

Ann - Hey, Steve, it's so good to have you back on the show.

Steve - Oh, thank you. And it's such a pleasure to be back.

Ann - So start off you and I, Sue did one of one of my most favorite episodes actually on shame. So some people are gonna be familiar with you. Oh, thank you. So let's jump in and tell me, tell us a little bit about yourself for those that haven't met you yet. Sure.

Steve - I'm a clinical psychologist in Austin, Texas. I'm an associate clinical professor at the university of Texas at Austin. And I think my claim to fame is having developed a method called therapeutic assessment that uses psychological assessment as a brief intervention with clients. And we have a center for therapeutic assessment at Austin, Texas. There's one in Milan, Italy, and one in Tokyo, Japan. And there are groups in other places around the world. It's a method that's caught on and so I spend my time now mainly thinking and talking and doing research and writing and practicing therapeutic assessment.

Ann - So I know today isn't going to be focused on therapeutic access therapeutic assessment, but just so as we refer to it, it's such an amazing tool and process. So could you just give us maybe a short synopsis of what therapeutic assessment is?

Steve - Yeah, it's a client centered brief intervention. Clients are referred either by themselves or by another mental health professional and with, and it turns out it's really good for people with persistent problems in living that they haven't been able to shift in other ways. And we start the process by asking people what it is they want learn about themselves and what questions they have about themselves. And then we choose psychological tests, validated psychological tests that will help give us information that are relevant to their questions. And then we administer those tests. And we work with the client during the testing sessions to look at their own test responses, of collaborate with us in interpreting them, and discussing them. We have all our scores and our research on what the scores mean, but we really talk with the person about how that fits in their life and how it's relevant to their assessment questions. And then at the end, we review everything with the client and we co-construct answers to their questions. We write it all down in a letter in language that people can understand and then we give it to them. And then they come back for a follow up session, 6, to 8 weeks later, and continue to talking about it. And the research shows that it that TA can really produce symptom change and it increases self-esteem and removes shame. And that it also helps people if they're doing other treatments, they're, they' their their sort of their therapeutic Alliance with subsequent therapist increases. They're more focused on what they want. And so it's like a booster effect for other treatments. And they, , we're still doing research on what it is about TA that works, but it seems that we help clients develop a different core narrative than they come in with one that is more accurate and coherent and compassionate and useful. And if you can shift that core narrative for clients, then they go out into the world with a different point of view about the world, and then they interact with people and get new information. And so it the research shows that the effects of the therapeutic assessment continue to grow after the assessment is done. And relevant to today I got interested in epistemic trust, which is what we're gonna talk about today because I've come to believe that maybe one of the most potent underlying therapeutic variables that we're addressing through therapeutic assessment. And so it explains a lot of research findings about TA that we had trouble. We knew it worked, and we knew it worked well, but we had trouble really coming up with a as coherent a theory as I would've liked about how that happens. And so when I happened upon this literature on epistemic trust, I got very excited. I bet when you're doing something that's so impactful and you can feel it, but you're like, why is it? And we even interview clients, like, why do you think this worked? And they tell us what they can. But, you know. You emphasize the collaborative nature of it, right? That from the very beginning that they're the ones developing the questions about themselves. They have an openness to themselves of what do I want to know about myself? And that's where the whole process starts. It's very different than traditional assessment, of course, where you're often just sent by somebody, you walk in a room, take tests, maybe you get feedback at the end, but you're really not brought along through the process.

Ann - So that's so funny, Steve, as you even mentioned the, the initial process. And I had my own visualization of walking in yeah. to a traditional therapeutic assessment, which I've done a lot of I've done a lot of assessments and I think about it from the client's perspective. Traditional psychological assessment, right? Yeah. Yeah, that you're about to be analyzed. You're about to be looked at you're about to be dissected if you will. Yeah. And even my whole body,

as we were talking, I could feel my own anxiety of what that would be like to go, what are they looking for? What's going on? And, to be, I always talk about this with couples to, to be observed by somebody, and analyzed by somebody, it brings out our most anxious worst selves. Don't you think? Sometimes?

Steve - And I did research earlier in my career about how people felt about traditional psychological assessment that I experienced it, and God, it was awful. People had really bad experiences, including being told things about themselves that they either didn't think were true or were true, but they weren't ready to hear. And that were told in a shocking or shaming way or getting some psychological report at the end that they can't even make sense of and combing through it and nobody to talk to about it. Yeah. So that we aspire to be very different from that kind of approach.

Ann - Like I think I might have to go go back and listen to our episode on shame because, as you were speaking, I'm thinking about some of the different assessments I've done. I used to work for the juvenile justice system. Yeah. And we would do, really deep assessments on these individuals and just to think how powerfully difficult that must have been and the way that information was translated. And I'm like, ah, if I only knew then what I know now. And, I think psychologists got out of touch with what it's like to be a client in an assessment. We all have some core narrative about ourselves in the world that we've developed that makes sense of the world and holds us together.

Steve - And, and If somebody's gonna try to change that in a short period of time, it's a very emotional process. Oh, I remember, we do TA with not only adults, but with parents and children and adolescents and children and with couples and, talking to parents about, this little bundle of energy that you always thought of as your Gusto girl. And we're so happy about whatever actually has ADHD, that's a, that's not a simple thing for parents. No. How overwhelming.

