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Catalogue of Presentations, Workshops and Scholarly Work

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I. PARENTING, ADOLESCENCE, AND CHILD DEVELOPMENT

The Relational Parenting Approach

In this talk, James Tobin, Ph.D., presents his Relational Parenting approach, a pragmatic guide for parents to help resolve parent-teen conflict and family systemic issues. The approach emphasizes the role of relational effectiveness in supporting parents' attempts to positively influence their children.

The Child's Psychological Use of the Parent: A Workshop

This workshop is designed for parents who would like to improve the quality of their relationship with their children. Dr. Tobin provides a road map for parents based on a core paradox of the human condition, i.e., the initial need to bond (to form and sustain early life) and the subsequent need to separate/individuate (in order for the child to secure a distinct personal identity unencumbered by unresolved issues with the family of origin). According to Dr. Tobin, both the parent and the developing child simultaneously press for separation/individuation and resist it. This workshop attempts to alert parents to the underlying dynamics that prolong this ambivalence and provides pragmatic suggestions for how parents can be "of use" psychologically so that their child is more successfully primed for the achievement of autonomy.

The Dynamics of Process and Content in Parent-Teen Communication: A Coding Manual

This coding manual is designed to provide parents with an approach to understanding their communication and relational difficulties with their children. According to Dr. Tobin, the parent-teen relationship is usually conflictual yet parents often do not understand the specific dynamics of their family system that often result in arguing, stonewalling, oppositionality, distance, and withdrawal. Drawing from scientific research of the conflict dynamics of romantic couples, Dr. Tobin has designed an exercise that consists of the audiotaping of a parent-teen discussion of an issue or problem between them. A set of content codes outlined in the manual is then applied to the transcribed audiotaped dialogue. The scoring sheet for the codes is designed

to showcase how what is said, when it is said, and by whom it is said contributes to the facilitation or obstruction of the dialogue. In this way, Dr. Tobin contends that the architecture of the parent-teen relationship can be uncovered and ultimately used in parent guidance and family therapy to improve parents' relationships with their children.

Academic Cheating Among Youths: A Causal Pathway Model

Academic cheating is a problem more commonly manifested among children and adolescents than one might expect. Researchers estimate that approximately 75% of high school students cheat at some point during their course of academic study (e.g., McCabe, Trevino, & Butterfield, 2001; Whitley, 1998). While cheating appears to be widespread, it has been under-emphasized in the empirical literature and poorly understood as a behavioral phenomenon despite its association with a range of youth risk factors (including low self-esteem and poor academic performance) and its capacity to predict more severe problems in later adolescence and young adulthood. Conducted by co-authors Nicolette de Sumrak, M.A. and James Tobin, Ph.D., this review attempted to organize the current research findings on academic cheating into a comprehensive causal pathway model. Empirical findings were categorized into (1) individual, (2) contextual and (3) moderating factors that interact to increase the likelihood of the onset and maintenance of cheating behavior.

II. ROMANTIC LOVE, COUPLES AND RELATIONSHIPS

Why We Love Who We Love: A Psychodynamic Perspective on the Loss of Free Will

In this presentation, Dr. Tobin describes a model of romantic love that synthesizes concepts from evolutionary psychology, Freudian thought, interpersonal neurobiology, and intersubjectivity. Notions of free will and conscious decision-making regarding the choice of romantic partners are refuted. Instead, Dr. Tobin presents an unconsciously motivated perspective on romantic love that emphasizes our uncanny tendency to select and induce others to hurt us emotionally in ways that are familiar and to which we are highly adapted.

