

**MANAGING ACTING OUT IN
COUPLE THERAPY**

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I N S T I T U T

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THERAPEUTIC ALLIANCE CONDITIONS

- A therapeutic alliance exists if partners, at any given moment while in session, demonstrate each of the following:
 - Partners are **fully collaborative and cooperative** with each other and the therapist
 - Partners **accept their role** as "patients" or "clients" and accept the therapist role without distortion (therapist remains an outsider and collaborator)
 - Partners **stay on the task of couple therapy** which is to work on the relationship and not on each other or on the therapist
- If any of the above conditions aren't present, one or both partners are **acting out**
- **Acting out** should not be rewarded with typical therapy

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ACTING OUT

- Blaming the therapist
- Attacking the therapy
- Mismanaging thirds in therapy
- Gross violations of Grice's maxims
- Poor or no self-activation
- Impulsivity, explosiveness, projection, projective identification, withdrawal, avoidance, and splitting

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REASONS FOR ACTING OUT

- To test the therapist's ability
- To feel better at the cost of getting better
- To avoid negative feelings
- To avoid remembering original attachment experiences/figures
- To get the therapist to adapt to their reality (e.g., pain avoidance)

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COUNTER- TRANSFERENCE

- May feel angry
- May become aggressive
- May feel frustrated
- May feel inadequate
- May feel intimidated, scared
- May get defensive
- May feel hopeless, helpless
- May be dissociated
- May get sleepy
- May have the sense of working harder than the couple

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DEALING WITH ACTING OUT

- Confront acting out by going down the middle:
 - "You two don't seem interested in being loving toward each other."
 - "Neither of you is willing to back down from fighting."
 - "My hands are tied if you're not willing to try any of my suggestions."
- Avoid countertransference acting out (getting into power struggles with partners, breaking therapeutic frame, defensiveness, trying harder, shaming the couple)

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CONFRONTING PARTNERS

- Only when acting out is directed toward the therapist or the therapy
- Other than this, down the middle is preferable

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ACTING OUT

- Many, if not most couples, fail to form a therapeutic alliance, at least initially
- Acting out behaviors range from intense and obvious to subtle and ambiguous
- Before therapy can be effective, a therapeutic alliance must be gained by first curtailing acting behaviors

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DEFENSES

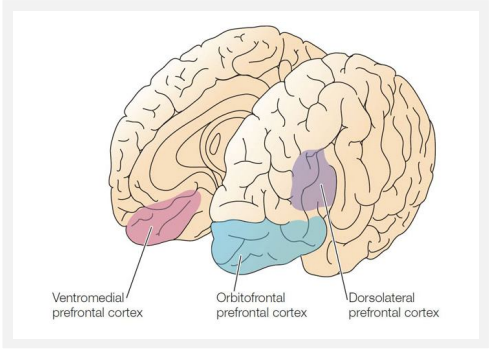
- High Level Defenses
 - Repression
 - Suppression
 - Sublimation
 - Rationalization
 - Altruism
 - Intellectualization
 - Displacement
 - Compensation
 - Humor
 - Undoing
- Low Level Defenses
 - Splitting
 - Denial
 - Idealization/Devaluation
 - Regression
 - Dissociation
 - Acting out
 - Transference acting out
 - Avoidance/Withdrawal
 - Projection/Introjection
 - Projective identification

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ERRORS AND ERROR CORRECTION

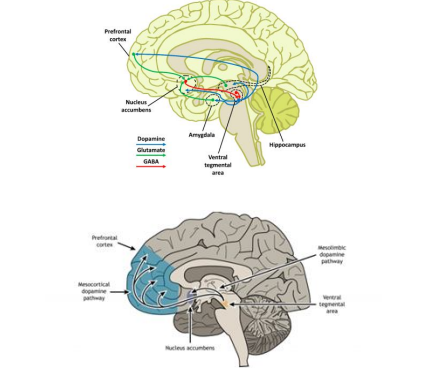
- Master regulators
 - Ventromedial PFC
 - Can be co-opted by amygdala, other limbic structures, and reward circuit (dopamine/GABA)
 - Consistent w/ chronic acting out
 - Orbitofrontal PFC
 - Same as above
 - Dorsolateral PFC
 - More cognitive than VM PFC
 - Reality ego center
 - "Do the right thing"
 - Anterior cingulate