Ann - And so some of your work and you recently wrote I guess a couple of years ago, you wrote an article and I know you've continued to write and study and speak on the idea of the importance, as you mentioned that maybe epistemic trust in the building of it in the therapeutic alliance. Yes. Is at the core to the deep change you're seeing -the deep effectiveness. So that is true. Let's talk about that today. I really want our listeners to be able to understand why trust is so much at the core of so much, right? Yeah. But you refer to it as epistemic trust. So talk to us about that. What exactly do you mean by epistemic trust?

Steve - I have to refer to my colleagues Peter Fonagy and the people who work with him and Dan Sperber, Georgie Gergely. These are people who started writing from the point of view of evolutionary psychology about this concept of epistemic trust and epistemic trust is trust in the relevance and accuracy of interpersonally transmitted information. So if I tell you something and you have epistemic trust with me, then you're likely to believe it and incorporate it and take it in and use it. And this really is what any of us who are doing psychotherapy are trying to have happen with our clients. They have a particular way of thinking about themselves and we're trying to help them think about things a little bit differently. Objections, People call this the internal working model, and so you want to create a process where that goes very well and you help the client take in new information and believe it. And so epistemic trust is a huge factor in psychotherapy. And then what Fonagy again, and his colleagues have written a lot about is that many of the clients that come to see us have difficulties with epistemic trust. He talks about two types of difficulties. They might be in a state of epistemic hyper vigilance, where they can't take in new information and they block it and they're very skeptical and they just won't listen to it. And they just, it's a it's a rigid place where you can't modify your internal working models or the other problem you sometimes see is epistemic hypovigilance, where clients take in information without even testing or thinking. Is it rational? Does it make sense? Does this person who's telling it to me, have my best interest in mind or are they just trying to sell me a used car? This kinda stuff. And that a lot of the clients we see you'll see both types of errors. People who won't take in information from one source, but then they take information from other sources and you go now, why did you believe that guy? But not that guy? And in therapeutic, cuz some, We call this the broken trust meter and a lot of clients who come to us have this issue and then it gets really hard to work with them in psychotherapy. These are the clients who are considered the toughest clients because you can't modify their internal working models. So it's a very relevant variable for all kinds of psychology work.

Ann - And on this podcast, we talk a great deal about security and insecurity in secure attachment. And do you see this related as we talk about the idea of over trusting others, which would be an example of under trusting yourself,

I'm gonna trust anybody. I'm not gonna listen to myself versus self versus, I don't trust anybody in the world. Or versus I trust myself more than anybody. Do you see that related to attachment?

Steve - Exactly. So again, this evolutionary theory it's called the theory of natural pedagogy which Dan Sperber and other people have written about. It's really brilliant about this. It says, so you're thrown into the world. There's predators out there who are gonna want to eat you and give you misinformation. And there's other people who really care about you and want you to grow and survive. How do you tell the difference about whom to trust and whom not to trust? The most reliable indicator is a secure attachment figure because that person is invested in your survival. Both, Evolutionarily, it's your parent or your tribe member, or tribe members are auxiliary attachment figures. They want you to grow. Be better and be able to help them in the community, and survive. And you're born with that instinct? You're born with this, you're born with this instinct, right. Yeah. And so the people with the epistemic, hypervigilance and hypovigilance, presumably, and it's the research is really coming, had people in attachment figure roles who were not trustworthy, who didn't have their best interest in mind, who didn't protect them, who misled them, who had their own narcissistic interests at the forefront, rather than trying to do what was best for them. But because you're biologically prepared to trust your attachment figures, it goes all kerflew. If you had to trust people who were untrustworthy, cause you couldn't go to bed at night or get up in the morning and be okay without that kind of vision of them as people who are helping you, if you had to do that, then this whole system goes kerflew.

Ann - So that makes a lot of sense and even if they do have your best interests at heart, or they believe they do, they may themselves have so much going on inside with their own inability to trust themselves that they can't give off a trustworthy feeling. Like. So just it's they could very deeply care about your best interest almost over and above their own at times, but it still doesn't build a sense of, I can trust you to have my best interest, right?

Steve - Secure attachment figures, not only care about you and wanna help you, but they also set limits on you. And they find that place where helping you would damage me and they're able to draw a line there. And so I think clients are testing us all the time, both to find out whether they can trust us, but whether also we can hold boundaries with them. And if you wanna move into an auxiliary attachment figure position with them, you have to be able to do that. Past those little tests that are happening all the time, I love control mastery theory, which I don't know if you've talked about on the show, the belief can you. Clients are, testing us all the time, hoping we'll pass these tests, that come from experiences they've had earlier. And they'll bring up things to see if we'll shame them. And when we don't shame them, we pass the test. But they'll also see if they can get us to sell ourselves down the river. And when we say, gosh, no, I'm sorry, this is my limit. Then they go, oh okay. So great. I really can't trust this person.

Ann - So their whole body knows their whole you, if you could see Steve, you would see his body just relaxed. And so yeah, what you're saying is we need both, right? We need this healthy. I see you. I'm there for you. I'm going to be willing to hear what you need and not shame you. And I have a sense of self I'm not gonna lose myself in you. So if you push too far, I'm gonna hold a boundary and you can even, that's a good attachment figure. That's a good attachment figure. Right? So therapist, no. And I think there's been more emphasis in attachment on the caring, giving, responding part then on the boundary setting sometimes.