Inducing and Being Induced: How to Recognize Dysfunctional Relationship Dynamics

As a species, we are socialized from birth to compromise various aspects of one's true identity in order to appeal to the primary caregiver. Consequently, we learn how to play roles in relationships very early in development. Yet, role-playing continues into adulthood and even across the lifespan. Every human interaction may be conceptualized from the vantage point of roles, as roles organize emotional experience, the hierarchy of power between individuals and groups, and the execution of tasks. Human relationships, therefore, revolve around inhibitions and resistances to authentic intimacy given that roles provide an architecture of human relatedness and fend off psychological fears and anxieties about closeness. In no other aspect of human life is this most apparent than in romantic relationships. We unconsciously coerce or "induce" others to act in accordance with our role preference, and in turn we are coerced or induced to act in accordance with the role preferences of others. These induced roles quickly set into motion a sequence of interactions that constricts a person's relational freedom, thus straight jacketing the person into a role that, over time, becomes quite rigid and constraining.



Love and Sex: Look Out! You are Being Recruited

Romantic love is parasitic. Unconsciously, we seek out partners who can serve as psychological “hosts” we then use to inhabit our previous relationship traumas. And the host, once recruited, chosen, and “injected” into, houses and nurtures our injured past. As the parasites grow inside our lover/host, he/she is altered and becomes the perpetrator who victimizes and does not love. Each of us must be aware of how we serve as our partner’s host, and how, simultaneously, we seek a host into whom we inject our parasitic material. In this talk, Dr. Tobin presents the story of “recruitment” and discusses how to recognize the nature of the parasitic material you are receiving. He also addresses the other side of the equation, i.e., how to understand the parasites already growing within you from previous relational experiences and the particular style of your recruitment and injection strategy.

Love and Parasites: More on the Recruitment Paradigm

This talk presents Dr. Tobin’s view that human relationships, especially intimate romantic bonds, revolve around a central dynamic in which one’s internal representation of relational trauma previously experienced in one’s life (metaphorically called a “parasite”) gets “injected” into the other (or in one’s partner). All human relationships are constituted by a “sender” of parasitic material and a “recipient” who is unconsciously recruited to host the parasite. Once the parasitic material nests and proliferates in the identity of the recipient, the recipient is gradually but inevitably transformed into a perpetrator who then inflicts relational trauma back onto the sender. In this way, the sender’s previous relational trauma is re-experienced in the contemporary relationship, confirming the sender’s rigid construction of the world, of others, and of human relatedness. According to Dr. Tobin, this dynamic of parasitic love explains the patterns of self-sabotage and self-destruction so common in people’s romantic lives. However, it also suggests a paradigm for understanding all forms of aggression including envy, racism, and overt acts of violence: not only are we consistently injecting our parasitic material into others, but we are constantly inundated with parasitic injections into us and ultimately altered in insidious ways that perpetuate cycles of injustice and self-hatred.

Repeating the Trauma: Unconscious Factors that Determine Contemporary Life

Early developmental factors that pre-determine who we are romantically attracted to and with whom we ultimately choose to be. The narcissistic-codependent bond is only one example of a broader, and more insidious, concept: the human mind is programmed to seek out the “familiar,” no matter how unhealthy, across the lifespan. This notion has been widely supported by theorists in evolutionary psychology and the social sciences, but is not often emphasized when considering the problems of contemporary life. In this presentation, Dr. Tobin outlines why and how we seek to repeat the fundamental circumstances of early life in relationships, friendships, workplace settings, financial status, and how we perceive and treat ourselves. While most of our early childhoods are relatively healthy, Dr. Tobin contends that a specific, fundamental trauma underlies each of our personalities and largely determines how our lives unfold.



False Intimacy: The Plague of Relationships

In this presentation, Dr. Tobin argues that inauthenticity in relationships may be characterized by dynamics in which two people relate to each other defensively and with an unconscious wish to recapitulate historical relational trauma.

The Dynamics of Unconscious Communication: Projection, Projective Identification, and Re-Traumatization

According to Dr. Tobin, communication occurs at an unconscious level and is organized largely around psychological processes that re-create historical events. This talk seeks to clarify how projection and projective identification are relevant in all romantic relationship and engineer patterns of relatedness oriented toward re-traumatization.

