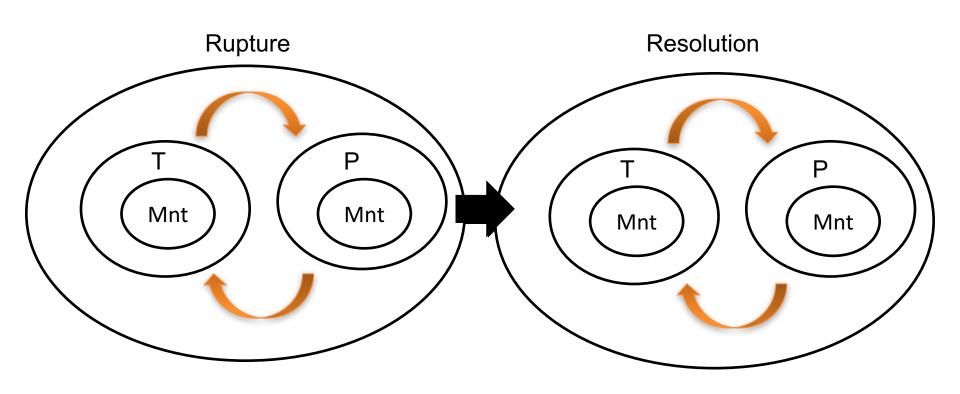
Therapeutic alliance with several members (Shirk & Karver, 2011)

Empirical and theoretical background



Research questions

What types of mentalizing interactive patterns between therapist and patient emerge in sequences of rupture-resolution in psychotherapy with adolescents.



Longitudinal exploratory study of psychotherapy process

Participants

Inclusion criteria

- -Adolescents between 15 and 19 years old.
- Advice of psychotherapy
- Therapists with at least 3 years of experience

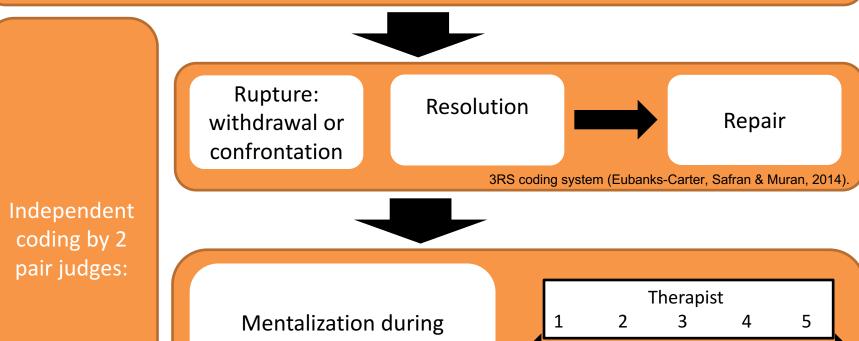
Exclusion criteria

- Without an adult responsible for the patient

Method: Longitudinal exploratory study of psychotherapy process

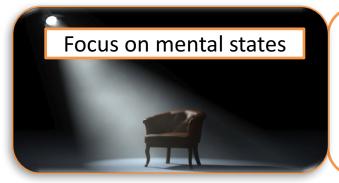
Therapy	Sex P -T	Age	Termination	Sessions	R-R sequences	Therapeutic aproach
A4	F - F	14	Discharge	10	12	TAU
A5	F - F	15	Dropout	15	13	CBT
A8	F - F	17	Dropout	8	10	CBT
A9	M - M	18	Discharge	9	9	Integrative
R2	F - M	19	Discharge	54	17	Psychodynamic
TOTAL				96	61	

Audio/video recording and transcription



Mentalization during therapeutic interaction (6 dimensions)

1	2	3	4	5			
1	2	3	4	5			
Patient							



Capacity to establish and maintain a consistent focus on mental states (cognitions and affects) linked to descriptions of observable behavior and events

Therapist is excessively focused on observable and external aspects such as behavior or concrete events, so that mental states are not considered. As a result, an important opportunity to enhance mental states for the patient is lost.

4 5

1

Therapist can clearly be described as actively enhancing the usage of mental states in the patient by elaborating questions and performing interventions that demand reflecting about cognitions and affects on self and others. Events and behavior can be integrated as an important complement that enriches reflection. As a result, the usage of mental states could be clearly and deeply enhanced.

