
How to Reach Out to a Person Stuck Behind a 'Wall'

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[Intensive short-term dynamic psychotherapy \(ISTDP\)](#), like all [psychotherapy models](#), is a set of ideas and strategies used to form a healing relationship with another human being. Like therapists using other models of therapy,

ISTDP therapists strive to create a relationship in which a person in therapy feels safe and secure.

Experience shows that people need to feel safe in order to experience the [emotions](#) that their symptoms are designed to hide, and that experience of emotions within a secure bond will likely reduce their symptom burden (Davanloo, 1990; Frederickson, 2014; Abbass, 2015).

Sounds simple enough, no?

How ISTDP Therapists Use Attachment to Create Safety

All psychotherapy models are ways of connecting and creating safety, but many assume a willing, motivated person will show up to the first session, which is not always the case. Some people arrive terrified of emotional contact with the therapist. They may come in and, intentionally or unintentionally, do things that interrupt their therapy goals without knowing why. Many therapists get stumped by these situations.

I love learning, teaching, and practicing ISTDP because the model offers an elegant system for reaching out to and supporting people to overcome the [automatically deployed avoidance mechanisms](#) that can defeat therapy. In ISTDP, we create safety by inviting a secure attachment, and then help people overcome the automatic thoughts, feelings, and behaviors that would otherwise create an insecure attachment.

Why People Create Walls and How We Can Invite Them Out to Play Again

Those of us who set out to create healing relationships, in therapy and elsewhere, quickly become aware of the many barriers people erect to keep love and concern from others out. We learn about the many rationalizations and self-recriminations that buttress people’s interpersonal walls. We understand that for many people the wall was once a survival mechanism, but we also see how it hurts them now. This presents a challenge: How do we create safety and security with someone who won’t let us in? How can we heal a heart if we can’t get close enough to see it?

We understand that for many people the wall was once a survival mechanism, but we also see how it hurts them now. This presents a challenge: How do we create safety and security with someone who won’t let us in? How can we heal a heart if we can’t get close enough to see it?When we reach out to meet a person and instead we meet a wall, therapists and non-therapists alike have a variety of reactions. We might feel [angry](#) toward the person

we reached out to so lovingly. We might act out that anger and turn it into efforts to control or cajole. We might pretend the walls are not there and carry on a chronically disappointing pseudo-relationship with whatever parts of the person are not walled off. Often, we transiently forget our love, feel only our anger, and become harsh. We might even respond with our own walls.

In [psychoanalytic](#) thinking, we call the above reactions “enactments” (Sandler, 1976; Chused, 1991). In other words, we start acting out the relationship that the wall invites us to have, rather than the healing relationship that the person behind the wall needs from us. We end up relating to the character armor (Reich, 1945) or “resistance” rather than the wounded person who is stuck underneath. For therapists, the trick is learning how to step out of or around the enactment and reach out to the person behind the walls.

ISTDP therapists are trained to try to channel our mixed feelings of love and anger into communication. In this case, we talk about the wall with phrases like:

- “Do you notice how when I asked how you were feeling, you started to avoid my eyes and withdraw into your thoughts?”
- “Do you notice how as I was inviting you to celebrate the successes you shared, you minimized your progress and started to put yourself down?”
- “Do you notice that whereas just a minute ago you were fully on board to face these feelings, now you are digging in your heels and saying you can’t or won’t?”

For ISTDP therapists, our first step in connecting with someone who is pushing us away is to describe the behaviors that make up the wall so they can be seen, considered, and discussed. Like any survival mechanism, our walls are built automatically and often unconsciously. To overcome these automatic barriers to connectedness, people often need help slowing down, self-reflecting, and noticing what is happening.

First, help the person see the wall. Let him or her know you see it too. Only then can you start talking about why it’s there and how it’s hurting the person, which may help him or her begin the work of overcoming the wall so you can create a safe, healing space together.

The wall, Davanloo’s (1990) vivid metaphor for the psychoanalyst’s “transference resistance,” will push many friends away, and often deflect any otherwise helpful therapeutic intervention. The wall is often a major driver of symptoms and presenting problems. By talking about the wall in ISTDP, we can sidestep the “enactment” and its destructive potential, and make a safe space where a new kind of relationship—a healing relationship—can take root.