Interpersonal Transformation (Part I)

Various unconscious factors set the stage for the unfolding of relational dynamics that can be distressing, emotionally painful, and highly destructive. The narcissist-codependent bond is a good example of this. Dr. Tobin contends that such dynamics are largely pre-determined and out of our control and awareness, which is why so many people become frustrated at identifying and limiting the negative impact of these dynamics on their lives. Consequently, these dynamics overtake our best efforts at living a healthy, productive life, and tend to cause chronic damage in our romantic lives, careers, friendships, and even in relation to our own self-care and self-esteem. In this talk, Dr. Tobin presents an approach to identifying and taking better control of these dynamics – so that we do not allow them to unfold in their typical insidious fashion. His perspective on interpersonal transformation involves a systematic analysis of what constitutes how we view others and how others view us. Dr. Tobin suggests that how we view and are viewed consist primarily of fabrications that perpetuate a series of emotional and psychological provocations.

Interpersonal Transformation (Part II): Attachment vs. Relatedness

Dr. Tobin's perspective on interpersonal transformation involves the capacity to recognize how we are coercing our romantic partner, or being coerced by our partner, to perpetuate an unresolved early developmental trauma in our adult life. It is not uncommon for these coercive patterns to play out not only in romantic relationships, but also in our work lives, family lives, even with friends. In this talk, Dr. Tobin emphasizes the need to quickly recognize when we are being drawn into these insidious psychological and emotional provocations so that we can avoid them or act to change them. This involves the capacity to identify and understand how our own unique attachment patterns increase our tendency to get drawn into negative relationship dynamics. By the term "attachment" Dr. Tobin is referring to innate, unconscious, and highly rigid feelings, emotions, and assumptions about bonding with another that we inherited from childhood. According to Dr. Tobin, what is problematic is that many people never make a highly significant psychological transition in their adult lives: abandoning these old attachment tendencies for a more mature, healthy, and well-boundaried style of adult relatedness.



Does Being a Wife Mean a Better Life? A Critical Review of the Evidence

According to co-authors Dena Schulze and James Tobin, research has shown that, for men, being married is associated with physical, psychological and social benefits. However, the impact of marriage is less well understood and potentially more complex for women. The purpose of this review of the literature is to examine the relationship between marital status and physical, psychological, psychiatric and social variables in women. Empirical studies conducted within the last 5 years comparing married to non-married women on psychological, psychiatric, social and/or physical variables were evaluated. Main findings, methodological strategies, sample characteristics, and researcher inferences were itemized and assessed for the emergence of robust patterns. The primary finding was that 62.1% of the studies examined provided evidence that marriage in women is associated with psychiatric (levels of depression and anxiety), physical (healthier blood pressure), social (increased support from friends and family members, including one's marital partner), and financial (higher income) advantages, as indicated by correlational and between-group analyses. Overall, this evaluation of the recent literature indicated that being a wife may potentially enhance a woman's life in numerous ways. However, being a wife does not necessarily mean a better life! The benefits of marriage for women appear to be largely mediated by the quality of the marital relationship more so than any other variable. The analysis revealed that within marriage the underlying conditions of (1) companionship, (2) spousal support, and (3) collaborative co-parenting potentiate the well being of women across the lifespan, while a distressed relationship tends to obstruct these available benefits.

III. MEN AND MASCULINITY

Revisiting Oedipus: The Weakened Masculinity of Modern Man

According to Dr. Tobin, it is an era of weakened masculinity. Anecdotal evidence and scientific research suggest the presence of a large demographic of men who lack self-esteem, have difficulty forming and maintaining positive relationships, are poor decision-makers, resort to a variety of high-risk and maladaptive behaviors including internet pornography, substance abuse, and sex and work addiction, and harbor a general dissatisfaction with their quality of life. Although Freud is viewed by many to be obsolete at this point in time, for Dr. Tobin Freud's perspective on the Oedipus myth provides a compelling psychological explication of the predicament of modern men. In this talk, Dr. Tobin outlines his understanding of Freud's interpretation of Oedipus, its ramifications for male psychological development, and its relevance to the contemporary problems of men.