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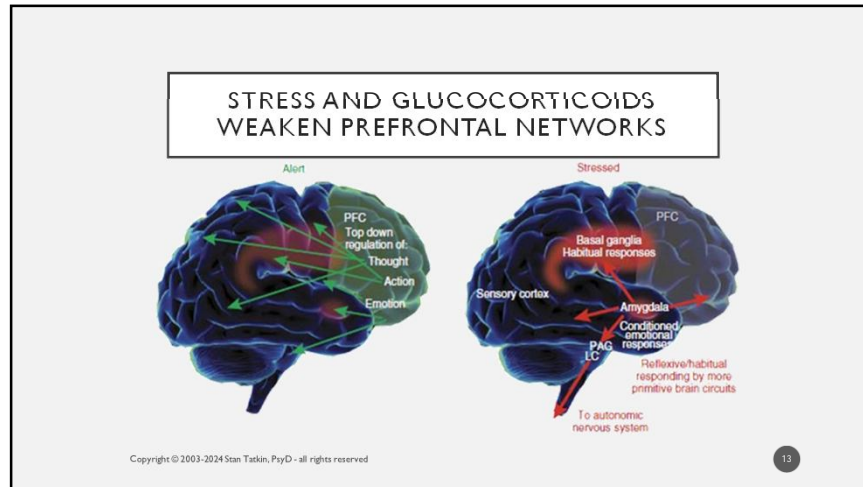
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REWARD CIRCUITS

