

Dr Trisha Stratford - Tuesday 1 March 2016

Changes on neurophysiological level during therapy

Reviewed by Juliana Triml

Trisha's interest and, as I understand, her PhD thesis is in levels of consciousness and how it impacts on the therapeutic process. Her PhD presentation also showed how changes in different parts of the brain occur, measured before and after the therapy session.

At present, the concept of neuroplasticity is spoken about often (Dr N. Doidge *The Brain that changes itself*, 2015). Trisha conducted about 120 hours of session interviews and through her analysis identified which parts of the brain actually changed. This was done by using electrodes to measure brainwaves and other equipment at the laboratory setting, at the same time checking the blood pressure and levels of fatigue.

Most importantly, for any neurological changes to occur, the usual process of rapport needs to be established, usually it takes 3 sessions for both Therapist and Client to rate that session in a similar manner. When the therapeutic alliance is high, physical and psychological and spiritual connections occur. However, this can fluctuate from one session to another. Therapeutic Alliance accounts for about 40% of therapeutic outcomes, then therapeutic relationship (including client's readiness to commitment and client-therapist fit) accounts for 30%; only 30% or so depends on the techniques and client factors.

Neuroscience of Insight - Many insights occur in a different state of consciousness. As Einstein stated "no problem can be solved from the same state of consciousness that created it". This means that certain therapeutic techniques need to be put in place to allow the client to reach Theta state of consciousness, when it becomes much easier to focus inwards and to have some AHAA moments and insights.

Trisha gave many examples about how certain parts of the brain are influenced and changed during therapeutic process of learning, regardless the modality type but focusing on the therapeutic alliance. Basically, Trisha's research provided evidence about brain neuroplasticity through the process of learning new ways via psychotherapy, thoughts or attitudes.

While medications also adapt brain's activity and its neurochemicals, leading to decreased brain reactivity (such as anxiety), medications do not have the ability to assist new learning to occur and to change the brain in a more beneficial ways (my emphasis). This presentation certainly challenged some of us therapists, as became apparent by questions raised. It was inspiring and inviting us to be mindful about assessing how the therapy is going, evaluating various aspects.