

Brief Dynamic Interpersonal Therapy for Depression (DIT)

This section describes the knowledge and skills required to carry out Dynamic Interpersonal Therapy.

It is not a 'stand-alone' description of technique, and should be read as part of the psychoanalytic/ psychodynamic competence framework.

Effective delivery of this approach depends on the integration of this competence list with the knowledge and skills set out in the other domains of the psychoanalytic/ psychodynamic competence framework.

Source: Lemma, A., Target, M., Fonagy, P. (in press) Brief Dynamic Interpersonal Therapy: A Clinician's Guide. Oxford: OUP

Knowledge

General

An ability to draw on knowledge of the psychological and interpersonal difficulties experienced by clients with a diagnosis of depression

Knowledge of the developmental model underpinning the understanding of depression

An ability to draw on knowledge that DIT is grounded in attachment theory (including models of mentalisation), object relations theory and interpersonal psychoanalysis

An ability to draw on knowledge of attachment-based and object relational models of depression

Knowledge of the aims and focus of treatment

An ability to draw on knowledge that DIT aims to help the client:

understand the connection between their presenting symptoms and significant difficulties in their relationships, by working with them to identify a core, unconscious, repetitive pattern of relating (and making this the focus of the therapy)

develop a capacity to mentalise

An ability to draw on knowledge that the primary aim of DIT is to enhance the client's interpersonal functioning and their capacity to think about and relate, changes in their mood to mental states (conscious and non-conscious)

An ability to draw on knowledge that DIT systematically focuses on:

a circumscribed interpersonal and affective focus (IPAF) that is linked with the onset and/or maintenance of symptoms

the client's state of mind, rather than their behaviour)

the client's experience in the here-and-now of the session or recent past, rather than the interpretation of distal events

Knowledge of the treatment strategy

An ability to draw on knowledge that the three main phases of the treatment have distinct aims:
an <i>initial</i> phase that aims to assess the quality and patterning of relationships, past and present, as the basis for identifying a dominant, recurring, unconscious interpersonal and affective pattern (IPAF) that will become the focus of the therapy
a <i>middle</i> phase that focuses on helping the client to elaborate and work on the IPAF
an <i>ending</i> phase that focuses on helping the client to reflect on the affective experience of ending and so prepare for ending and plan for the future
An ability to draw on knowledge that DIT makes active use of the client-therapist relationship to explore the IPAF
An ability to draw on knowledge that DIT makes use of expressive, supportive and directive techniques to support the aims of the treatment

Interventions

Therapeutic stance

An ability to establish and maintain an involved, empathic relationship with the client:
An ability to establish and sustain an active, collaborative stance
An ability to adopt a 'not knowing', curious stance when exploring the client's mental states, to communicate a genuine attempt to find out about their mental experience

Ability to assess the severity of the client's depression

An ability to assess the client's overall functioning to arrive at a diagnosis of depression
An ability to assess level of risk:
An ability to involve relevant professional networks to support the therapy where appropriate

Ability to assess the quality and patterning of the client's current and past interpersonal functioning and formulate a focus

An ability to generate, clarify and elaborate narratives about relationships
An ability to draw the client's attention to repetitive patterns in their relationships
An ability to identify one dominant repetitive interpersonal pattern that is connected to the onset/maintenance of the depression and that will become the focus of the therapy (the Interpersonal Affective Focus –IPAF)
An ability actively to reflect on, and make use of, the transference relationship, and the therapist's countertransference, to arrive at the formulation of the IPAF

Ability to engage the client in DIT

An ability to communicate with the client in a direct, transparent manner that invites them to provide feedback on the formulation and process of therapy:	
	an ability to respond to requests by the client for clarification in a direct and clear manner that models a self-reflective stance that is open to correction
An ability to offer a “trial interpretation” in order to:	
	make use of client’s response to the interpretation in order to elaborate the evolving formulation
	assess the client’s capacity to make use of such interventions
An ability to engage the client in formulating the focus of the work by:	
	tentatively sharing an understanding of how their presenting symptoms/problems may be connected with unconscious feelings and interpersonal conflicts.
	actively soliciting the client’s response to the formulation and engaging reflection on their emotional reaction to it
	modifying the formulation in line with new understanding developed with the client.
An ability to introduce the client to the rationale and aims of DIT through the use of ‘live’ material in the session (e.g. by drawing the client’s attention to recurring interpersonal dynamics as they describe themselves and their relationships)	
	an ability to personalise the introduction of the model by linking it to the client’s own history, current symptoms and interpersonal experiences

