



Dynamic Interpersonal Therapy (DIT) for Depression:

**What skills can service users expect
their therapists to have?**

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What is DIT?

DIT is a time-limited (16 sessions) psychodynamic therapy that has been specifically developed for the treatment of depression.

One of the main ideas in psychodynamic therapy is that when something is very painful we can find ourselves trying to ignore it (it's a bit like the saying "out of sight, out of mind"). Most of the time we know when we're doing this, but sometimes we can bury something so successfully that we lose sight of it completely. This is why difficult experiences in the past can continue to affect the way we feel and behave in the present. DIT provides people with a safe place to talk openly about how they feel and to understand what might have contributed to becoming depressed.

An example shows how this might work. Someone who was repeatedly rejected by their parents may stop themselves thinking about how painful this is. As an adult they might become depressed, withdraw from relationships, feeling that it is safer to be alone and not having to depend on anyone. Although not getting close to anyone helps them to feel safer, they might also feel lonely and get depressed as a result.

How would a DIT therapist help such a person? By helping them to talk freely about themselves and their relationships it might become clear that whenever someone tries to get to know them, they fear the worst and push them away, just to make sure that no-one ever gets close enough to hurt or disappoint them again. In the course of day-to-day life people don't necessarily notice how they are behaving or responding to others because this becomes second nature - 'the way things are'. By drawing their attention to this *pattern* in their relationships, therapy would help them to understand themselves better and change the way they respond. This pattern, and how it can help them to understand their depression, then becomes the focus of the therapy.

What does therapy involve?

Everyone's therapy will be a bit different, but we have tried to describe some of the important things that a good therapist will do and what they will help you focus on.

Starting off

All therapists should be able to help you feel respected and comfortable. Many people find it difficult to talk about their problems with someone they do not know, and it is important that your therapist can make you feel that they are to be trusted, and can help you manage if you talk about things which upset you or about which you feel embarrassed.

Talking openly about yourself for the first time to a new person can feel difficult and you may be worried about what your therapist thinks about you. Your therapist will be interested in how you experience them and will help you

to make sense of any worries you may have about starting therapy. They should give you the feeling that they know that starting therapy can be difficult and that they understand what life is like for you.

Getting a picture of what you need (“Assessment”)

Your therapist will need to get as good a picture as they can of what you are finding difficult in your life and how this is affecting you and people close to you. They will ask some questions, but they should also make it clear that you only need to give as much information as you feel comfortable with. Many people find that as therapy gets going they are able to talk more openly, and in the early stages you shouldn't find yourself under pressure to say more than you want.

Although your therapist will need to gather some basic information about you and your life, and your current and past relationships in particular, some of the time they will wait for you to talk. This is because they are interested in hearing about what is on your mind rather than asking you lots of questions. Sometimes your therapist may remain silent, waiting for you to speak. This may well feel a bit uncomfortable – for example, you may feel unsure what to say. However if this gets too uncomfortable, your therapist will help you talk.

At the start of therapy your therapist will ask you to complete some questionnaires. These will give them a better idea of the sorts of problems you have (by asking about the sort of difficulties you have), as well as how badly these affect you (by asking how much each problem affects you). Your therapist will discuss the results of these questionnaires with you. They will ask you to complete the questionnaires again every session because this helps you and your therapist see what progress you are making. This is very useful, because not everyone makes progress at the same rate. If the questionnaires show that you are not benefiting from therapy it gives you and your therapist a chance to think about why this might be.

Explaining how DIT might work for you

Early on your therapist should explain how DIT works, and help you to think through how the approach makes sense of what you're finding difficult in your life. The experience of the assessment should also give you an idea of how the therapy works, what is expected of you and what you can expect of the therapist. The main thing is that the therapist needs to help you see the ways in which ideas from DIT could be relevant to you and what you want help with. That does not mean you need to be 100% convinced at this stage – it's more that the idea of DIT needs to make some sense to you if you are going to get the best out of it.

Sharing ideas about what you want to achieve

When your therapist has enough information they will begin thinking with you about what it would be most helpful for you to focus on over the 16 sessions. This is also an opportunity to agree with your therapist about what you want out of the therapy. In DIT the therapist will typically aim to help you to work on a recurrent pattern in your relationships.

Length and frequency of treatment

Your therapist will talk with you about the fixed number of sessions you can expect to have. This will typically be sixteen sessions. The therapy usually takes place once a week. Your therapist will discuss with you any planned breaks and what happens if you cancel sessions.

What can you expect of your therapist

Your therapist is responsible for ensuring that your meetings take place at a regular time, in a setting where you can be sure of confidentiality. Wherever possible they should let you know if they expect to be away or need to change the time of your therapy. Sometimes people find breaks from the therapy hard to manage. When this happens your therapist should discuss this with you and help you to understand why this may feel particularly difficult .

Ending the therapy

Many patients find that ending the therapy is difficult. This is because the relationship that develops between you and your therapist can become quite important. Ending therapy can feel like a big loss and you are likely to experience a range of feelings about it. Your therapist will know and understand this and you should expect them to help you to explore your feelings, including any worries you might have about how you will cope in the future. They should help you think about how you would manage if things became difficult again. After all, the aim of DIT isn't to remove your problems – everyone has problems that they need to deal with. The hope is that you will have learned how to manage better, and so avoid problems becoming major difficulties again.

Some important features of psychodynamic therapy

1) One important feature of DIT is that it uses what happens in the relationship between therapist and patient to help think about the problems in your life. An example would help. Remember the person we described at the start of this leaflet, who worries about getting rejected by people. As they settle into therapy they might start to worry that the therapist will reject them too – for example, they could become convinced that the therapist wasn't really interested in them. Because this would provide a clear illustration of where things go wrong in the patient's relationships, the therapist might comment on their concern. By discussing the similarity between the worries they have about the therapist and the worries they have in general the patient

would start to get a better picture of what happens to them in relationships. In practice this means that the therapist will often draw your attention to what you are currently feeling in the session. The idea is that by exploring the relationship between you and your therapist, you can get a better understanding of what is troubling you.

2) As discussed earlier, you may find that your therapist is a bit more 'silent' than you might be used to. For example, at the beginning of each session your therapist will greet you, but beyond this may not ask questions. Instead they will wait to hear from you about what is on your mind. This is not because they are being 'unfriendly', but because they want you to have some space to work out what is on your mind. This can take a while to get used to, but your therapist will know how hard it can be and should help if you find this particularly difficult.

3) Another feature of DIT is that the therapist won't always answer your questions directly. Sometimes they may be interested in what lies behind your questions. For example, someone who is very worried about starting therapy may not feel able to say this straightforwardly. Instead they may ask lots and lots of questions about what therapy involves. Rather than answering all of these directly, the therapist may notice that behind the questions is a worry about beginning therapy. Helping the patient talk about this, rather than answering all the questions, is probably a more helpful way forward.