Research on Transference

Fifty years of psychoanalytic research on transference

Horst Kächele, Dan Pokorny (Ulm) & Cornelia Albani (Leipzig)

Ways of Measuring

- 1. Systematic clinical formulations
- 2. Rating methods on quantity of transference
- 3. Q-Sorts, Questionnaires & the Kelly-Grid-Technique
- 4. Methods to Identify Relationship Patterns

1. Systematic clinical formulations

- Menninger Project: Team discussion at the end of treatment [Wallerstein, 1956]
- Menninger Project:
 Systematic analysis of childhood memories
 [Mayman & Faris, 1960]
- Chicago consensus project
 [Seitz, 1966]

2a. Rating methods on quantity of transference

- Rating instruments to catch therapist's technique, transference & countertransference and patient's behavior and feeling
- Description and prediction of the therapeutic process
 [Bellak, 1956]
- Therapeutic interaction [Cutler, 1958]
- Therapeutic technique, transference and countertransference [Strupp, Ewing, Chassan, 1966]

2b. Rating methods on quantity of transference

- Session questionnaire for transference, resistance
 [Graff & Luborsky, 1977]
- v Working alliance, transference, and anxiety themes [Grünzig, Kächele, Thomä 1978]
- The concept of transference space & the 5-minutes samples
 [Luborsky et al, 1973]

3a. Q-Sorts, questionnaires & the Kelly-Grid-Technique

Q-Sort Methods

- Similarity between "significant parent" and "therapist"
- Similarity between "ideal person" and "therapist"
- Expectations of patients about therapists,
- Expectations of patients about therapists,
- Similarity in behavior towards parents and therapists before and after
- [see for a review Meltzoff & Kornreich, 1970]

3b. Q-Sorts, questionnaires & the Kelly-Grid-Technique

Questionnaires

- Remembered parental behavior
 [Albani et al. 2000]
- Interaction in a therapeutic group
 [Baguet, 1984; Tschuschke, 1994]
- Giessen-Test transference and countertransference [Beckmann, 1974; 1978]

3c. Q-Sorts, questionnaires & the Kelly-Grid-Technique

Kelly-Grid-Technique

• transference in group analysis [Catina & Tschuschke, 1993]

4a. Methods to identify Relationship Patterns

- 4.1 CCRT the Core Conflictual Relationship Theme [Luborsky, 1991, 1998, 1999]
- 4.2 CRP the Central Relationship Pattern [Albani et al 1994; Dahlbender, 1998]
- 4.3 FRAME [Dahl, 1988,1993]
- 4.4 Configurational Analysis
 [Horowitz, 1991]

4b. Methods to Identify Relationship Patterns

- 4.5 Dynamic Focus CMP
 [Schacht & Binder, 1984]
- 4.6 Plan Analysis
 [Weiss & Sampson, 1986]
- 4.7 Idiographic Conflict Summary [Perry, 1991]
- 4.8 PERT Patient's Experience of the Resisted Aspects of the Transference [Gill & Hoffman, 1982]

You deserved a good coffee now

Before we concentrate on the CCRT dominion

The Discovery

- v Lester Luborsky presented in 1976
- v on Tuesday, January 17,1976 at 2 pm
- v At the Downstate Medical Center in New York
- v on the conference: Communicative structures and psychic structures
- v a paper with the title

 , Measuring a pervasive psychic structure in psychotherapy: the core conflictual relationship theme".

