**BOLD Structured Therapy Group**

*Example of a Group Meeting*

The following revised transcript illustrates how a structured ISTDP group therapy works. A group member volunteers to be the patient. The therapist intervenes. And the group helps the patient explore her feelings. The therapist keeps the group on task by asking questions that help the group analyze whether the patient is exploring a feeling, becoming too anxious, or avoiding feelings by using a defense.

The therapist should ask only very simple questions that make it easy for the group to see the difference between a feeling and a defense. For instance, “is that thought her anger, or is that thought a way to cover up her anger?” “When she calls herself a name, is that her anger toward her ex-husband, or is that a way she protects the ex-husband she loves by turning the anger onto herself?” These constant interventions by the therapist help the group see the difference between feelings and defense, thus enabling the group to stay focused on the task: exploring the feelings we usually avoid.

In the following transcript, the therapists have reminded the patients of the task for the group and the need for mutual compassion. Then the therapists remind the group of how we will work: the therapist will intervene, and the patients will be asked to analyze the patient’s response. This introduction occurs at the beginning of each group as a reminder about the task.

Pt: I’d like to be in the BOLD seat because I’ve got a problem with my eyes. She blinks a great deal and complains of numerous vision problems including blurry vision. [*Sign of excessive anxiety in cognitive/perceptual disruption.*]

Therapist: What do you notice in your body as you begin today? [*Invitation to identify and regulate anxiety*.]

Pt: I’m anxious.

Th: Would you like to regulate it?

Pt: Doing something for myself made me anxious.

Th: Would you like to regulate your anxiety?

Pt: I got distracted. I worry I’m a pain in the butt. [self-attack]

Th: “I’m a pain in the butt.” Is that her problem? Or is that a thought that attacks her?” [*Invitation to the group to work*.]

Group: It’s a thought that attacks her.

Pt: I’m getting dizzy.

Th: Is that her problem, anxiety, or a way to avoid declaring a problem? [*Inviting the group to work*.]

Group: Dizziness is anxiety.

Th: Right. So as soon as Sara wanted help with a problem, this anxiety attacked her as if it was against the law for her to ask for help. Sara, would you like to break that law?

Pt: Laughs. My family has punished me for needing help.

Mary: Why is it so hard for your family to let you get help?

Pt: My twin sister is the opposite of me. She’s a hard ass. Upset with me. She is abusive and calls me a narcissist.

Cora: What feelings do you toward your sister? [*Cora takes on the therapist’s usual role, asking for feelings. A good sign that the group understands the task and is beginning the task of mutual exploration.*]

Pt: Sad she is my sister. It embarrasses me that she’s my sister. She screams at me.

Th: When Sara says that she is sad, is that the feeling *toward* her sister, or might the sadness be a way to cover that feeling? [*Inviting the group to work*.]

Adele: But sadness is a feeling.

Th: It really is. So we want to take a careful look its effect. Right now, is the sadness mobilizing Sara or is the sadness paralyzing Sara? [*Inviting the group to work*.]

Pt: It paralyzes me.

Th: Exactly. So shall we take a look at what feelings you have toward your sister that are under the sadness?

Pt: She attacks me and screams at me.

Mary: When your sister screams at you, what do you feel?

Pt: She didn’t talk to me for years. If don’t put up, you’re out. [*Defense: she describes what her sister did, not what she feels*.]

Th: And what feelings do you have toward your sister when she screams at you?

Pt: Anger. But I don’t feel it.

Th: And if you stay with the anger? How do you experience it in the body?

Pt: Nothing is there.

Th: “Nothing is there.” Is “nothing” the anger, or is “nothing” a way to avoid the anger? [*Inviting the group to work*.]

Group: It’s a way to avoid the anger.

Th: Right. If there was nothing, you wouldn’t be here. How do you experience this anger physically in your body?

Pt: It’s hiding and I’m like numb. It’s not showing me where it’s at.

Th: Is hiding the anger, or is hiding a way to avoid the anger? [*Inviting the group to work*.]

Group: Hiding is definitely a way to avoid the anger.

Th: So, if we face the anger instead, how do you experience this anger toward your sister?

Pt: It’s like trying to find a small child.

Th: Everyone can understand hiding, since everyone here has hidden feelings. [*Universalize the use of a defense*.] Could we take a look at the feelings you are hiding from your sister? [*Inviting the patient to engage in the task: facing feelings she usually avoids*.]