Steve - And therapists get really confused about it. I A woman came to consult with me 20 years ago and she asked what she should do because one of her clients had moved in under her house under the porch. And she was very distressed by that. And what should she do? And I said have you thought of calling the police or telling your client, she has to move? Oh no, I couldn't do that. She'd be wounded by it and whatever. So that's an example of the not holding the boundary appropriately so well. And it's an example of not holding trust in others. Trust that person isn't trustworthy. Yes. Yeah, because if you can't set your own boundary then our body knows that we can take advantage of you or somebody else can. So all of a sudden that idea of this is a trustworthy relationship, right? This is comes into question. And notice it's an empathic error that wasn't actually good for the client to permit that. So it's the client's own attachment system being unable to really think about what's good for the client. So yeah, back to Fonagy what he talks about is, so atta attachment figures are the people you should have epistemic trust with and people who are in this auxiliary attachment figure role who prove themselves to be trustworthy. And the mechanism through which people show you that they're a secure attachment figure is mentalization.

Which I think you've talked about on the show. So seeing, holding your mind in mind, I love that definition of mentalization. Me too. And truly being able to get in the client's shoes, understand what the client needs, and being able to show the client that they're a unique individual who is separate from yourself, you have your needs separate from their needs, and you're committed to holding the client in mind. Good mentalizers are the people who we should trust but what happens is if you've had these early attachment experiences that are so disruptive, then you don't know what cues to pay attention to? You start paying attention to cues that really aren't that important. So I'll believe somebody because he's of the same political party of me or the same race, or cause he something that hits something, instead of saying, wait, now is this thing that he's saying is this way he's acting? Is he showing he actually has my best interests in mind or not? So they make these mistakes and then the, and then it perpetuates that epistemic hypervigilance, cause in the end it doesn't work out.

Ann - So because you start to trust somebody who's untrustworthy. And then it starts to prove your theory. Yeah. That you and you might be attracted to people that are based on your own internal working model. And that that might oversell one position and it's oh, this sounds familiar.

Steve - And then it gets the letdown gets repeated over and over. Exactly. And the, the optimal version is clients have epistemic trust and mistrust well balanced. So if they meet somebody new and the person's talking to them, they're in their mind consciously or unconsciously thinking, okay, now this thing that he just said now, is that for him? Or is it for me? Or, let me figure out, oh no, that one's about something he wants from me. And and I, oh, this guy actually is extending himself. Oh look, he did something that might not be exactly in his best interest, but he thinks is good for me. Oh okay. This is a person I can start to rely on. And the word in this literature is the person becomes a deferential source. We want to mentalize our clients pass enough of these attachment tests, become an auxiliary secure attachment figure and become a deferential source. And then they're prone to believe and take in information that we give them. And in order to do that, this whole process is really actually in the mentalization process. Being able to really put ourselves in their shoes to really be able to mentalize them. Yep. It isn't how do I work really hard to get you to trust me? It's actually putting yourself in a state of trustworthiness and this is what we can do in any of our relationship.

Ann - We're speaking about a therapeutic relationship, but this is so important in any of our relationships to learn the skill of mentalizing, to be able to go in one, stay in one self, but also be able to mentalize the experience and be in the shoes of the other to be able to have that kind of reflective functioning about being able to hold my own needs, but also being able to feel and see yours.

Steve - Exactly. And just a little self-promotion, that's the name of, one of my early books on therapeutic assessment is "In Our Client's Shoes". Ah, that's perfect. Uh, right. And so that's the goal. And then my, yeah, what I, what we believe is these psychological tests actually help us get in the client shoes, their empathy magnifying glasses that allow us to see what the client's internal working model is, where it's off and give us sort of a roadmap of if I wanna help this person have a different perception of themselves. How do I present the information little by little? What's gonna be most threatening? Etc. And then that's how the tests really help. So yeah, that makes a lot of sense. And the idea of asking them what they want to know. We talked about internal working model. Yep. I guess you get a real reflection of matching where they are not matching where they are at the moment and what they really wanna know, so that the information you're giving them, they are ready.

Ann - We laugh on this podcast a lot because one of my favorite concepts was curiosity. And so Sue always laughs. If I can get the word curiosity into any kind of conversation, I tend to do it. Yep. And so the core values of therapeutic assessment is curiosity. So if you could activate their cur- if you match their curiosity, it's a sign that their internal working model is open, right? Yeah. To oh, okay. Now this is what I wanna know about me. I guess you learn so much about where they are. And then you're able to match where they are rather than I guess the therapeutic - what's the just I know I can fail at that sometimes where I want the client to be right. Versus where they are like, and I so want them to be that I get caught up in my own need for my client, cause I can see the vision, but that's not where they are and if I rush it, I think I instead I induce anxiety and shame.

