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Compassion in the treatment of complex trauma Psychodynamic Imaginative Trauma Therapy (PITT)

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UNE APPROCHE INTÉGRATIVE BASÉE SUR LA THÉORIE
DES ÉTATS DU MOI ET DES TECHNIQUES HYPNO-IMAGINATIVES



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Psychodynamic Imaginative Trauma Therapy - PITT



Prof. Luise Reddemann

Pioneer in psychotraumatology in Germany, Austria and Switzerland.

Developed PITT since the 1980's.

Therapy for complex PTSD

Complex traumatization

=

Complex reactions

Impacts on many levels

=

Complex treatment

Individualized therapy

Integrative therapy

Long preparation before trauma confrontation (if needed)

PITT – Basic principles and techniques

- Respect
- Compassion
- Dignity
- The client has his/her own resources
- Autonomy
- Strong emphasis on stabilization
- Exercises using imagination
- Soothing of younger hurt ego states
- Working with introjects
- Protected trauma confrontation

→ Self-compassion

Principles

- For patients who require long-term preparation to face the terrific situations they survived
- Confrontation does not seem possible without some sort of internal counterweight
- A **compassionate resonance** of the therapist is needed
- **Discovering and developing self-compassion for the patient is a key precondition of healing.**

Basis of communicative medicine

- “The basis of a communicative medicine is **compassion**.”
- Without compassion and compassionate communication, we may lead to an efficiency-oriented health industry and cutting-edge medical research, but not a **culture of healing**.”
- „Compassionate communication is not simply a means to an end; it is the end.“
- „the healing power of the word comes from our **compassion with others**”. (Matthias Gottschlich, 2007)

Compassion = empathy + wish to heal

- Compassion is more than empathy, which can be viewed as a neutral attitude.
- Empathy is a precondition for compassion
- Compassion is meant to achieve a healing effect and be revealed in the way the therapist treats patients and the way patients treat themselves.

Compassion = focus on suffering AND resources

- **Compassion means to wish and to act in a way that suffering can be healed or at least calmed with a clear focus on suffering but also on resources**
- **Focusing solely on suffering** cannot decrease the suffering over the long term, and much less cure.

**Therapists treat PEOPLE, not traumas
and definitely not diagnoses!**

- Compassion produces a focus on **dignity**:
- Only when patients experience respect for their dignity can they actually recover.
- Compassion can furthermore be followed by sharing joy, i.e., when the therapist openly shows that he or she is happy for the patient's progress.

The art of survival

- Everything that gives the patient peace, joy, and moments of freedom, everything the patient has succeeded in accomplishing is important.
- We call this “the question of the art of survival” (Reddemann, 2012)

- **FIRST: acknowledging the patient's pain and suffering.**
- **SECOND: "the question of the art of survival"**
- **Such a connection creates compassion** (Reddemann, 2016), allowing the therapist to express equal interest in the one or the other, like a pendulum swinging back and forth.

Stabilization

- Avoid any type of stress induced by the therapy.
- Taking into account what we know today about traumatic stress (psycho-education)
- At least at the beginning of therapy – the patient can hardly influence the phenomenon.