Pt: Right now, I feel hate for mother. Physically how do I experience it? It’s still hiding. [*Defense*]

Th: How do you experience this hatred?

Pt: I’m wanting to cry. It’s easy for me to go to sadness. I guess I feel a hopelessness. Nothing I can do about it. [*Defense*]

Th:Is hopeless the anger or a way to hide the anger? [*Inviting the group to work*.]

Mary: If I punched you, what would you feel? Mad? Right?

Pt: I would worry about you.

Th: And would worry be the anger or would worry hide the anger? [*Invitation to the group to work*.]

Pt: I don’t let myself experience it, because nothing I can do about it. [*There may be nothing she can do about her family. But the patient has forgotten that avoiding her anger and getting anxious instead is triggering physical symptoms in her body*.]

Th: Wouldn’t it be nice to feel the anger so you wouldn’t have to have vision problems instead? [*Mobilizing the patient toward a positive goal*.]

Pt: That’s true.

Th: So could we look at a specific example where this anger came up? [*Inviting the patient to explore feelings in a specific example. This makes it easier for patients to notice what they feel*.]

Pt: I was talking to my sister and she freaked out and screamed at me over the phone. I felt hopeless and told her that I don’t want to live like this anymore. She’s like: do I need to hang up and call up someone? She wasn’t listening to me.

Th: And what feelings come up toward her for doing that?

Pt: Hate.

Th: How do you experience that feeling in your body?

Pt: So weird. I’m not allowed to feel it. The feeling in my body?

Th: How do you experience that anger toward her?

Pt: Like a rage. I don’t look enraged I know.

Th: How do you experience that anger in your body?

Pt: I have tunnel vision. I’m taking it out on myself. Hurting my vision again.

Th: If you are nice to yourself and let the anger toward her, how do you experience this anger toward her?

Pt: I want to run away from her. [*At the same time, the patient’s hands were almost forming fists*.]

Cora**:** What would your hands like to do to her?

Pt: Punch her. Laughter. [The patient flexes her hands, looking at them.]

Th: If you let yourself feel mad toward her, what would you say to her? [*Inviting the patient to put her anger into words*.]

Pt: I’m so disappointed in you. You’re such a bitch.

Ned**:** Why are you angry with her?

Pt: She’s mean to her son too.

Ned: what do you do with that anger?

Pt: With my mom, it was the same thing.

Th: Could we look at a specific example?

Pt: When my father was dying, she didn’t tell me. When I called, she hung up.

Th: What are the feelings toward her for doing that?

Pt: Disbelief, sadness. He was already in a coma. They didn’t have me**.**

Th: Is disbelief the anger, or is it a way to avoid the anger? [*Inviting the group to work*.]

Mary: That is terrible behavior! You can’t feel it.

Pt: I was so angry. They stop talking to me.

Mary: What did you do? [*The patient describes a situation where her sister had stolen money from her. When she told her father, he yelled at her for bringing up this topic*.] I was mad and sad.

Th:Is sadness the anger, or a way to cover the anger? [*Inviting the group to work*.]

Cora: Why does anger keep coming up in our conversations? It seems like it comes up a lot.

Th: If we are happy, it is easy to be happy together. If we are sad, it is easy to be sad together. But it is very difficult to feel anger toward people we love. And it can be difficult for the people we love to hear that we are angry with them. And it can be difficult for us to hear that our loved ones are angry with us. So some of us have learned that if we feel anger, the people we love may abandon us. [*Sometimes the therapist offers some psychoeducation so that the group understands why they have trouble with feelings. Then the therapeutic task makes sense to them.*]

Mary: I was told anger was bad or mean. That’s bullshit. You pushed it down so hard.

Pt: I lived in Germany for a while: no anger is allowed there. In my family, you can scream and yell.

Mary: Feeling anger is different from screaming.

Th: Would screaming be the anger, or would screaming be a way to get people to punish us when we are angry? [*Inviting the group to work*.]

Pt: Right.

Th: Would you like to feel this anger here so you don’t have to have symptoms instead?

Pt: How do I do that? I am not connecting to it. It’s hiding. I feel passive.

Th**:** Is passivity the anger, or a way to hide anger? [*Inviting the group to work*.]