Lester Luborsky

Born 1920

PhD 1946 with R Cattell

Holt & Luborsky (1958) Personality Patterns of Psychiatrists

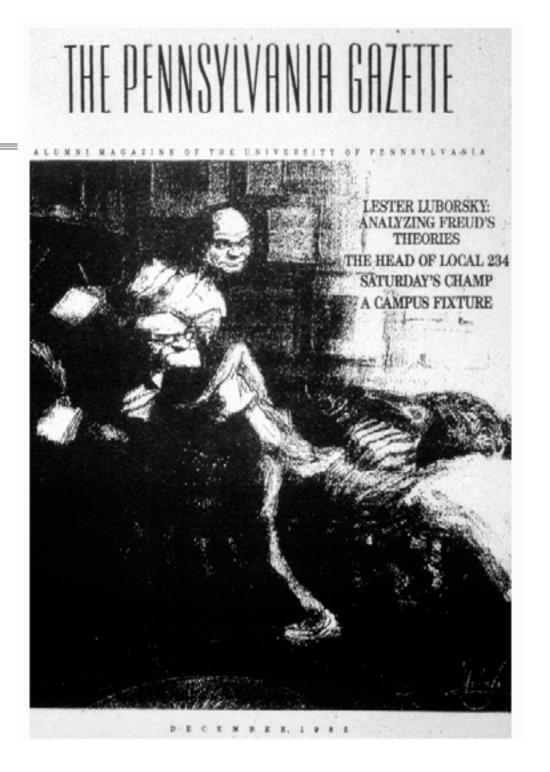
Luborsky (1976) Helping alliance in psychotherapy: the groundwork for a study of their relationship to its outcome.

Luborsky (1984) Principles of psychoanalytic psychotherapy. A manual for supportive-expressive treatment.

Luborsky et al. (1988) Who will benefit from Psychotherapy?

Luborsky & Crits-Christoph (1990/ 1998) Understanding transference.

Luborsky (1996) The Symptom-Context Method. Symptoms as opportunities in psychotherapy.



The basic structure of the CCRT

- v Wish
- v Reaction of the Object
- v Reaction of the Self

List of wishes

01	to be understood	19	to have control over others
02	to be accepted	20	to be controlled by others
03	to be respected	21	to have self-control
04	to accept others	22	to achieve
05	to respect others	23	to be independent
06	to have trust	24	to feel good about myself
07	to be liked	25	to better myself
80	to be opened up to	26	to be good
09	to be open	27	to be like other
10	to be distant from others	28	to be my own person
11	to be close to others	29	to not be responsible or obligated
12	to help others	30	to be stable
13	to be helped	31	to feel comfortable
14	to not be hurt	32	to feel happy
15	to be hurt	33	to be loved
16	to hurt others	34	to assert myself
17	to avoid conflict		to compete with somebody for someone's ention
18	to oppose others	alle	enuon

List of responses of the objects

- 01 they are understanding
- 02 they are not understanding
- 03 they are accepting
- 04 they are rejecting
- 05 they respect me
- 06 they don't respect me
- 07 they don't trust me
- 08 they are not trustworthy
- 09 they like me
- 10 they dislike me
- 11 they are open
- 12 they are distant
- 13 they are helpful
- 14 they are unhelpful
- 15 they hurt me
- 16 they are hurt

- 17 they oppose me
- 18 they are co-operative
- 19 they are out of control
- 20 they are controlling
- 21 they give me independence
- 22 they are dependent
- 23 they are independent
- 24 they are strong
- 25 they are bad
- 26 they are strict
- 27 they are angry
- 28 they are anxious
- 29 they are happy
- 30 they loves me

List of responses of the self

- 01 I understood
- 02 I don't understood
- 03 I feel accepted
- 04 I feel respected
- 05 I like others
- 06 I dislike others
- 07 I am open
- 08 I am not open
- 09 I am helpful
- 10 I hurt others
- 11 I oppose others
- 12 I am controlling
- 13 I am out of control
- 14 I am self-controlled
- 15 I am independent
- 16 I am dependent

- 17 I am helpless
- 18 I feel self-confident
- 19 I am uncertain
- 20 I feel disappointed
- 21 I feel angry
- 22 I feel depressed
- 23 I feel unloved
- 24 I feel jealous
- 25 I feel guilty
- 26 I feel ashamed
- 27 I feel anxious
- 28 I feel comfortable
- 29 I feel happy
- 30 I feel loved
- 31 I have symptoms

The cluster solutions

Wish-Clusters.

I wish ... →

Responses of Objects. Clusters.