Focus on mental states



Capacity to establish and maintain a consistent focus on mental states (cognitions and affects) linked to descriptions of observable behavior and

Explicit effort to mark out the separateness of minds in a dialogical stance which reflects that one can't be sure of the experience of others

Patients seems to know for sure what is going on in others minds and "how things really are", experiencing its own mental states as the only truth. It is possible to appreciate an increase of the arousal, manifested to as overflowing affection and non-integrated, inaccurate or even bizarre speech.

3

Impossibility to get to know for sure how others (therapist included) experience reality is tolerated and integrated in the discourse as a normal issue. There is an explicit and complete recognition that experience belongs only to the patient and it does not represent "how things really are". Speech can be described by openness and curiosity on other mental states and a general "perhaps-quality".

1



Capacity to establish and maintain a consistent focus on mental states (cognitions and affects) linked to descriptions of observable behavior and

Explicit effort to mark out the separateness of minds in a dialogical stance which reflects that

Ability to establish a collaborative and emotionally-attuned interaction in which, regardless of the role, one can work together to build a coherent shared narrative

ICC:,80

ICC:,70



Capacity to establish and maintain a consistent focus on mental states (cognitions and affects) linked to descriptions of observable behavior and

Explicit effort to mark out the separateness of minds in a dialogical stance which reflects that

Ability to establish a collaborative and amotionally attuned interaction in which Capacity to take into account that there is not only one version of a particular mental state. This dynamic aspect can be discursively identified by: a) the consideration of different points of view, b) the capacity to recognize, tolerate and integrate contradictions within mental states (including the existence of blending emotions) and; c) the recognition of their changing nature across time.

ICC:,80

ICC:,70

ICC:,79



Capacity to establish and maintain a consistent focus on mental states (cognitions and affects) linked to descriptions of observable behavior and

Explicit effort to mark out the separateness of minds in a dialogical stance which reflects that

Ability to establish a collaborative and constitution in which Capacity to take into account that there is not only one version of a particular mental state. This dynamic aspect can be discursively identified by: a) the consideration of

Capacity to consider in a coherent and plausible manner the multiple ways in which MS can influence some other mental states, relational dynamics, psychological development, and behavior; or vice-versa.

ICC:,80

ICC:,70

ICC:,79

ICC:,74



Capacity to establish and maintain a consistent focus on mental states (cognitions and affects) linked to descriptions of observable behavior and

Explicit effort to mark out the separateness of minds in a dialogical stance which reflects that

Ability to establish a collaborative and constitutionally attuned interaction in which Capacity to take into account that there is not only one version of a particular mental state. This dynamic aspect can be discursively identified by: a) the consideration of

Capacity to consider in a coherent and plausible

The capacity for being focused in the present moment can be considered as a basic precondition for Reflective Functioning in terms of its intimate relation to arousal suppression, an index of self-regulation. ICC:,80