Ability to help the client identify their aims for the therapy

An ability to identify and agree with the client therapeutic goals that are meaningfully connected with the agreed IPAF	
An ability to help the client to be realistic about what can be achieved within a brief time frame:	
	an ability to respond to any feelings the client has about areas it may not be possible to work on

Ability to work to the agreed focus

An ability to elicit interpersonal narratives and to track the agreed IPAF as it emerges in the narrative(s) as the basis for any interpretation	
An ability to maintain a focus on on <i>current</i> significant relationships that demonstrate the activation of the IPAF and its relationship to depression:	
	an ability to take a stance of curiosity about interpersonal scenarios (e.g. asking questions and clarifications as necessary, to bring into focus an interpersonal exchange so as to highlight a salient repetitive pattern).

An ability to maintain a focus on the agreed IPAF by::	
	identifying areas of difficulty in the client’s relationships that relate to the IPAF
	understanding the client’s characteristic ways of managing areas of difficulty in their relationships and to point out the ‘cost’ of these strategies
	inviting reflection on the unconscious assumptions behind feelings and thoughts when in a relationship in order to highlight the way these assumptions perpetuate or exacerbate interpersonal difficulties
	drawing the client’s attention to their affective state in the session
	attending to the therapeutic relationship in order to draw the client’s attention to

moments when the relationship between therapist and client reflects the activation of the agreed IPAF
helping the client practise the skill of recognising internal states (feelings and thoughts) as they relate to the IPAF

Ability to focus the content of interventions

An ability to focus on the client's mind, not on their behaviour:
an ability to follow shifts and changes in the client's understanding of their own and others' thoughts and feelings
An ability to focus on the client's affects (primarily in relation to the here-and-now of the session and their current circumstances)
An ability to focus on current relationships, including the relationship with the therapist

Ability to work collaboratively with the client towards an understanding of the transference experience

An ability to help the client to be curious about what is happening in the therapeutic relationship
An ability to identify and respond to enactments/ruptures in the therapeutic relationship:
an ability to respond non-defensively to the client's experience of the therapist
an ability to use clarification and elaboration to elicit a detailed picture of what has transpired between client and therapist
an ability to monitor countertransference and to work to regain a reflective stance after an enactment
an ability to acknowledge and explore openly with the client any enactments on the part of the therapist:
an ability to communicate the therapist's perspective about the impasse or rupture
An ability to monitor and engage with the client's response to an interpretation

Ability to support the client's mentalising stance in relation to the IPAF

An ability to use clarification and elaboration to gather a detailed picture of the feelings associated with a specific behavioural sequence related to the IPAF
An ability to help the client make connections between actions and feelings
An ability to help the client develop curiosity about their motivations
An ability for the therapist to share their perspective so as to help the client to consider an alternative experience of the same event
An ability to help the client shift the focus from non-mentalising interaction with the therapist towards an exploration of current feelings and thoughts (as manifested in the client-therapist interaction, or in recent experiences outside the therapy room)

Ability to encourage interpersonal change

An ability to balance helping the client to explore the IPAF and supporting them to make use of their understanding of the IPAF to change current relationship patterns that are linked with the onset and /or maintenance of depression

An ability to monitor and respond to the client's experience of the therapist's more active stance

Ability to integrate routine outcome monitoring into the therapeutic process

An ability to engage the client in reflecting on their responses to the questionnaires:

an ability to respond to the client's use of the questionnaires in the context of the evolving transference relationship

An ability to use and interpret weekly questionnaire data in order to track progress, and to guide any changes to the intervention indicated by this data (e.g. in response to evidence of a deterioration in levels of depression)

Ability to explore the unconscious and affective experience of ending

An ability to assess the client's sensitivity to separation so as to ensure that the meaning of the ending is worked on from the outset

An ability systematically to draw attention to, and explore, the client's feelings, unconscious fantasies and anxieties about the ending of therapy.

An ability to recognise and respond to indications of regression near the end of treatment (e.g. a symptomatic deterioration) by linking this with the feelings and fantasies associated with endings.

An ability to help the client to review the therapy as a whole (e.g. whether they have achieved their aims):

an ability to help the client express disappointment where appropriate

an ability to respond non-defensively to the client's feedback about the therapy

An ability to compose a 'goodbye' letter which reviews the original agreed formulation and progress made in working on the issues identified at the start of therapy:

an ability to engage the client in responding to and refining the letter