The others (are)

- 1 strong
- 2 controlling
- 3 upset
- 4 bad
- 5 rejecting and opposing
- 6 helpful
- 7 likes me
- 8 understanding

- 1 to assert self and be independent
- 2 to oppose, hurt, and control others
- 3 to be controlled, hurt and not responsible
- 4 to be distant and avoid conflicts
- 5 to be close and accepting
- 6 to be loved and understood
- 7 to feel good and comfortable
- 8 to achieve and help others

Responses of Self.

Clusters.

I (am, feel) ...

- 1 helpful
- 2 unreceptive
- 3 respected and accepted
- 4 oppose and hurt others
- 5 self-controlled and self-confident
- 6 helpless
- 7 disappointed and depressed
- 8 anxious and ashamed

Elements of the CCRT

- √ Identify 5-10* relationship episodes (RE)
- v Determine the degree of episode completeness
- v Identify the three components W, RO & RS
- v Determine the most frequent Wish
- Determine the most frequent RO
- v Determine the most frequent RS
- v This is the CCRT

^{*} much more works better

- v 1. Wishes toward people are prominent +
- v 2. Wishes conflict with responses from other and of self +
- v 3. Especially evident in erotic relationships +?
- v 4. Partly out of awareness +?
- v 5. Originates in early parental relationships +

- v 6. Comes to involve the therapist -
- 7. May be activated
 by the therapist's perceived characteristics

 R
- v 8. May distort perception R
- v 9. Consists of one main pervasive pattern +?
- √ 10. Sub patterns appear for family members +?

- v 11. Distinctive for each person +?
- v 12. Remains consistent over time +
- v 13. Changes slightly over time +
- v 14. Shows short-term fluctuations in activation R
- 15. Accurate interpretation changes
 expression of pattern

- v 16. Insight into pattern can benefit patient +0?
 v 17. Can serve as resistance R
 v 18. Symptoms may emerge during its activation +?
 v 19. Is expressed in and out of therapy +
 v 20. Positive vs. negative patterns are distinguishable +
- v 21. Is expressed in multiple modes (dreams and narratives) +

Homage to the CCRT

26 years

of exciting CCRT applications

and

continuing developments

26 years CCRT – the Ulm thread

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1976 17-jan-1976, 2:00pm: LL presents CCRT | Kächele & Grünzig visit LL in Philly |
1984 Gill-LL: project in Amalia X. |
1985 LL in Ulm: CCRT analysis of Mr. C.
1987 first CCRT master theses in Ulm (Kächele) → |
1988 → children at age 3 years (Dengler) | LL-Kächele: CCRT working book Ulm |
1989 → depressive patients (Eckert) | Psychoanalytic Process Research Strategies
1990 LL et al: Understanding Transference, 1st ed. |
1991 the case of "Student", pattern search (Albani)
1992 LL Albani Eckert: German CCRT manual |
1993 female students Ulm (n≈40) Ulm CCRT-group |
1994 male students Ulm (n≈50) Ulm CCRT-group |
1995 multicenter study Leipzig-Ulm-Göttingen
1996 (n=266 neurotically disturbed young female patients)
1997 daydream psychotherapy, single case study Lausanne-Ulm |
1998 LL et al: Understanding Transference, 2nd ed. |
1999 project CCRT-LU, Leipzig-Ulm: CCRT-LU
2000 CCRT-LU n=32 clinical interviews | CCRT-LU single case study Amalia X |
2001 presentation CCRT-LU Euro-SPR Leiden | int.-SPR Montevideo |
2002 June panels at int.-SPR Santa Barbara
2003 spring CCRT+LU workshop Germany |
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Ulm-Leipzig Studies

√ Implementation of a German Manual [Luborsky & Kächele 1988]

v Single case evaluation pre & post [Kächele et al. 1990]

v Central Relationship Pattern [Albani et. al.1994]

- √ Critique of the category structure of the CCRT
 [Albani et al. 1999]
- Single case evaluation pre & post [Albani et al. 1999]
- Affective evaluation and severity[Albani et al. 1999]
- v CRP with different objects
 [Albani et al (2001)]