Steve - And it makes neurobiologic sense too, so parents might come in and they're really upset about their child and they say, oh, he does this and he's terrible. And blah, blah, blah, whatever. And I just listen and whatever. And then

after a while I say, great, what's your question about that? What kind of question do you wanna have answered about that for the assessment? And then they might go on and I, oh, but yeah- go on- and they're very emotional and I just listen, I'm really empathic. And then I go and what do you wanna know about that? What question could we come up with that would be helpful to, and they go why does he do that? And how do we get him to stop? And at that point, of psychophysiological change in the client, cause curiosity has come online. Oh wow. And we know from our neurobiology literature, the exploratory system can't be activated when the attachment system is aroused. If you're little child is scared that they're gonna be safe, they're not gonna go off and play with the toys in the corner of the room. Absolutely. So if we want the exploratory system to be engaged, which is a key to taking in new information, then first we really have to be a good listener and a good mentalizer for the client. And then they calm down and then these questions they come up with are open doors to which you can give new information and it will be more likely to go in. I love that I had parents years ago, who came in and their do their complaints from the teacher that their seven year old daughter was looking out the window a lot in class and didn't seem to pay attention. And they, their question for the assessment was, does she have ADH D and if not, what's causing her to be so distractable? So we started testing her and we found out she was actually having childhood psychosis. So she started talking to me about the people outside the window, the elves and the other animals that she was talking to in her mind. And it wasn't a complete surprise to me because the mother had schizophrenia in her family. She had a brother and an uncle who had been schizophrenic, but the parents weren't at all prepared for this. But because they had asked this question, is it ADH D? And if not, what is it? Which was an essential- and if not, what is it, right? Is it ADHD? It's yes, no. Versus what is it? The deeper curiosity of what could be happening, right? Yeah. So gave the window to begin working with them. And I had videotaped my conversation with the girl about the the fantasy figure she was talking to with her mind, et cetera. And I showed it to them and then they came to the understanding of what it was without me having to like, bring in something and beat them with it.

Ann - Oh, wow. That's really powerful. That's really powerful. Yeah. So like the act of the curiosity and I guess as a therapist, we have to find the curiosity- not the knowing. We can so easily be in the think we're in the knowing as a therapist, rather than being op able to do mind sight and to open our idea of the curiosity about their process and what they're going through to help them find their own curiosity.

Steve - And I agree with you. In illicit in curiosity, and I think curiosity's infectious. If we can bring our curiosity, if we can, the client can have this feeling like we're sitting on the edge of our chair, working hard with our mind to try to understand their experience and thinking carefully and asking questions about, and really trying to get in their shoes then that creates an open door for epistemic trust. And I think of that so often, and working with couples and the idea like you were mentioning the complaints, we tend to complaint the complaint, and right. We can feel that's our first observation that something's off. It tells our, we feel our system- something's off. We can tell. So we're complaining about it. And it's so interesting to help people, but what is it that you are needing? What is it that you are wanting or always like how, and to get the curiosity, how is this impacting you? And to be able to get somebody to talk about that, even with the other person, rather than just complain, it opens up that sense of self curiosity and other. And why are they doing this? Why do you think this is a dynamic in your relationship? Exactly. When we do a couple's TAs, we get at the beginning, the couple poses questions about themselves and about the couple relationship. We don't, The classic couple comes in he's such a, and she's such a, and then we don't let, they can't pose those types of questions, but they can say when my partner does this. Why do I have such a immediate negative reaction to it? And what could I do instead? Or how can the two of us better agree upon child rearing, or whatever it is they're having conflict about. And so that again, creates an openness that modifying the internal working model. My husband's doing this because he's a bad person and selfish instead of- oh, maybe he's had some trauma too. And when I do this, he gets activated and then he gets rigid and I could react a different way and he'll be more flexible so. Yeah the bad person is because I know this, you're in a state of knowing versus a state of curiosity. Yeah. So in thinking about how, just I'm convinced how important epistemic trust is building it and being able to stay in tune with it. Yep. Two, two questions come to mind. One is as listeners out there, how would we know to recognize whether we have just in our own internal working model, a sense of maybe you mentioned maybe hypervigilant trust or hypovigilant, what are the signs that we might be able to recognize? Maybe I don't have the deepest level of secure epistemic trustes I think. Yeah again in consistent, we have this idea of the broken trust meter and clients often relate to it. So I'll say to them and I might see this on a psychological test. I might say, I wonder if, sometimes you have trouble knowing whom to trust in whom not to trust, and you might have a pattern in your life. Tell me if it's true, where sometimes you tend to put up a guard and not let people in and not trust them. And then other times you

drop your guard and you trust people too easily. And what we often see is people go back and forth between kind getting hurt going, why did I believe that person? He really sold me a used car. How could I believe that now I can see that I did it and then go back into a place of I'm gonna be very skeptical and not let anybody in. And then after a while, your desire for connection and your affiliative biology makes you want to connect again. So then you drop the guard again and you go back and forth between these two poles. And sometimes people really get that and identify with that. And, I myself used to have that problem. I had a pretty, traumatic, early childhood and I just had a string of incidents where I was just getting taken advantage of by people. Oh, interesting. And finally, one day I just said, this has got to stop. I have to get better at this. What's the common denominator here? I, My therapist, he said, I've been waiting.

Ann - What's the process then? What is the process once you recognize, I can really see these patterns of either over trusting individuals and them being taken advantage of, or I guess also under trusting. I think sometimes the example of under trusting where you so trust yourself is harder to recognize. Like it's just that the world is incompetent. The world is incompetent and I actually trust myself a lot. I don't have trust issues because I know, I listen, I do research. And so sometimes that end is a really harder one to recognize. Isn't it? When you trust, you believe in yourself so much that you don't trust the world, and you think your expertise is it. And so you're a closed system, but you feel like for a good reason, what's your thoughts?

Steve - Yeah. I think you're describing paranoia. Yeah. Yeah. And there's well, on some level let's do talk about paranoia.

Ann - Yeah. But I think I'm also sometimes just talking about narcissism too. Okay. Which can, can have flavors of the same thing in a way, but yeah. I think paranoia or somewhere where you can't seem to, you seem to over trust yourself and under trust the environment.