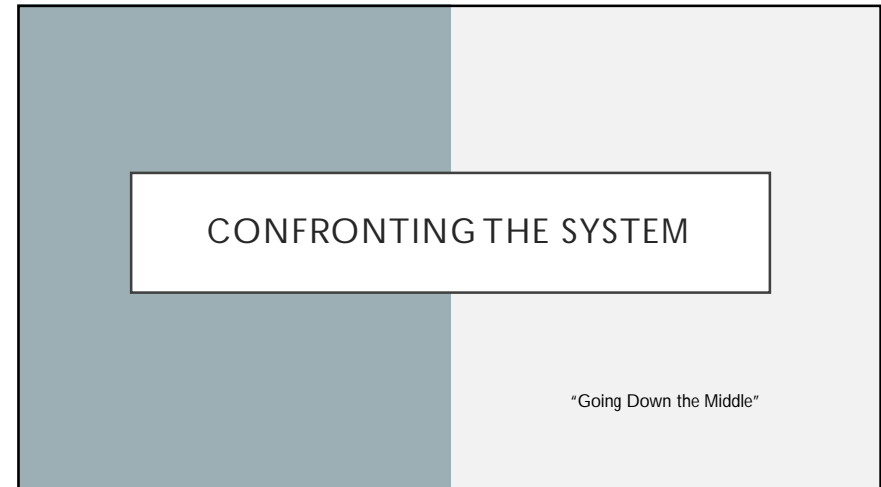


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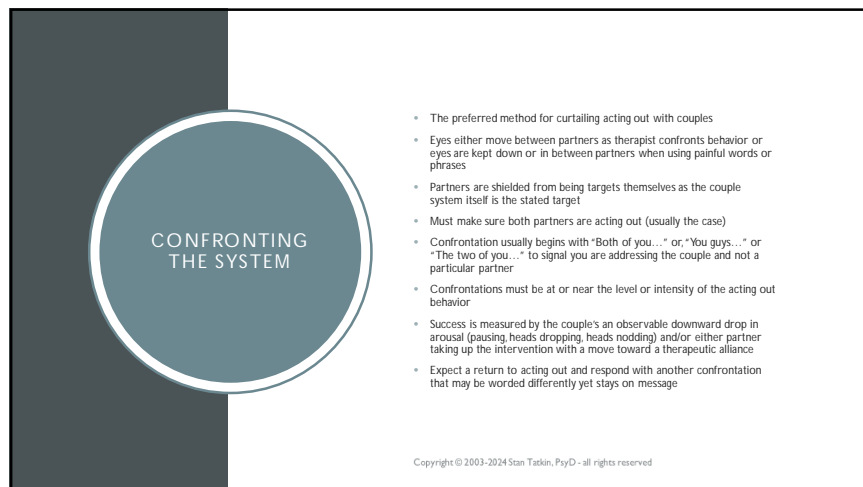
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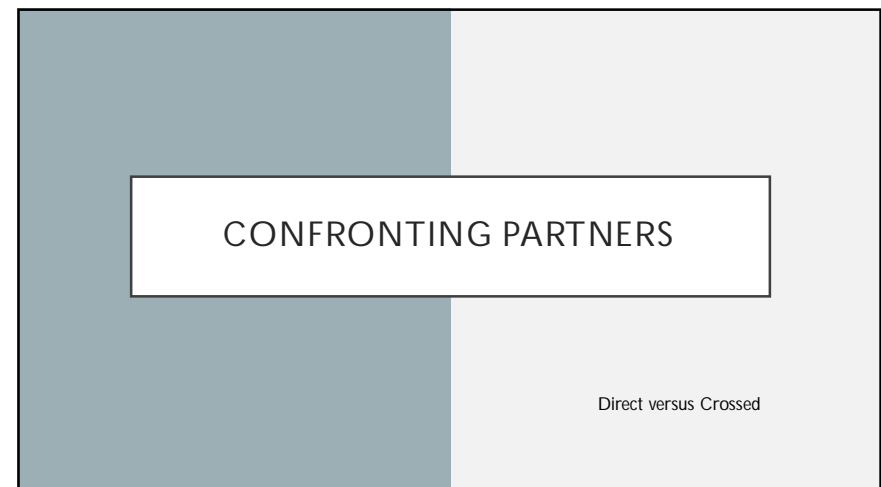
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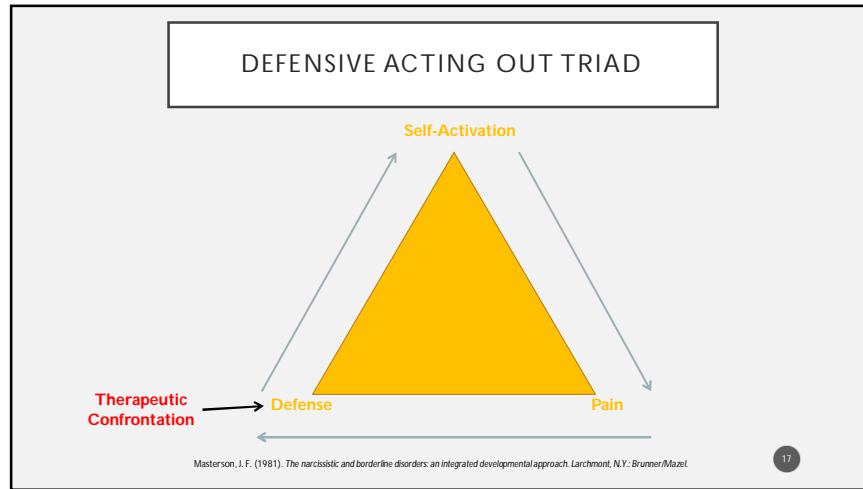
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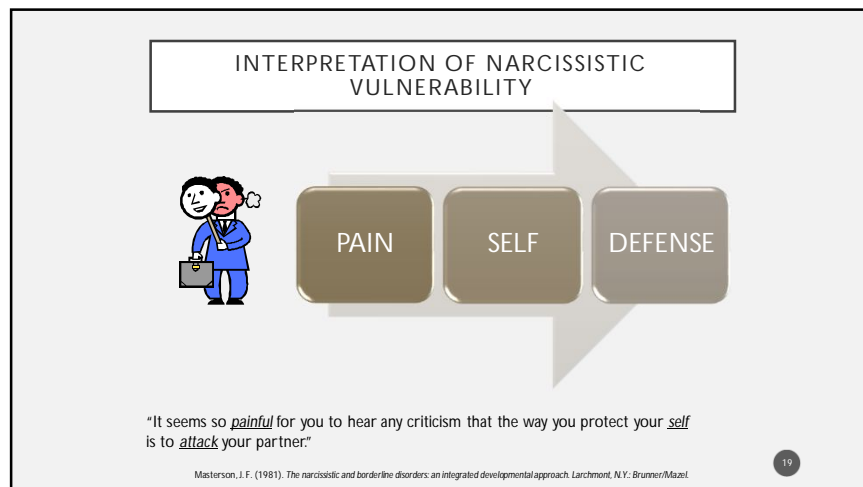
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CONFRONTING PARTNERS

