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The intersubjective struggle in psychosis and the healing power of dialogue

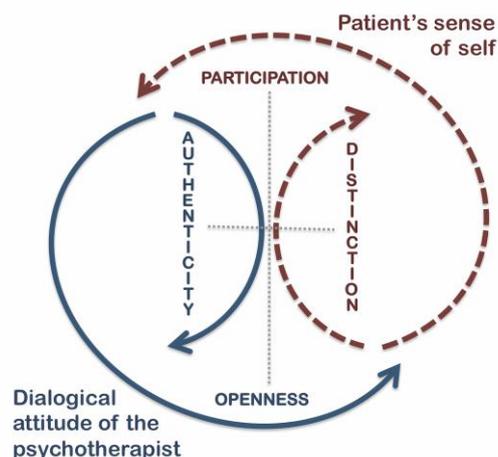
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Learning Goal:

By bringing together clinical and theoretical perspectives, this work aims at better understanding the effectiveness of dialogue in the treatment of psychosis. Because it touches upon fundamental structures of the therapeutic relationship, we believe that this analysis of the Open Dialogue approach might also usefully inform general psychiatric practice.

Abstract Text:

In this poster, we present a theoretical interdisciplinary work in which we link a clinical approach for the treatment of acute psychosis, the Open Dialogue (OD), and a theoretical view of the human self, based on enactive cognitive science. The aim of this work is to shed light on the effectiveness of OD by drawing on recent theoretical accounts of the human self. More specifically, we ask why and how the intersubjective process of dialogue might support and strengthen a person's sense of self and thus have a therapeutic effect in the case of psychosis. To this aim, we first focus on a dialogical therapeutic attitude as a core healing aspect of the OD practice and we describe it as being constituted by two intertwined and necessary aspects: *openness* and *authenticity*. We then introduce the enactive perspective, which conceives of the self as a self-organizing system, brought forth through interactional processes. These interactional processes have been specified in terms of *distinction* and *participation*. Based on this approach, we draw clinical implications for psychosis, emphasizing at its core an intersubjective existential struggle between being a distinct subject and participating with others. Finally, we bring the OD approach and the enactive approach together by suggesting that dialogue might be a specific kind of relation that (in principle) supports individuals in the processes of social participation and individual differentiation. At the core of this link is the suggestion that the very constitutive structure of a dialogical stance, i.e. openness and authenticity, per se entails an aspect of distinction (authenticity) and of participation (openness). A dialogical therapeutic stance (because of its very structure) might thus foster and support the recovery of a sense of distinct and yet open self.



**ON THE HEALING POWER
OF HUMAN RECONNECTION**