IV. GENERAL PSYCHIATRY

The DSM-5: Overview of Main Themes and Diagnostic Revisions

DSM-5 represents the field's most recent attempt at revising the DSM-IV-TR diagnostic nomenclature. In this presentation, Dr. Tobin outlines the primary efforts of the DSM-5 Task Force and the major diagnostic changes that were incorporated in the new manual, with an emphasis on the disorders of adulthood. The most promising changes are the organization of mental illness as a spectrum, the addition of dimensionality



to specifier descriptions, lifespan/development and cultural refinements, and the articulation of a new hybrid model of mental illness. In the context of these gains, Dr. Tobin also provides a summary of the major controversies surrounding the DSM-5, including misgivings about lower thresholds to qualify for numerous diagnoses and the related concern that we may now run the risk of pathologizing “normal” human functioning.

E-Therapy: A Critical Review of Practice Characteristics and Ethical Standards

A number of consumers turn to the internet to seek relief from mental distress. Research (Fox & Fallows, 2003) has found 21% of internet users search information on depression, anxiety, and other mental health issues. At the same time, a number of clinicians are engaging in the practice of “e-therapy” over the Internet. E-therapy is now used by a range of professionals and applied to a vast array of problems and conditions. Bischoff (2004) believes the interest in online based counseling is growing due to several reasons: technology is becoming increasingly sophisticated, the technology is becoming more affordable, and people are becoming more comfortable using technology as a means of communication. Furthermore, the telecommunications system will continue to increase in quality and affordability, and this will be associated with an increased user comfort. According to co-authors Lana Hunter and James Tobin, this will make it important for professionals in the mental health field to become familiar with the format and application of e-therapy available as a method of mental health treatment and the ethical and legal issues involved in choose technology as a treatment medium.

V. THE PSYCHOTHERAPY PROCESS

Toward a View of Positive Resistance: One Perspective on Change in Psychoanalytic Psychotherapy

According to Dr. Tobin, psychoanalytic psychotherapy features patterns of relational engagement between therapist and patient in which each contacts, adjusts, and conforms to the other, often due to simultaneously prosocial and defensive motives. Yet, as the intersubjective process unfolds and rigidifies throughout the course of therapy, the dyadic system is inevitably altered as determined by new strivings on the part of one or both partners. At these junctures, it is erroneous to characterize the patient as “resistant,” especially in the context of the patient’s emerging realization that he or she cannot be fully and accurately conceptualized by the clinician’s mind. Rather, “positive resistance” more aptly captures an advancement in the patient’s psychological and interpersonal functioning marked by an acknowledgment of what the other distorts or fails to comprehend about the self.

The Anatomy of Discovery in Psychotherapy: “Something So Familiar, It is Strange”

In this talk, Dr. Tobin cautions that the current environment of empirically-based treatment may foreclose on the discovery process psychotherapy affords. According to Dr. Tobin, psychotherapy is most successful when the patient’s self-observing capacities are supported by the therapist. If the therapist can avoid narcissistic ambitions and instrumental fictions employed to understand the patient prematurely, the conditions may allow



for the patient to connect with dissociated memories, cognitions, and affects. Dr. Tobin utilizes movie clips from the feature films “Ordinary People” and “9 1/2 Weeks” to illustrate his perspective.

The Utility of Regret in Psychodynamic Psychotherapy

Utilizing clips from the feature films “Ali” and “Magnolia,” Dr. Tobin emphasizes the importance of regret in adult development. When pursued in psychotherapy, regrets a patient experiences serve as a bridge into vital aspects of emotional development, mourning, and self-integration. Further, Dr. Tobin introduces the notions of “otherness” and “non-meaning” and characterizes their relevance for personal and existential experience.

Uncertainty, Being Uncertain, and Refusing Uncertainty: Can Therapists’ Ambition in the Era of Evidence-Based Practice Be Counterproductive?

This paper explores the important role of uncertainty in the clinical psychotherapy process. It argues that the field of clinical psychology is now prioritizing problem-solving, conviction, and analytic conclusions to the present generation of students in training at the expense of collaborative discovery between patient and clinician.