Steve- Okay. I'll say three things. So first Fonagy talks about the importance of psychotherapy and healing these kinds of things. And there's this wonderful thing that he talks about the three virtuous cycles, which I really love. He says so first the client comes in, they don't really trust you they're there and your job is to mentalize them hold them in mind. Show them that you have their best interest in mind, and also you can set boundaries. And this is the process through which they begin to put, see you as a differential source and take in and modify their working models. And he says, so the first processes, the client learning. You are a trustworthy person and they can begin to trust you and they'll test you in all kinds of ways. And then you pass that. So then he says, there's a second virtuous process where this begins to restore their capacity because they've had an experience. If again, their early attachment figures, weren't trustworthy, they had to trust untrustworthy people. They begin to have an experience of what it's like to be in deep relationship with a truly trustworthy person. And this begins to heal their own capacity for epistemic trust and knowing what cues to pay attention to the trust meter begins to be calibrated. And during this phase of the therapy, they might even start using you. Like they'll come in and say, so I wanted to tell you about this new guy I just started dating. And I'm not really sure whether he's a good guy or not. Can I tell you a bunch of things? And the therapist listens very carefully and says -that one would make me be on alert too. And they go -oh okay, I wasn't sure whether that was right or not. And you go, yeah, no, it would be a little skeptical. I'm not saying you should just never see 'em again, but that's one to keep in mind. So they start recalibrating their capacity for epistemic trust and mistrust both through their experience. And then by using you as a consultant to know when to trust and distrust. Fonagy says after that healing process takes place, the most important psycho place of psychotherapy is the client leaves your office with this new capacity to be able to tell when to trust and distrust and who to take information from, and then they begin to interact in the social world and exercise this. And then they can ongoingly continue to update their working models in different environments. Meet new people, go to a new job, be able to figure this out. And he says, this is like the most important healing process takes place after the therapy is done.

Ann - Isn't that just lovely? That is so lovely when they can actually take what's inside the shift that they've made in their own process of their working model of themselves and of other people, you are a trustworthy person. How you related to me gives me this sense of, oh, I can trust my own meter. I can use this meter instead of, I need to keep returning to, what do you think?

Steve - What do you think? What do you think this person? You're like okay no- starting to learn the signs of what. when somebody really has my best interest at heart or when somebody is able to reflect and see me and hold themselves, not give up too much of themselves. Exactly. And our clients initially are not able really to trust their guts about who to trust and not trust because the gut doesn't work anymore because of these traumatic, early attachment experiences. But after therapy works for a while, then they can just go, something doesn't feel right. So I'm gonna be a little skeptical. And then and we have to honor that, like one of the things I do when I'm doing the assessment, like I might be talking about a test result and the client goes- yeah. so tell me again about this test. Are you sure it's validated? And I'll go, oh, I'm so glad to see your skepticism. Yes, boy, I think that's so healthy because there's a bunch of tests from magazines and whatever that have no scientific validity whatsoever. So please hold onto that skepticism and then listen to what I say and see if it makes sense to you. So I don't try to talk the client out of their skepticism, their epistemic mistrust is a very healthy variable, and I think some younger therapists will say, no, you can trust me really. Instead of honoring that kind of mistrust. So I love that healthy skepticism and honoring it and helping people voice it.

Ann - And the other thing you're doing is that you aren't getting challenged by it, especially if we are raised in an environment where to question authority or to question somebody has been shamed or knocked out of you or that this idea that I can go, wait, Steve, you just said that, tell me about that test or- I don't know, say more. And that exactly that, That we as individuals and, we keep talking about the therapeutic relationship, which is an essential part of all of this, but we're talking about other relationships. Yeah. The ability to be able to receive skepticism. Yeah. Without it immediately being a threat to our own internal working model.

Steve - Yep. And to be able to send the message. Oh, you can question me and I can hold that. I can hold myself and go. No, that's a good, that's good. That's a good thought of skepticism. Let's get back to that. Instead of I'm gonna shame you okay, if you're gonna doubt. Me, you, It makes me think of this one situation that was just talking about with a few people and that's of the individual that may sometimes feel themselves-

Ann - If you come to me for advice this is an expert or a consultant and you come to for me to advice and I give you advice, and then you question me- why are you coming to me? Why come to ?

Steve - Exactly. And really that's a non mentalizing reaction, don't you think? Oh, really? Absolutely. Really rarely. You're not really in the client's shoes. And this reminds me there's some of the infant developmental research on epidemic trust is so cute. Like they have an experiment they've done with securely attached infants and mothers. And when there isn't a secure attachment and the experiment is there are these stuffed animals that are like Two thirds horse, and one third cow, or oh, I know what you, two thirds pig and one third dog, and then they have the mother present it to the toddler, who's two/ three years old and she'll either give the name that goes with the two thirds part or the name that goes with the one third part. So she'll hand the two thirds cow, one third horse to the infant and say, this is a horse- when two thirds of it is cow. And the securely attached infants exercise epistemic mistrust with the mother and they go, no, it isn't , it's a cow. And then they laugh together, but the insecurely attached infants don't know when to distrust their mother.