Problems

Standardized CCRT categories empirically based on a small sample n=16 → occurring rating problems:

v 1. no fitting standard categories

RO: are offended, disappointed, insulted, envy, threaten me...

v 2. similar categories

W1 to be understood, comprehended, empathized with, seen accurately, W2 to be accepted, approved of, not to be judged, to be affirmed

v 3. "overloaded" categories

RO 27 are angry, irritable, resentful, frustrated

- v 4. lengths of the category lists led to "personal rating preferences"
- v 5. just partial correspondence between W, RO, RS

partial correspondence between the CCRT dimensions

W, related to RO	W, related to RS	RO	<u>RS</u>
to be hurt	to hurt others	hurt me	hurt others
to be respected	to respect others	respect me	feel respected
to be understood		are understanding	understood
	to feel happy	are happy	feel happy
	to be open	are open	am open
	to feel comfortable		feel comfortable
		are angry	feel angry
		are anxious	feel anxious
	to achieve		
	to be close to others		
		are rejecting	
		are co-operative	
			feel self-confident

CCRT-cluster paradox

\Diamond	W-Cluster-6: to be loved and understood
\Diamond	W-Cluster-6: to be loved and understood 6=6
\Diamond	W-Cluster-5: to be close and accepting
\(\)	W-Cluster-5: to be close and accepting 5=5
\Diamond	RS-Cluster-3: I am respected and accepted
\Diamond	RS-Cluster-3: I am respected and accepted 3=3
ing⟨> e ⟨>	RO-Cluster-8: others are understanding RO-Cluster-7: others likes me 8≠7!!!
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The Leipzig-Ulm Redesign

Reformulation of CCRT Category System:

The CCRT-LU Category System

- DFG-Project Leipzig-Ulm:
- Horst Kächele, Michael Geyer
 - Realization Team:
- Cornelia Albani, Dan Pokorny,
- Gerd Blaser, Sonja Grüninger
 - Supported by:
- numerous collaborating clinicians and researchers
 - Grant:
 - Deutsche Forschungsgemeinschaft

The Leipzig-Ulm Redesign

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- The reformulation project:
- started as an attempt to resolve known rating problems of the CCRT category system
- v continued as a radical reconsideration of the category-system structure
- v trying to preserve valuable fundamental ideas of the CCRT system
 - "CCRT-LU": Leipzig-Ulm = LU = logically unified

The Leipzig-Ulm Redesign

See:

Cornelia Albani, Dan Pokorny, Gerd Blaser, Sonja Grüninger, Susanne König, Franziska Marschke, Ilka Geissler, Annett Körner, Michael Geyer, and Horst Kächele (in print):

Reformulation of the Core Conflictual Relationship Theme (CCRT) Categories: The CCRT-LU Category System

(accepted for Psychotherapy Research)

Requirements – Sources

- large empirical base (usage of the existing CCRT-studies)
 30 >16 studies, >400 probands, >800 sessions
- 2. empirically based, hence preserving the CCRT "nominal-category" character; no reduction to e.g. just 2 theoretically based axes $\vartheta\vartheta\vartheta$ given by the system design: category lists
- 3. reflecting relevant psychotherapeutic theories $\vartheta\vartheta$ >17 theoretical approaches reflected

Requirements – Categories

- 4. each tailor made formulation should fit to one, but not to more categories
- ϑϑ? improvement shown by the better reliability
- 5. minimal necessary number of categories and clusters
- Λ slightly more categories than by CCRT
- hierarchical organization simplifies the rater decisions
- 6. distribution should be as far as possible uniform
- ΛΛ clusters nearly equally frequent in the population rather a principally impossible task
- at least: no "universally predominating" clusters (like RO-C5 they are rejecting and opposing)

Requirements – Structure

- 7. full correspondence of categories across dimensions (WO, WS, RO, RS..) $\vartheta\vartheta$ by the system design: same categories
- 8. no "cluster paradoxes" $\vartheta\vartheta$ by the system design: the hierarchical structure
- 9. easy navigation within the hierarchical system; rating "top down" by the system design

Requirements – Properties

- 10. system should be easy to learn
- ϑϑ? logical structure, unified category system
- 11. use of the system should be more economic
- slight improvement –
 the text rating by a human
 is likely ever a time consuming task
- 12. system should be nice ປປປ because of its
 - logical structure
 - inner symmetries
 - closeness to the "real-life"

Design choices 1

Symmetry rule 1:

What the other can do I can do as well. What I can do the other can do as well.

