

Enactment resolution example for DAN

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Towards the end of session 1, when Dan's therapist returned to the room after briefly printing something off for him to take away he said that he had been thinking about his issue with time. Perhaps being left alone after the connection of the first session had awakened this and he spoke with reflective insight of wondering if it had anything to do with his mum who was "never there" when he was young. The therapist reflected on the waiting and having to limit himself to what he got. Dan then went on to talk in detail about his issue with time and relationships. The therapist names this as wanting to hold on and he continues to do just that in the session, engaging her with reflective pertinent material. The therapist makes a link to this material "so the same thing is happening here with the sense of wanting to hold on to the care when you're given it. The care and attention, but it ends like with mum and maybe you don't want to have to go or her to go". He agrees but continues, reflecting further and says that he doesn't want to go, fearful, so he clings on. He knows that it happens with friends and a previous therapist. The therapist finally ends the session.

Over the next sessions Dan arrives early and continues to cling on and in session 5 the therapist picks this up directly. This illustrates the stages of the enactment resolution model

Acknowledgement

The therapist begins by saying how she notices that he tries to get more time "... like we said, you hold onto me". Dan responds that they could run over if they needed to, implying both that he knows she wouldn't but he could push for it and get what he needed.

Exploration

The therapist gauges his awareness of this and asks how similar it is to what happens with others and he says he does this with others and he elaborates. She then returns to the enactment

T Have you noticed that I don't actually respond very much

P Yes I know, I realise that it's the end of the time and you're a trained therapist

Linking and explanation

T I'm wondering where it may lead you, where we may go on this map when we're doing this

P mm, yes I knew you'd say that (they laugh a little). I wonder if it is here? that I force you to give care

T Yes I think it is, we called it reluctant care didn't we, when the other person may feel overwhelmed, stuck and actually a bit forced into doing this. Then they may pull away and leave you, so you end up here, more hurt

P mmm

Negotiation and consensus

This is in fact smooth work so far as the client is insightful and 'cognitively' he knows that this pattern occurs and repeats with others and he can link it to the reformulation. The

therapist has therefore been able to engage him to think with her about this such that she can raise what can they do about it in their relationship

Exits and aims are raised when the therapist asks “How can we break this?”

Further explanation and contacting hitherto unassimilated feelings

Dan talks of how therapy is easier as there is predictability but with others he never knows when he'll see them again. He starts to convey a depth of desperation and how he then forces people to say when they will see or talk to him again. Through this stage there is a deepening of affect and although they understand what is happening across his relationships and the need to break this it is evident that this is a powerfully driven pattern. The therapist returns to focus on the process and that therapy could be a place to explore this

Exits and aims

T Ok, what I'm thinking though is that as we run over in our sessions and I'm failing to stop you talking and holding on we are in fact going through those very difficult feelings that you feel with others. I wonder if we could experiment with not doing that? I'm saying that because we are carrying a pattern that is just not working for you, it actually leaves you more vulnerable, not in control and much harder to tolerate people being apart from you

Dan says he knows that but he thinks he's holding on less now and they discuss how he relates to others

This work conveys the cycling of the model as the therapist moves back and forth through the stages, in that they work further with the links and understanding before being able to appreciate how this is manifest between them and what breaking may involve

Further explanation and contacting hitherto unassimilated feelings

The therapist tries to return again to focus on the process and suggests that the ending of each session is like a mini-ending of the therapy and wonders what the end will be like. This leads to an understanding about any limit and how he fights them to get what he needs and wants. She tries again

Exits and aims

T I suppose what I'm conscious of feeling is that we are in this together. I am failing to put a successful limit and you are crossing it. I know that is because it is hard but I'm trying to get alongside you and say what should we do about that

Consensus

Again Dan detracts from this and he speaks of wanting a real relationship with her but one in which he can get more and one in which he could see that she may break her limits for him. This would perhaps show that he mattered and that he is special. The enactment and its origins are now clearer. The therapist offers an understanding

T I think it's as if it is so hard to accept what is real in here, that there is real care on offer, feelings are genuine, yours and mine. Because that is hard to feel and accept then that fuels the need to get more from me, by, to push me for more, to be special,

. . . I'm not going to break the boundaries and limits for you but that's not because you aren't important but what is happening in here is something you can believe in

Dan says he hears this but doesn't feel it. The therapist says they need to end and he smiles as the session has run over again