Ann - Oh, interesting. When she's giving them wrong information. Oh I, and I can't re read this, but I can't remember that. How do they distinguish how does an insecure more avoidantly connected child respond different from the more preoccupied? Do you know? I don't remember that from the that's- I would be, I'm gonna have to, I'm gonna have to look into that, but insecure in general, don't know when to not trust the mother's giving them something that's two thirds, a horse saying it's a cow. And you're and I guess it's also, am I safe enough to disagree? Like I could imagine certain people with their parents as you grow up, if your dad or mom said, that's a horse and you said, no, it's a cow. That that that discussion right there becomes really threatening.

Steve - Yeah, exactly. So secure attachment is a protective variable in terms of healthy epistemic trust and mistrust. And when you don't have secure attachment, that's when this starts to go all or fluid. And then it's our job as therapist to be empathic to this. And again, when a client disagrees with me about a test finding, first of all, I might be wrong and I invite the client. I'm gonna tell you something, feel free to agree, feel free to disagree. These tests are not perfect, whatever but if I'm pretty sure it's right. And the client disagrees with me I think, there's a part of them trying not to get eaten by a predator here. This is not personal to me. This is a neurobiologic system from the B that's

evolutionally built in, that's gone a little bit curfew. And so my job is to go back and think, have I passed the test? Have I truly been mentalizing the client? What's a better way that I could have talked about this that might have scaffolded this understanding rather than me going, giving the information all in one piece. How do I collaborate with the client to test out whether this is right? So that the client comes to the understanding rather than me necessarily trying to shove it down their throats.

Ann - Yeah. Oh, I love that. Or rather than just saying, oh, they're just defensive. They don't like judging the judging. the client is misreading rather than - the client is resistant.

Steve - Oh, okay. Yes. We don't even use that word in TA. We just don't even use that word. That's such a painful idea though. When I, when. When you're just classified as resistant when you're really having some natural questioning, and it's healthy. Yeah. No, I like complexity theory and chaos theory, and they talk about driving forces and restraining forces and complex systems and the restraining forces, the resistance is about holding the system together so it doesn't disintegrate. So if the client's saying no, that informa they're not in a place to take in that piece of information right now, or I've delivered it in a way that doesn't fit.

Ann - Yeah. And if you're presenting a piece of information, I imagine that they're not ready to receive, right? Yeah. If their system and the nervous system is not ready and it's too threatening, to what they see in their internal working model for them to really take that in, I imagine could be overwhelming, could be disintegrated they'd fall apart. Totally counterproductive. Yeah, exactly. Exactly.

Steve - And again, when I'm training therapists and people in for therapeutic assessment. So I really try to give them this sense of what a mentalizing figure a differential source really looks like. There's a videotape that I show in my workshop and epistemic trust of this teacher in who was hired to go into this failing classroom in the south. This was a video that was on the news some years ago, and what he did was he invited all the students as they came in the classroom each day to develop a little individualized, personalized dance step, stop their feet twice, turned around and whatever. And then he learned that you, the video is him standing at the classroom where these 25 students come in and he memorized this dance step for every one of these students as they came in, and he would do it with them and then they would go in the classroom and then the next one would come up and he would remember that dance step and do it. And then and then what they, to me, this is a beautiful example of mentalization. I see you as a unique individual each with your own dance step, and I wanna relate to you through your dance step and I'm gonna memorize. You're important enough to me that I'm gonna learn this and show you that I'm there with you in a moment, the end of the semester, all the students were passing. Wow. And I'm sure he did other things in the classroom besides this. But that was his whole attitude, which I think and when the client comes in and sits down in the chair, they should feel this interest. This limit limit setting, caring- this balance, this trying to get in their shoes. This should be the experience every time. And that's gonna move us into a place with a client where we create a relationship where they can begin to heal epistemic trust. So beautifully said it's not dialed in. No, in fact, what, so as poetic as that is now it's gonna, it's bringing up my sort of neuro nerd brain. Yeah. As you talk about this, it's okay, can we jump in? What is it about the idea of deeply being seen those kids were felt. When they did their step and this- they felt they felt- felt right. And when, so often people that struggle with connection will talk about, he doesn't feel me or she doesn't see me as connected. She doesn't think that we're intimate. I don't know what it means. I don't know what it means. Like I'm here. I work, and it's this feeling that is so hard to talk about when we're talking about intimacy. And that is the feeling of being felt by your teacher, felt by your mother, felt by your partner, felt by your therapist and how important that, that experience is that it could lead to such monumental change that you're talking about in the classroom.

Ann - Exactly. And we know it makes changes in the brain don't we? Yeah. So tell us, talk about that. What do you feel about the feeling of felt talk from a neurobiological perspective?

Steve - You might know more about this than I do, but what I think the research shows- so for example, children with secure attachment experiences have more connective fibers going from left frontal to the emotion centers of the brain. Daniel Siegel does that thing with his hands. If you've had good attachment figures that this part of the brain is connected to this. So when this gets excited, you don't flip your lid, so I think these, and it has to do with our inborn neurobiology of living in tribes, and having to have this kind of mindset with each other.

And I think we're actually changing our clients' brains and they're getting, they're developing their frontal left frontal lobe. They're be able to engage in more self-reflection and their emotion regulation changes and all these things. And I don't know what the neurobiology of the epistemic is. I haven't read about that, but I'm sure there's something that changes about that too well.