A Therapy Hour: Revisiting Winnicott’s Notion of “Object Usage”

In this talk, Dr. Tobin applies the fundamental constructs of D.W. Winnicott’s theorizing including “going on being” and the distinction between “object relatedness” and “object usage” to a clinical patient. The therapy hour selected features the therapist’s and patient’s complex negotiation of and resistance to aspects transitional junctures of the interpersonal space.

One Way Out of Enactment: The Patient’s Differentiation from the Therapist

In his important work “Partners in Thought: Working with Unformulated Experience, Dissociation, and Enactment” (2010), Donnel Stern posits, “All experience is subjective, the analyst’s as well as the patient’s . . . We must now understand that we all continuously, necessarily, and without awareness apply ourselves to the task of selecting one, or several, particular views of another person from among a much larger set of possibilities” (p. 8). For Stern, enactment gradually evolves as each participant in the clinical situation constructs the other more narrowly and rigidly, thus limiting the “freedom” of relatedness and mutual meaning-making. But in any attempt to interrupt, understand, and move beyond the current enactment circumstance, how does the therapist recognize the mistaken components of his subjective construction of the patient and alter that construction to one that is truer, more real? Dr. Tobin’s answer to this question involves an attunement to the patient’s necessary differentiation from the therapist’s own metapsychology, i.e., the therapist’s mind and relatedness. Differentiation relies on the therapist’s capacity to shift from a subjective to an objective stance which is, in essence, the capacity to apprehend disconfirmation in the clinical moment. It also requires that the therapist has done enough to enable the patient to disconfirm.

Finding the “Subversive” in the Persona of the Therapist

In this talk, Dr. Tobin presents a perspective on the psychotherapeutic process that involves a shift from the conventions of typical social reality into a therapeutic space oriented toward self-expression and self-experience. This shift is usually a significant challenge both for the patient and therapist, particularly



therapists-in-training or those early in their careers. The therapeutic couple may collude in an avoidance of deeper levels of the patient's experience and of the therapist's capacity to articulate what he/she observes or feels about the patient. This presentation attempts to conceptualize how the identity of the therapist needs to be altered into a "therapeutic persona" that subverts conventional relational and attachment tendencies in order to liberate the patient's recognition of oneself.

Promoting the Patient's Capacity to Suffer: A Revision of Contemporary Notions of Psychotherapeutic Aim

In this presentation, Dr. Tobin argues that the era of evidence-based treatment has inadvertently placed too much pressure and responsibility on the part of the clinician to "heal" the patient. Symptom reduction and characterological transformation are perspectives on therapeutic transformation that oversimplify the clinical situation. According to Dr. Tobin, a principle focus of psychodynamic treatment is increasing the patient's capacity to contact, tolerate, and represent his or her contributions to experience; learning by suffering denotes a psychological competency in which denial, minimization, and other defensive modes of distortion are replaced by more accurate appraisals of reality.

VI. THE TRAINING AND SUPERVISION OF PSYCHOLOGISTS

Teaching Critical Thinking Skills to Psychology Students: A Novel Method and Case Example

The development of critical thinking (CT) is a widely-assumed learning goal in undergraduate and graduate programs in psychology (Bensley, 1998; Halpern, 1998, 2003). Across a range of psychological disciplines, CT is typically approached from the perspective of analytic reasoning and the scientific method (Yanchar et al., 2008), with attention paid to the logical analysis of data, hypothesis support or refutation, and inference-making. Despite this emphasis on CT, there seems to be a gap between students' descriptive understanding of research methodology (declarative knowledge) and their capacity to implement what they have learned in order to critically appraise a psychology literature (procedural knowledge). In this talk, the co-authors present a novel paper assignment formulated by the second author (J.T.) that is designed to support students' ability to critically evaluate a research literature in psychology. This assignment serves as the final term-paper for a foundational course in the curriculum of a doctoral program (Psy.D.) in clinical psychology.