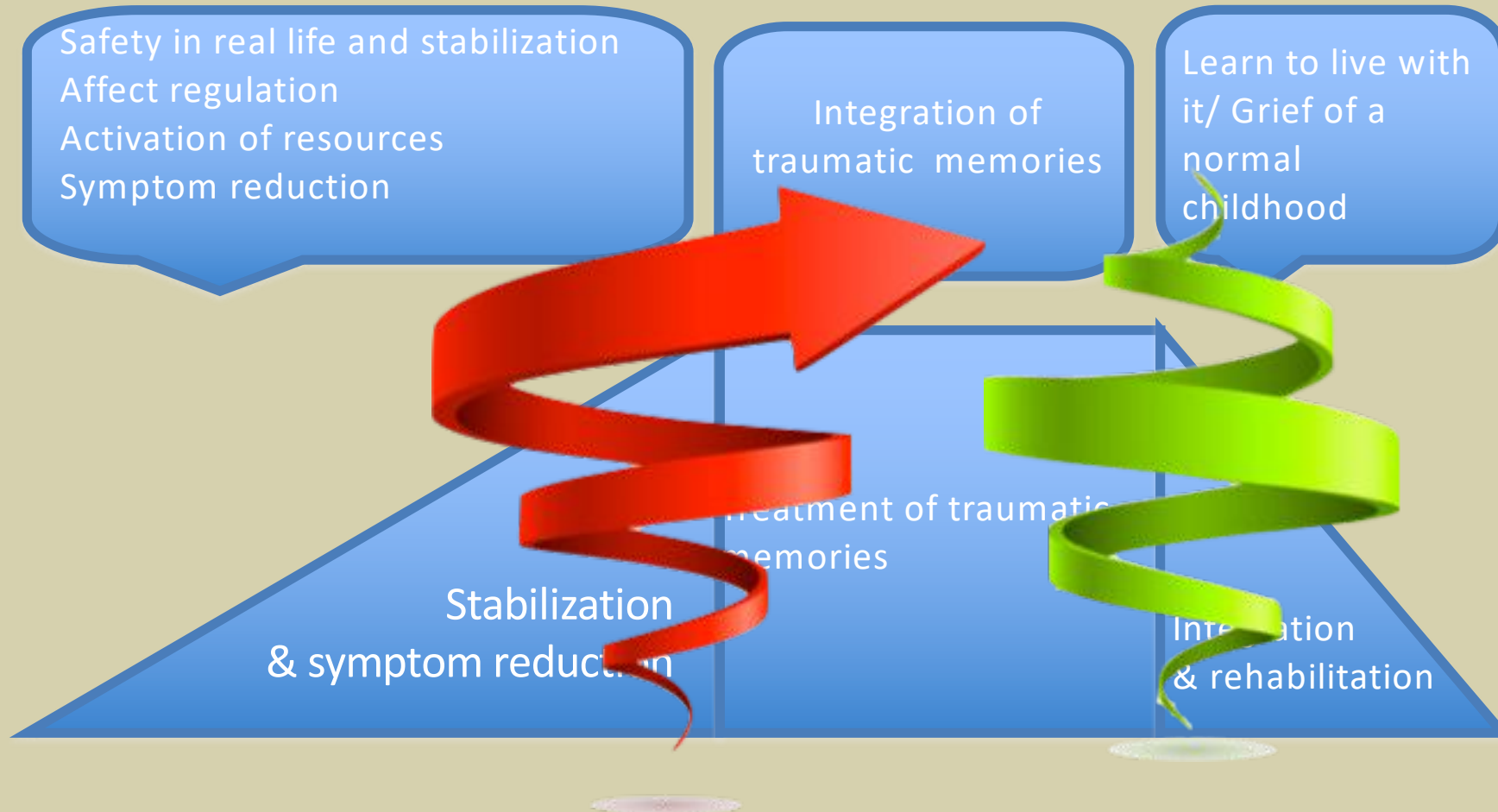
Stabilization II

- We use the term stabilization from a **psychodynamic perspective** to describe the **strengthening of ego functions**.
- More recent psychoanalytic approaches such as relational psychoanalysis and the intersubjective approach have enriched our work considerably.

ISTSS recommendation

- The International Society for Traumatic Stress Studies (ISTSS) continues to recommend the three phase model.

Treatment of trauma in 3 phases



Help gaining stability: what does that mean?

Compassion should be the main leading idea and attitude, that means:

- Being a patient listener
- Accepting what ever comes from the patient
- Helping to reduce stress
- Helping the patient to develop self-compassion
- Providing sufficient information at all times

Help gaining stability: what does that mean?

- to appreciate the patients' need for control as much as their other coping strategies.
- Helping the patient to experience that her feelings are being acknowledged and understood
- **Avoid** triggering traumatic anxiety in traumatized patients.

- To be natural, friendly
- To understand that patients lack the ability to calm themselves or create an inner calming environment for themselves
- Therefore it is important for therapists to have a calming effect and to encourage self-calming as a result of friendliness and compassion.

Our cornerstone

- **Humility**
- Patients always know better than we do what will help them further.
- **Forster self-healing powers** within the patients.
Compassion leads to encourage patients to listen to the voice of their **inner wisdom**,

- With a compassionate trusting therapist, patients can develop the ability to soothe themselves and accept comfort;
- When therapists are – from the very start - on the side of their patients on the difficult search for the patients' own resources, they are **emboldened**.

We aim at encouraging patients to:

- Acknowledge their skills and strengths.
- (Re-)discover and foster the capacity for compassion and **joy**
- **As the preconditions for confrontation to the trauma**

- Concepts of **transference** and **countertransference** as well as the unconscious, provides a helpful intellectual foundation
- Classic psychoanalytic interventions must be modified
- The therapeutic relationship and the therapeutic alliance form the more important facets, modern therapy focuses more on the possibility of recognizing selfsoothing cultivating tools

Therapists should:

- Foster trust
- Create an atmosphere that ensures the patient's security and stability
- That makes it possible for patients to experience moments of safety and acceptance
- **Today, it is accepted common knowledge that psychotherapy also comprises creating positive bonding experiences.**

- **Ego psychology**

→ the stabilization phase serves to strengthen the ego.

- **Psychology of object relations**

→ the stabilization phase serves to build safe and sound inner object representations.

Working with hurt ego states

- Contributes to self-regulation and self compassion
- Strengthens the working relationship in therapy
- Limit regression.

Working with ego states

- **Hurt inner child** : calm the related symptoms
- **Malevolent introject** : bring them to collaborate in a constructive way

Working with a hurt inner ego state: procedure

- 1. Making a distance between the adult self and the younger ego state**
- 2. Test the contact with the younger hurt ego state**
- 3. The adult or/and the therapist give recognition to the suffering of the younger hurt ego state**
- 4. Take the younger hurt ego state out of the traumatic situation into an imaginary safe place.**
- 5. Comfort and consollate the hurt child**
- 6. Transference in the daily life of the adult.**