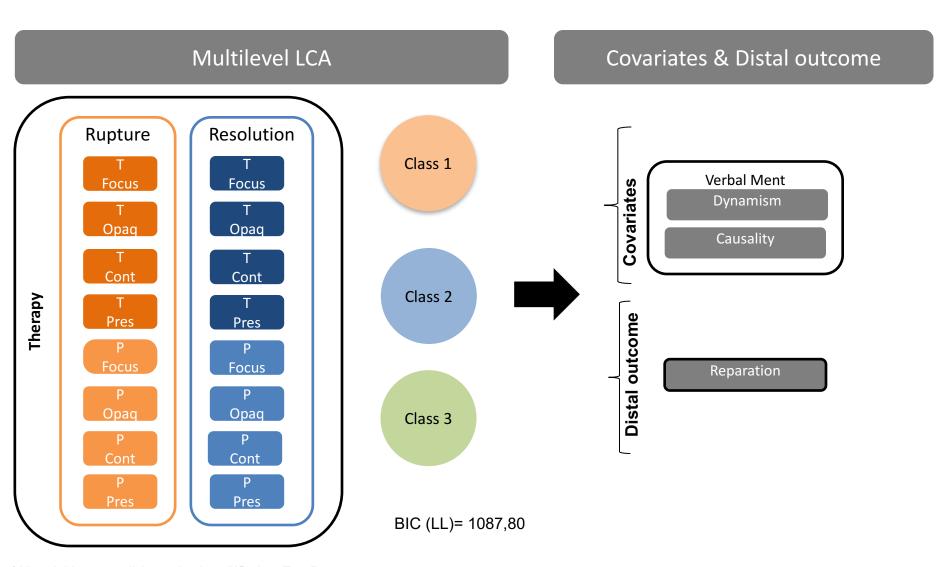
ICC:,70

ICC:,79

ICC:,74

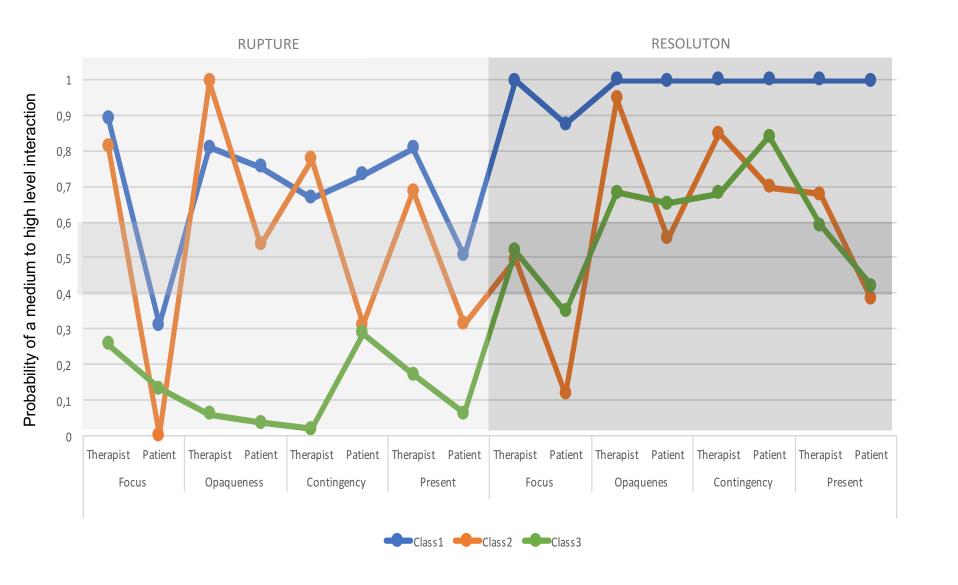
ICC:,71

Analysis



^{*}All variables were dichotomized as: "0" when T or P score was 1 or 2 and "1" when T or P score was 3,4 or 5"

Results



Class 1: Parent-teen argument **Resolution:** The chance of Rupture: solving this "Causality" and rupture is the "dynamism" highest, with a are used more chance of 98% frequently **RUPTURE RESOLUTION** Probability of a medium to high level interaction 0,9 0,8 0,7 0,6 0,5 0,4 0,3 0,2 0,1 Focus Contingency Contingency Opaqueness Present Focus **Opaquenes** Present Rupture Resolution Class 1 Therapist Class 1 Patient **Resolution:** In both T and P a Rupture: high level of **Rupture:** "Causality" and "causality" and ¿Self serving P's "dynamism" "dynamism" is mentalization? are used with a observed higher leve

Class 2: (not) Recognition of the adolescent's **Resolution:** immediate experience T increasing in "contingency" is correlated to P increasing in "contingency" and "present" **RUPTURE RESOLUTION** Probability of a medium to high level interaction 0,9 0,8 0,7 0,6 0,5 0,4 0,3 0,2 0,1 0 Contingency Contingency **Focus** Focus Opaqueness Present Opaquenes Present Resolution Rupture Therapist • **Patient Resolution:** The chance of solving this rupture: 63%

Class 3: Control-Submission Resolution This class is less likely to be repaired **RUPTURE RESOLUTION** 1 Probability of a medium to high level interaction 0,9 0,8 0,7 0,6 0,5 0,4 0,3 0,2 0,1 Contingency Opaqueness Opaquenes Contingency Focus Present **Focus** Present Rupture Resolution Therapist Patient Rupture: The chance of Rupture: confrontation is Dynamism is the highest used with a low (33,3%) level

Contribution to the gap in psychotherapy research with adolescents (Kazdin, 1990; Lambert, 2013)

Pioneer study on RF/Mentalization in process of psychotherapy with adolescents

Integration of knowledge in psychotherapy: rupture-resolution model and RF/Mentalization (Lingiardi & Colli, 2015)

Assesment of a valuable hypotesis for psychotherapy with adolescents (Martínez et al, 2013)