- Even if only one partner appears to be acting out, consider finding a way to go down the middle
- In couples, where there is one, there is always the other
- No angels, no devils
- If one partner is acting badly, the other partner is complicit in some way
- Take time to think about this and consider crossing the interpretation or confrontation by addressing the opposite partner ("I can see you're angry, yet you don't say anything to your partner. Why is that?" or "You let your partner do all the talking and you don't insert yourself or interrupt them. Why is that?")

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CONFRONTING PARTNERS

- If you *must* confront only one partner, consider the following:
 - Individuals from the *distancing group* generally will attack back or leave therapy if confronted directly
 - Instead, use interpretation of narcissistic vulnerability (pain-self-defense)
 - "It seems so painful for you to when your partner complains, that you protect yourself by attacking them."
 - Whatever variation you use, remember the sequence in sentence structure – pain-self-defense
 - Or cross-interpret the acting out partner to the other one
 - [to the non-target partner] "I believe your partner [to the target partner], and correct me if I'm wrong, [back to the non-target partner] is exquisitely sensitive to feeling attacked/criticized/exposed/interrupted/intruded upon (choose what fits), and I think that might be why they are behavior this way"

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TIPS

- Get partners to work instead of you
- Think strategically
- No pass for trauma-victims
 - Can't act badly
 - Ego psychology

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CONCLUSION

- Throughout each session, therapists should frequently ask themselves the following:
 - Is everyone fully collaborating?
 - Is everyone fully cooperating?
 - Is everyone focused on the task of couple therapy?
 - We're working on the relationship, not on each other
- If any of the above are **not** true, go back to your strategies and get partners back on track

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CONCLUSION

- Acting out likely occurring in some or all of your couple sessions
- Acting out should not be rewarded by doing therapy in the usual manner
 - Doing so will result in continued, if not increased, acting out behavior
- The presence of acting out signals a lack of therapeutic alliance with your partners
- The therapist must "plant a flag" and focus solely on the acting out behavior until both partners attend to the therapeutic task at hand – their relationship – and both become fully collaborative and cooperative with each other and the therapist

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CONCLUSION

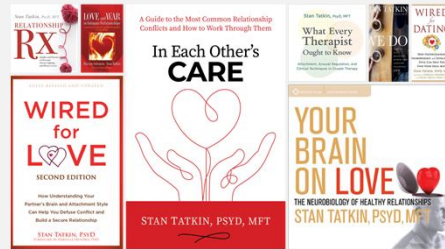
- Confronting the couple "down the middle" is one of the most effective methods for dealing with acting out
- When addressing individual acting out with a partner suspected of being from the distancing group (developmentally), therapists should use interpretation of narcissistic vulnerability or use cross interpretation to the non-target partner
- When addressing individual acting out with a partner suspected of being from the clinging group (developmentally), therapists should use supportive confrontation of the partner's maladaptive (self-harming) behavior, or use cross interpretation to the non-target partner

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