Pt: I have no idea.

Th: Anyone have an idea?

Tim: If someone felt anger toward me, I would die, feeling like I’m being abandoned. It’s a matter of survival. I wouldn’t belong anywhere.

Pt: I feel such a loss of community. I can’t get my community back. I can’t get my family back, even though they suck if I get angry again.

Mary: My sister does the same thing. She says, ‘you’re not good at hiding your anger.’ Then she gets angry with me. I can’t win. Your sister is killing you or has killed a part of you.

Cora: What fears do you have of feeling anger?

Pt: They’ll know. She knows I’m avoiding her. She’ll try to kick me out of the family.

Mary: Why?

Pt: They’ll do it again.

Mary: how do you defend yourself.

Th: By hiding**.**

Elly: She is putting up defenses against anger. How do you get rid of them?

Th: That’s a great question! Remember, at first Sara only had physical symptoms. But she didn’t know what she felt. Now she knows that anger is triggering her anxiety. Also, as she is exploring her anger, notice how her anxiety symptoms have come down. For instance, Sara is not dizzy now, are you?

Pt: No.

Th: And how is your vision?

Pt: It’s better. I don’t have the tunnel vision now.

Th: Right. So as we help you feel your feelings at higher levels, your defenses eventually won’t be necessary. And in the meantime, we can still bring your symptoms down like we are noticing right here.

Pt: When I’m with family, I’m still angry and they won’t change.

Th: That may be so. We can’t change them. But if you want, we can help you feel your anger without being depressed and having vision problems.

Ned: [to the patient] You are like me, intellectualizing. You can’t figure them out. They’re just doing it.

Pt: I’m angry.

Ned: You can’t think anger.

[*Since the group is nearing the end of the meeting, the therapist begins the wrap up*.]

Th: What did you learn about yourself here today?

Pt: I have problem with sadness and anger. Maybe you would say I do the sadness over anger.

Ned: What did they do? What else did they do? As you talk about that, you’ll feel angry.

Tim: How is love expressed in the family?

Pt: We hug when we meet.

Mary: Read the love languages book.

Th: Your father told you to love the lie and hide yourself. [*Making the link between current hiding and her history of why hiding made sense*.]

Pt: I remember when I told them that my older brother had sexually abused me when I was little. The first time I told them, they stopped talking to me.

Mary: Are you kidding me?

Th: So there’s a good reason for your first comment: you were afraid we would regard you as a pain in the butt if you told the truth.

Pt: Moved to tears.

Mary: Why do you want to socialize with people who lie and treat you like shit? [*We see repeatedly how Mary judges the patient rather than identify with her. This suggests that she has similar difficulties which will come up in group later on*.]

Pt: They make a good show of not being that way in a group.

Mary: Why?

Th: We have mixed feelings toward our families. They make us angry and at the same time we love them. And it’s hard to feel angry with the people we love. And today you showed us different ways that you hid your anger to protect the family you love. [*This piece of psychoeducation helps the group as a whole, and it speaks directly to Sara and Mary*.]

Tim: This makes me anxious.

Th: So let’s see what we learned today about your triangle of conflict. You feel angry toward your sister, mother, brother, and father. This anger makes you anxious. And then let’s see if we can list the defenses that came up to hide that anger. What do you remember?

Pt: I covered the anger with sadness.

Th: Right. And what other defenses did we see?

Mary: Hiding the anger.

Th: Right. And what other defenses did we see?

Ned: Giving thoughts instead of the feelings.

Th: Right. And any other defenses?

Cora: Oh, and calling yourself a pain in the butt!

Group: Laughs.

Th: Right. So we saw that you felt anger. The anger made you feel anxious. And then you could avoid the anger by hiding it, covering it with sadness or thoughts, or by turning the anger onto yourself by calling yourself a pain in the butt. And we learned that you came by this naturally, since you learned that if you revealed your feelings, your father yelled at you and your sister cut you off. So it’s a new thing to let yourself feel your feelings honestly here so you don’t have to get depressed or anxious. Ok. That’s all for today. We’ll see all of you on Tuesday.

The concluding section allows the group to think about what they learned today to consolidate the progress they made. By analyzing each other within this structure, they are also analyzing themselves. And by maintaining a clear structure, the therapists keep the level of feeling low enough that the group can explore feelings without getting flooded with anxiety.