♦ consequent correspondence between RO and RS categories.

Design choices 2

Symmetry rule 2:

Whatever what can happen I can wish. Whatever what I can wish can happen.

♦ consequent correspondence between RO and RS categories on the one side and W categories on the other side.

♦ two kinds of W:
Object-related wishes WO and subject-related wishes WS

♦ four (!) basic dimensions: WO, WS, RO, RS.

Four basic dimensions

Instead of three dimensions W, RO, RS we have:

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WO = wish concerning the object = "the other should ..."
WS = wish concerning the subject = "I want to ..."

RO = response concerning the object = "the other does ..."
RS = response concerning the subject = "I do ..."
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All dimensions

Unique category system

Symmetry rules →

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Same categories for all dimensions: 13 "cluster" – 30 "standard categories" – 119 "subcategories"
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predicate: components:
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B23 "helping"

WSO-B23 "the other should help me"
WSO-B23 "I want to help the other"
ROS-B23 "the other is helping me"
RSO-B23 "I am helping the other"

Valence

Positive, negative responses ... unchanged definition:

response "positive": wish satisfied

response "negative": wish not satisfied

Example:

PRSO-M12 "I am keeping them on distance" (It was my wish, finally I have managed it!)

NRSO-M12 "I am keeping them on distance " (It was <u>not</u> my wish, why I am so alone?)

Positivity index

Positive, negative responses RO, RS, ROS, RSO, RSS: relative proportion of positive responses in the considered dimension

$$P/(P+N)$$

or: 100 * P / (P + N) (value in percents)

values range between 0 = quite negative ... 0.5 = fifty fifty ... 1 = quite positive

A 1000000-pesos question:

Even narratives of healthy people contain more negative than positive responses.

Why?

Empirical sources for categories

- 1. CCRT-Categories Edition 2(Barber, Crits-Christoph & Luborsky, 1990)
- 2. Results of our CCRT-User Questionnaire (not fitting tailor-made formulation)...
- 3. CCRT-studies...

Empirical sources 2 – CCRT-user questionnaire

2. Results of our CCRT-User Questionnaire (not fitting tailor-made formulation)...

We asked the CCRT users to list the tailor-made formulations that could be assigned either to <u>none</u> of the standard categories or to <u>more than one</u> of the categories.

The number of returned questionnaires was unfortunately low.

Nevertheless, we found tailor-made formulations:

- 29 for Wishes,
- 80 for Responses from Others,
- 109 for Responses of Self

Empirical sources 3 – CCRT studies

Psychodyn. Short Therapies		
3 short therapies (each 25 sessions)	Saarbrücken	T.Anstadt
different short therapies (single s.)	Saarbrücken	T.Anstadt
Patient (f) with eating disorder (20 s.)	Frankfurt	A.Stirn
Patient (f) with anxiety disorder (10 s.)	Leipzig	K.Stolzenburg
Patientin with marital conflict (15 s.)	Leipzig	P.Gerhard
"The student" (compul. disord., 23 s.)	Ulm/Leipzig	C.Albani
Psychoanalytic Therapies		
"Christian" (anxiety neurosis, 10 s.)	Ulm/Leipzig	G.Plöttner
"Amalia" (Depression, 95 s.)	Ulm/Leipzig	C.Albani
RAP		
Subject-couples (64 Int.)	Göttingen	H.Staats
Patient-couples (120 Int.)	Göttingen	H.Staats
Subjects (30 Int.)	Leipzig	M.Möckel
Psychotherapy patients (198 Int.)	Leipzig	A.Körner, C.Albani
Interviews with medicines (33 Int.)	München	B.Waldvogel
Curriculum Vitae		
Psychotherapy patients (12)	Leipzig	D.Bannier
Intake Interviews		
Psychotherapy patients (32 Int.)	Ulm	G.Messer
Psychotherapy patients (40 Int.)	Leipzig	A.Körner, C.Albani
a rough estimation: $\Sigma \approx 400$ patients/probands, 800 sessions/interviews exploite		