Specifying the "Critical Thinking" Construct in Clinical Psychology Training: A Proposed Rubric for Evaluating Student Writing Samples and Its Potential Heuristic Value

Critical thinking is a complex multidimensional construct whose presence in academic and training curriculums in psychology has largely been limited to scientific courses on research methodology that focus on the logical analysis of data, hypothesis support/refutation and inference-making. Yet the CT competencies required to function as a clinical psychologist expand beyond the analytic and inferential skills pertinent to the scientific method. Graduate training in clinical psychology has been criticized for not cultivating in students a more refined and contextualized set of CT skills that is directly applicable to their future career roles. Specifically, an alternative model of CT that emphasizes specific dispositional and attitudinal components



central to self-experience has been lacking. For the psychotherapist, utilizing self-experience in a reflective and informed manner is a primary meta-cognitive ability that appears highly related to the capacity to form efficacious relationships with clients and to treatment outcome. The current project seeks to conceptualize an alternative model of CT uniquely relevant for clinical psychology training.

Socializing the Psychotherapist-in-Training to an Alternative Form of Relatedness: The Transition from “Being Nice” to “Being Therapeutic” in Clinical Supervision

According to Dr. Tobin, the supervision of psychologists-in-training must facilitate a central transition for the trainee. A major aspect of the trainee is socially-normed attitudes and tendencies which infiltrate the clinical situation and typically impede the development of a distinct “space” or interpersonal field on which psychotherapy relies. Dr. contends that the supervisory situation and the unfolding dynamics between the supervisor and trainee should optimally support the trainee’s capacity to experience him- or herself, and the other, in a more refined mode that liberates the dyad from the psychological and emotional restraints and inhibitions associated with social conventionality.

Clinical Case Formulation & Treatment Planning: A Fact-to-Inference Strategy for Teaching Psychologists in Training

Clinical case formulation and treatment planning are core competencies of clinical psychologists and other mental health professionals. Yet there is no clear consensus regarding how to support the development of these skills in formal academic and clinical training. According to Dr. Tobin, the standard approach to supporting the development of these skills is “hierarchical learning,” i.e., the trainee is first taught objective facts (declarative knowledge) and then required to transition to more subjective (inferential) forms of thinking in order to understand the cause and maintenance of the patient’s problems. Dr. Tobin suggests that this approach is flawed on numerous levels. Instead, using a scene from the film “Dead Poets Society,” he argues for the primary need to “subjectify” learning for the clinical trainee. The accomplishment of this initial goal will personalize all subsequent academic and clinical training, thus securing inferential capacities even before object knowledge is fully achieved.

Clinical Psychology Case Formulation and Treatment Planning: A Primer

The aim of this primer is to support the learning of clinical case conceptualization and treatment planning for graduate students in clinical psychology, other trainees in the mental health professions, and early-career psychologists and mental health workers.

The Shift from “Ordinary” to “Extraordinary” Experience in Psychodynamic Supervision

In this paper, presented to Division 39 (Psychoanalysis) at the 2012 APA Conference in Orlando, Florida, Dr. Tobin argues that the trainee and novice clinician may create a therapeutic setting in which the therapist manifests an attitude and demeanor drawn largely from standards forms of interpersonal interaction and the mores constituting typical social discourse. Clinical supervision may also reflect an investment in restricted forms of experience, thus leading to “sterile supervision” characterized by defensive processes and false manifestations. Dr. Tobin argues that the clinical situation is an “extraordinary” social experience that



sacrifices most forms of standard social discourse in order to create an open space in which therapist and patient are unhindered by that which normally is. Supervision, therefore, should be focused on developing in the supervisee a therapeutic persona mobilized by the trainee's experience of new freedoms encountered in supervision.