Ann - Yeah. And I think you're yeah, I'm sure there's probably so much, we don't know about what happens neurologically in that, but I think it sounds like you're hitting it on a really articulate way and that if our body, -those kids walking in, go back to that example, those kids walking into the school would, they likely have a lot of stress outside of school. They have a stress going in, they think they're not gonna be able to learn. So they might have tuned out that part, where it stays less in their prefrontal cord lessen the learning centers of their brain, because they're under stress. And like you said, like that sense of knowing that sense of being seen, isn't it just sending your whole body. You can even, I do that with you when you talk, don't you guys listeners out there as you listen to Steve talk, your whole body just goes, ah, I can trust him. It's true. but it, What happens in that is it just, it opens the body up to be able to relax and have access, right? Cuz we're fully in a stress mode.

Steve - So that feeling of being seen it really does from a, it's a sense of, I can trust this tribe. I can trust this person. And where built with an inborn longing to be seen. We really? Yeah. Yeah. Yeah. And it's so powerful. I have a powerful experience I've written about when I'm, I was in my graduate training. We were in a psychopathology course and we would learn about a certain disorder and then we would be taken to university of Minnesota hospital. And the professor of the course would interview a patient in the hospital who was suffering from that kind of disorder. And I remember one week when we were learning about depression there was a man in his sixties who was in the hospital and an absolute, severe major depression, almost catatonic, the nursing staff were unable to communicate with him- he was just hunched over. And apparently his wife had died three months earlier, a long marriage, long, good marriage. And then he had gone into this place and eventually he was hospitalized. And. Our professor decides to interview this client who can't talk, who's just hunched over in this catatonic state. And I thought, what is gonna happen here? And this brilliant guy, we come up and he puts his chair next to the client and he says, Mr. Jones, he said, I'm here. I wanted to talk with you about your situation. And if you don't mind, I'm just gonna take your hand here. And then if you can hear me and if this is okay for me to be here, would you just squeeze my hand? And the client squeezed his hand, then he said I know, you're not really able to talk much about what you're experiencing right now. So very respectfully I'm gonna make some guesses and if I get it right, would you squeeze my hand and says, I think you're in a complete state of utter despair because your wife has died and you don't know what is gonna happen to you. The client squeezes here. Susan, I think you must just feel so totally alone and despair, in despair that it just feels like it's not worth living client squeezes. His, He goes on like this, 10 minutes later the client is sitting up talking to us.

Ann - Wow/

Steve- My jaw dropped. I can feel it. I don't know if anybody else out there. I can just feel, as you say, just. He didn't go to his verbal, where he was functioning. He had such mentalization that he was able to be right there and meet them, give him such a felt sense. And there were a couple times he said something, the client didn't squeeze his hand and then he would just regroup and use it to get better. And the client should, it was, And then I thought, I want to learn how to do that. , yes. Yeah. And to think about having somebody. And if you think about states and times you've been there and you felt so alone and you think I can't talk, I can't be there because you imagine needing to be there in the way that society says you need to be, so you just stay alone and you don't reach out. And to imagine somebody being able to reach in where you are meet you rather than- and we long for that. Just that experience can begin to energize us again, bring hope, so that's so beautiful. Yeah. And then relationships, sometimes what makes this hard is the idea that our system being able to have such strength in it and trust that we can be in a relationship with somebody that needs us that way and be there without then losing where we are. We needed our boundaries there too, yeah. We can be there for our partner, be there for our child and not have to explain ourselves or defend ourselves. To be able to go. I see you. I can see why this is so hard for you. Even if it's something I've done, I could see why this is hard for you. That really takes some internal work to reach a place of being able to get there. And be able to communicate while mentalizing the other person. I know this might be hard for you to hear, but I'm not gonna be able to do this thing that you so much want because it would be really bad for me. Something like that.

Ann - So almost a perfect place to end, except that I can't help but wanting your perspective with related to this concept of epistemic trust about what's going on in the world today and how I know me personally just this idea of how difficult it is to have a balance of how to find healthy trust and healthy vigilance, how to do a B a balance right now. Yeah. With we not, or not being able to really trust our media, our government our political figures, right? Yeah. Our voting. And I think a lot of people are confused about what cues to pay attention to, to trust or not trust. Or even with a pandemic. How do you, your loved ones, this idea of, I imagine that we are as a culture, much more stirred up in our system of trust.

Steve - Yep. And being able to have a healthy radar.

Ann - Do you have any thoughts about that? And it's a big job to you, Steve, but what all kinds of thoughts about it? Just on the ledger political scene, I think, both many people have had insecure attachment experiences. And so they get confused about who to trust and who not to trust.