Theoretical sources

- Central Relationship Questionnaire (Barber, Foltz, & Weinryb, 1998)
- Inventory of Interpersonal Problems (Horowitz, 1988)
- Freiburg Personality Inventory (Fahrenberg, Hampel, & Selg, 1984)
- NEO-PI-FFI (Costa, & McCrae, 1989)
- Attachment Questionnaire (Griffin & Bartholomew, 1994)
- Clinical Motivation Inventory (Deneke, et al., 1996)
- Relationship Pattern Questionnaire BeMus (Kurth & Pokorny, 1999)
- Categories of OPD (OPD working group, 1996)
- Categories of SASB (Benjamin, 1974)
- wishes and fears of "Ideographic Conflict Formulation" (Perry, 1997)
- wishes of "Reiss-Profiles" (Reiss & Haverkamp, 1998)
- CCRT-wish categories (Thorne & Klohnen, 1993)
- "Anxiety Dictionary" (Grünzig, 1980)
- "Circumplex model" (Leary, 1957, Kiesler, 1983)
- Attachment theory (Bowlby, 1969, 1973, 1980)
- "Motivation Systems" (Lichtenberg, 1983)
- "Big-five Factor Structure" (Goldberg, 1992)

It was a long way...

- 1. creating and reduction of lists of tailor-made formulations
- 2. rating of similarity and 1st hierarchical cluster analysis
- 3. rating of similarity and 2nd hierarchical cluster analysis
- 4. sexual categories
- 5. development of the final list of predicates
- 6. checking reliability and validity
- 7. translations

It was a long way 1-3

1. Creating and reduction of lists of tailor-made formulations

- 1.1 creating 3 lists of tailor-made-formulations from empirical and theoretical sources: 806 W + 1158 RO + 1363 RS items
- 1.2 merging of the 3 lists together
- 1.3 assignment of each tailor-made-formulation to one predicate
- 1.4 discharge of synonymous tailor-made-formulations(→ list of 232 predicates)

2. rating of similarity and 1st hierarchical cluster analysis

- 2.1 independent rating of predicate similarity (2 raters)
- 2.2 1st hierarchical cluster analysis
- 2.3 creating a list of \rightarrow 101 groups of predicates

3. rating of similarity and 2nd hierarchical cluster analysis

- 3.1 independent rating of similarity (5 raters)
- 3.2 2nd hierarchical cluster analysis
- 3.3 creating a preliminary category system (119-34-11 categories)

It was a long way 4-6

4. sexual categories

- 4.1 list of tailor-made-formulations with "sexual content" (83 items)
- 4.2 assignment 83 items to one predicate (→ 34 predicates)
- 4.3 independent rating of similarity (2 raters) and 1st cluster analysis
- 4.4 creating a list of 10 groups of predicates
- 4.5 independent rating of similarity (5 raters) and 2nd cluster analysis
- 4.6 creating of 3 groups of predicates with 9 subcategories

5. development of the final list of predicates

5.1 repeated reworking of the list of predicates, adding the sexual categories, final hierarchical list with 119 – 30 – 13 categories.

6. checking reliability and validity

- 6.1 test of the reformulated categories on one cross section sample and one single case study
- 6.2 ongoing trial applications by independent psychotherapy researchers

It was a long way 7

- 7. translations
- 7.1 independent translations form German by 2-3 experts
- 7.2 comparison and creating of the consensus version

Available Versions:

O German Albani, Pokorny, Blaser, Grüninger

O English R. Deighton, U. Jacobs, C. Fischer

O Czech D. Pokorny

In preparation:

O French: M. Stigler, Y. de Roten

O Ukrainian: A. Filz

et al. OOO