The “Wounded Healer” or the “Worried Well”? What We Know About Graduate Students in Clinical Psychology

Doctoral programs in clinical psychology consistently struggle with professional competence among their trainees, and numerous studies report significant numbers of expulsions from graduate study based on academic or nonacademic grounds. Widely attributed to Jung (1951), the wounded healer archetype assumes that clinicians, like all persons, have been negatively impacted by their personal histories, traumas, and interpersonal stressors. According to co-authors James Tobin and Anya Oleynik, a key role and responsibility of graduate programs in the helping professions and advanced training sites involves not only a gatekeeping function, but the capacity to identify and remediate students whose own personal challenges may be effectively resolved and transformed into the strengths ascribed to the wounded healer ideal.

True- and False-Self Manifestations in Applications for Clinical Psychology Internships and Post-doctoral Fellowships

Graduate students in clinical psychology who are applying for advanced training at the pre- and postdoctoral levels often erroneously assume that downplaying one's own limitations, treatment failures, and narcissistic injuries is advantageous to their chances of being accepted. This paper demonstrates an alternative point of view that emphasizes the attractiveness of candidates who are able to articulate their struggles, ambivalences, and challenges in their early clinical work with patients.

Improving Writing and Critical Thinking Competence in Psychology: A Primer and Exercise Manual

This manual was composed to support psychology students' ability at the undergraduate and graduate levels to write more effectively in a variety of contexts within academic and applied settings. The primer is not meant to be a comprehensive writing guide, but focuses instead on the core components of scholarly writing, critical thinking, and the formulation and execution of original ideas. The relevance of these competencies for clinical psychology training is emphasized throughout the manual. Exercises are provided to help the instructor and/or student with practice experiences to support the refinement of the ideas and skills presented.

VII. SEXUAL COMPULSIVITY AND ADDICTION

The Association of Group Climate and Working Alliance in Group Psychotherapy with Adult Male Sex Offenders

An emerging body of research suggests that sexual offenders' experience of the group therapy environment likely affects the ultimate impact of treatment. For example, Beech and Fordham (1997) found that sexual offenders' positive perceptions of the group were linked to change on various recidivism factors. In a related study that assessed 12 groups of sexual offenders in the U.K., Beech and Hamilton-Giachritsis



(2005) observed that sex offenders' ratings of group cohesion were associated with reductions in pro-offending attitudes. According to the authors, despite these data it is not yet known how, and to what extent, perceptions of the group therapy climate are related to sexual offenders' views of the working alliance with the group therapist. The current study sought to assess this association across a 24-week period in two outpatient groups of sexual offenders. Sexual offenders' perceptions of group climate were assessed with The Group Climate Questionnaire—Short Form (GCQ-S; MacKenzie, 1983), a self-report instrument designed to obtain perceptions of a group's therapeutic environment on three subscales: engagement, avoidance, and conflict. Perceptions of therapeutic alliance were assessed with The Working Alliance Inventory-Short Version (WAI-S; Horvath, & Greenberg, 1989), a 12-item measure that yields a general alliance score as well as bond, task, and goal component scores. A repeated measures study design was employed to evaluate sexual offenders' perceptions of climate and alliance factors across 4 time points. Overall, results of this study strongly suggest that the therapeutic alliance in clinical work with sexual offenders is a significant catalyst for the unique therapeutic factors inherent in the group therapy modality.

Culture, Norms, and Process in Adult Sex Offender Groups: Getting Reacquainted with the Therapeutic Factors of Groups

Most clinicians who treat adult sex offenders utilize group therapy. However, facilitation of groups for sex offenders is often highly idiosyncratic, with great variance in the content and process of groups, clinicians' views of intervention goals, strategies, and technique, and how the cultural fabric of the group is established. Moreover, clinicians who treat sex offenders typically have expertise in the assessment of risk, relapse prevention, and individual factors that impact the nature and magnitude of aberrant sexual beliefs and tendencies, yet have never had or don't readily recall advanced training in group psychotherapy. To address this issue, this presentation will describe and delineate transtheoretical factors of group psychotherapy, including here-and-now processing, vicarious learning, group-as-a-whole phenomena, and developmental dynamics across the evolution of the group. Attention will be devoted to the relevance of these factors for adult male sex offender groups, with clinical case material used to illustrate significant themes.