Steve - But then I think also like our political figures that we're supposed to trust, haven't shown us that they're always acting in our best interests. Certainly, they're beholden to lobbyists. They're voting to stay in power rather than what their consistence really need. And I think this is disorganized a lot of us about what to pay attention, to, to decide whether to trust your or not trust. And if you have these early attachment experiences that didn't work out, then you get even more confused. I think. So I think there's a lot of that going on. And then I guess also we would say. We were talking earlier that a lot of stress and cortisol activation in our body, which we are highly experiencing as a culture right now throughout the world. That also makes it hard because our body's in a more state of self protection oh yeah. than ever before, and then you're inundated. And I, yeah, I don't know if you saw the article about, how polyvagal theory applies to the pandemic. That all of us are in a state of high alert, and then how would we normally settle that down would be through a human contact and we can't do that either and people are actually dangerous. So we're all in this, aroused place, unable to set ourselves down. So how do I think that's going on, but like the pandemic stuff? So I saw a family earlier this year where one family member was an anti-vaxer and the other people were furious and trying to get her to get vaccinated. And you could just see this battle going on and nobody was mentalizing anybody, and so what I did is to slow things down and I talked to the person who was against the vaccine, and I just said, -so really we so much want to understand really, and this is not about give us your reason so we can counter them and force you- I really wanna understand where you're coming from. And so I just brought curiosity and listening and reflecting. And so then the family caught on and they were doing it too. And then they would slip out and go, no, we want you to get this because you're putting this. And go, wait, slow, everybody slipped out. And then I asked the anti vaccine person to try to get in their shoes, two sessions, they had reached an agreement. So nice. So that's I think that. I think that's something to tap on because we could do that for political disagreements. The divide that we see in families is just horrific With my friends, not just my clients, but with my friends who can't go home to see their mom. Yeah. Or because of this political divide and right. Are you VAX or not vaed and now has become part of the whole political landscape. Who you're voting for and what it means, and and it seems like that. Our, Some of our political system have really taken advantage of creating just a deep level of mistrust of one another out there. And so we just live in the sense of mistrust, which we've spoken about today when we don't have trust and we are in activation- we're defended, we're rigid. We're not open. And we're yeah, my sister and brother-in-law are a complete different political persuasion than my husband and I are. And he finds it painful to go visit them and I understand completely. But when I go and they say something that's very different than how I see them at the way, I just, it's easier for me cause it's not my blood family, but I just say, oh, I'm where did you learn that? And tell me about it. And then, and I'll bring in and I'll say, but don't you think that's inconsistent with this? How do you think about that? And it goes really well, and they've actually shifted a little bit and maybe I've shifted a little bit too, so yeah, that's the core, right? We're getting down to the nuts and bolts of how to handle their system right now. It, but it's I'll admit sometimes finding my own curiosity when somebody has such a threatening experience. God, that is the hardest step. Getting in touch with my own body, my own threat. When I can't find my own curiosity, we make it sound easy.

Ann - Just get curious, but when you feel threatened and you feel like somebody's position I guess if I'm believe in vaccines and my spouse is not vaxxing like that is can feel like a direct threat.

Steve - Oh, exactly. Finding curiosity, Being a mentalizer requires incredible emotion regulation because cause again, you can't get into that exploratory system if your attachment system is on fire.

Ann - Yeah. So it seems like that would be the step, right? The step is really try to get your own emotional activation. Calm it down. Try to find curiosity, try to find curiosity and try to- is coming from, I wonder what, and I'm paying attention to this data, I wonder what they don't see that data or they interpret it differently or what so to act, then it activates their curiosity. Although it's really hard cause you have to be able to ask that question where you really have curiosity, because if you're like what do you think about this? You can feel in the body, if that person's not open to actually, they're just asking to counter it, right?

Steve - Yes no, exactly. No, we all have to present masters to do this well. We're, where's fire. But I like it. So just as somehow to is where you wrap up is you're saying get control of your own nervous system. See if you can mentalize the perspective of the other, asking some questions, notice if it threatened you like with true curiosity, asking with true curiosity, give the sense of you want so much to understand their point of view. Don't give up your own point of view and then say, oh, I see. And. What do you think about this way of think about it? Oh, and truly. So I think that creates all kinds of possibilities so well, and the funny thing is we used to be able, I don't know if this is your experience, but we used to be able to do that people being on opposite political divides, at least in, in the United States, not necessarily everywhere. Used to be something that could be part of a dialogue that didn't lead to the level of hostility and cutoff. So a lot of people feel survivals at stake. So I think reminding ourselves, that pandemic has not helped. Yes. It's so true. Like park said, We're just all in this constant, the state of danger arousal so calming our body down it seems like that might be the sum up of is really taking care of our own bodies so that we have the capacity for mentalization. We have the capacity for reflective functioning, and we're just aware that we can get there. And that, that other political perspective actually isn't a core threat. It is just a difference.

Ann - Like we can hold self another, right? Like it's a challenge, an ongoing challenge for all of us, certainly.

Steve - Exactly.

Ann - All right, Steve, thank you so much for coming.

Steve - Oh, you're great. And I'll just mention, I'm doing workshops on epistemic trust and mistrust around the world. And so if people go to the therapeutic assessment website there aren't any posts right now, but I continue to do them. I continue to do my shame workshop and we, and the therapeutic assessment Institute continues to do other workshops on therapeutic assessment too. And your workshops are great. I've attended your one on shame, and I think I've attended several things by you but you will not find a better, and I know you're not the only instructor, the therapeutic assessment you would hire and train so many good people and they've trained as well.

Ann - But I really highly recommend, of course we will put that. Of course, in our show notes. Are you gonna do one Austin?

Steve - I will eventually I will. Yeah. Yeah. Okay. So just we're. I like to do them in person, some of them, cause I do a lot of experiential exercises, but we found out they can work online too. So I'm hoping to do one in Austin after where everybody can get together in a big room again.

Ann - Sign me up. I'll be there. Thank you so much for joining. Like I said, everything he just mentioned will be linked in our show notes. So you can find all of that information there and thank you very much, Steve, for being here. Thank you, man. What a pleasure to talk to you. It was so fun. Okay. And thank you guys for joining us today. I hope you got as much out of this episode as I did. And if you find this powerful, please send it to those that you think might otherwise benefit from it and take the time to rate and review us. That always helps people find us. All right. Thank you so much for joining us and we'll see here on the bend.