



**Anna Freud**  
National Centre for  
Children and Families

2<sup>nd</sup> January 2020

[annafreud.org](http://annafreud.org)

**Microanalysis of clinical  
process in  
Psychoanalytic Parent-  
Infant Psychotherapy  
addressing relational  
trauma**

Narrative Report for the  
International Psychoanalytic  
Association



## Goals

This research project, designed and conducted by members of the Parent-Infant Project (PIP) and the Child Attachment and Psychological Therapies Research unit (ChAPTRe), both at the Anna Freud National Centre for Children and Families (the Centre), aimed to examine in detail the process of Psychoanalytic Parent Infant Psychotherapy (PPIP) in cases of relational trauma. The goal of the project was to explore the micro-processes that constitute therapeutic interaction and to identify interactions between therapist, mother and infant that bring positive change in the traumatising patterns of relating between mother and infant. In addition, we aimed to develop a systematic methodology for studying the therapeutic encounter in ways that generate meaningful understanding, relevant to clinical practice.

## Key Outcomes

The project included the analysis of videos of early sessions from three cases of psychoanalytic parent-infant psychotherapy with relational trauma. Analysis focused on traumatising microevents between participants and on interactions that mitigate the ensuing dysregulation.

We developed an approach to studying clinical interaction, that relies on an iterative process between data selection, analysis and theory building, which we termed *layered analysis*. Through repeated viewings of the session at different time frames (including slow motion and frame-by-frame analysis), key interactive events are selected, based on several factors including the therapist's actions, affective dysregulation, and observed discordance between modalities of communication. Selected interactive events are then coded and analysed, using microanalysis, the Atypical Maternal Behaviour Instrument for Assessment and Classification (AMBIANCE) (Bronfman, Parsons, & Lyons-Ruth, 2006), discursive analysis, the therapist's narrative and Interpersonal Recall Interviews with the therapist. A main feature of layered analysis is a dialectic between gathering in and integrating meaning, and then letting go and moving on to something new. We found this in-session, mixed methods approach useful in providing a clinically-sensitive research frame for the study of clinical process.

A key finding of our study is differences in rhythms of coordination and discordance between verbal and embodied communications. More genuine, positive communications seem rooted in congruence/concordance between verbal and embodied and between the different embodied modalities; there is also a greater matching of rhythm, whether the affective tone is high or low. When the therapist's interventions are concordant, words seem to be accompanied by kinesthetics known to support the therapeutic alliance, e.g. body movement synchrony. We were particularly interested in discordant communications, which we understood as reflecting trauma having infiltrated the interaction. These are characterised by lack of cross-modal contingency (between embodied and verbal communications and between different modalities of nonverbal communication), a disruption of relational expectancies, and 'un-smooth' exchanges mismatched in rhythm, affect and/or content.

Importantly for clinical process, in addition to discerning fearful and disoriented states in mother and baby, microanalysis revealed that the therapist herself sometimes becomes transiently disoriented and/or disorientating. In her state of disorientation, the therapist inadvertently becomes a traumatising agent herself, triggering further disorientation or withdrawal in the mother and withdrawal or freezing in the baby. Using the AMBIANCE system to examine clinical process and the therapist's behaviours is a novel aspect of the study. Recognising the profound effect of the therapist's disorientation on the mother and baby is an important and under-researched aspect of clinical process. Furthermore, in some interactive events we studied, it proved impossible to discern who triggers the traumatic interaction, which we speculate is another feature of the disorganisation that accompanies trauma.

Through the three cases, we were able to discern different categories of therapist response following her disorientation, which we suggest are potentially transformative. In some instances, the therapist recovers quickly from her disoriented state, is able to interrupt the traumatising interactions and provides emotional regulation and containment; this interactive repair seems to be rooted in some form of embodied knowledge on the part of the therapist, rather than conscious processing. In some instances, the therapist acts in ways that break the analytic frame yet lead to a positive transformation in mother's responses. Another category of intervention occurs in a time-frame longer than that grasped by microanalysis; in such instances the therapist's enactment allows delicate issues to be introduced into the conversation, to be processed at a later stage.

In sum, by focusing on very brief interactive episodes in parent-infant psychotherapy, it is possible to discern and describe in detail traumatising micro-events between parents, their infants and the therapist, as well as subtle, often non-conscious, therapeutic interventions that promote positive change. This can contribute to theoretical conceptualisations of the relationship between explicit and implicit relational processes in infant development and psychotherapy; it also has implications for psychotherapy process research and clinical training.

Based on the findings of this research project and the pilot study that preceded it, our future plans include using the method we have developed to examine interactions in PPIP characterised by states of disorganised arousal, which we believe play a significant role in promoting change in psychotherapy.

### **Grant expenditure**

The grant funded the time of Tessa Baradon, Principal Investigator and Evrinomy Avdi as Co-investigator for the duration of the research. Funding was also used for an administrator's time to support in the organisation and preparation for appointments and meetings. A researcher's time to provide AMBIANCE coding was also used as well as video editing and computer equipment purchased in order to carry out and edit the videos.

### **PUBLICATIONS**

Baradon, T. (2018). Microanalysis of Multimodal Communication in Therapy: A Case of Relational Trauma in Parent-Infant Psychoanalytic Psychotherapy. *Journal of Infant, Child and Adolescent Psychotherapy*, 17(1), 1-13.

This paper presents the pilot study that formed the basis and background of the project.

Avdi, E., Amiran, K., Baradon, T., Broughton, C., Slead, M., Spencer, R., Shai, D. (under review). Studying the process of psychoanalytic parent-infant psychotherapy: Embodied and discursive aspects. *Journal of Infant Mental Health*.

This paper presents a case study of the first case studied in the project and provides a description of the methodology developed.

Baradon, T., Avdi, E., Amiran, K., Slead, M. (2019, May). *Microanalysis of clinical process in Psychoanalytic Parent Infant Psychotherapy*. Workshop presented at the Anna Freud National centre for Children and Families

(<https://www.annafreud.org/training/training-and-conferences-overview/conferences-and-seminars/the-microanalytic-approach-and-its-application-to-clinical-process-in-psychoanalytic-psychotherapy-with-infants-and-their-parents-ppip/>)

This workshop focused on the analysis of the second case studied in the project.

Baradon, T. (2019, June) *Microanalysis of mother infant interactions containing trauma*. Keynote speech presented at the Association for Infant Mental Health Conference, London, UK.

## **Thank You**

We would like to take this opportunity to thank the International Psychoanalytical Association alongside the American Psychoanalytic Association for their generous support for this research. Without such support this important study would not have been possible.