**Psychodynamic Formulation: Developing Hypotheses About Defenses, Conflicts, and Personality Organizations**

In order to help patients develop better mechanisms of coping with challenging dynamics (drives, ideas, thoughts, feelings, and conflicts), psychodynamic formulation focuses on developing and testing hypotheses about the function of symptoms (symptom formation) as an attempt (defense) against these dynamics. Contextual information from the patient’s history is necessary to develop these hypotheses.

**Case 1: Jason**

**1. Developing hypotheses about defenses**

Jason is a CEO of a corporation. He presents to therapy because he frequently gets into interpersonal conflict with his employees due to feeling frustrated with their perceived lack of efficiency and follow-through of his requests. He expresses this frustration publicly. He was encouraged to come to therapy by his wife after not going to work for a week, complaining about feeling empty and in a “bad mood.” In the first session he reports that preceding his absence from work, he had received feedback from one of his employees (a manager) that his confrontative style might contribute to decreased productivity of his employees. Jason reacted to this by stating how “ridiculous” this observation was.

1. *Presenting (concerns):*
2. *Precipitating (triggers):*

1. *Perpetuating (defenses):*

**2. Developing hypotheses about internal conflicts**

The initial assessment suggests that Jason grew up in an environment where he was frequently shamed by both his caregivers for academic achievements that did not meet the caregivers’ very high expectations (A instead of A+). The patient felt that all he had wanted was to feel “recognized” by his parents, but instead felt perpetually criticized and shamed.

1. *Conflict hypothesis 1*: wish vs fear
2. *Conflict hypothesis 2:* between parts of self

**3. Developing hypotheses about symptoms formations**

1. How might Jason’s defenses, conflicts, and symptoms be related?
2. What are the costs of his symptom formation:

4. **Developing hypotheses about personality organization**

What is Jason’s likely personality organization?

**5. Developing therapy goals and recommendations**

Based on these hypotheses about perpetuating factors, what are relevant therapy goals and recommendations?

**6. Write a brief narrative of perpetuating factors, explaining your hypotheses about how symptoms, defenses, and conflicts may be related** (use tentative instead of deterministic language, such as “may be related” instead of “is related to”):

**Case 2: Amelia**

**1. Developing hypotheses about defenses**

Amelia is a 22-year-old college student, who presents to therapy with complaints about concentration, memory, intense periods of anxiety, and insomnia, which were beginning to seriously interfere with her academic functioning. She reports that she has spent several days in bed this past week because of feeling alternately “foggy and sleepy” and being plagued by upsetting memories that she had forgotten and not thought about for many years. She did not want to talk about these in the first session. She bought several stuffed animals to her session for comfort.

1. *Presenting (concerns):*
2. *Precipitating (triggers):*
3. *Perpetuating (defenses):*

**2. Developing hypotheses about internal conflicts**

A review of her history suggests that she experienced prolongued sexual abuse by her father and likely friends of her father’s, although she does not have clear memories of this at the time of the initial assessment. These memories have started to surface since the start of a romantic relationship, which she described as “the first relationship in which I could imagine feeling safe.” She said she has not been able to feel trusting in previous relationships, where partners subsequently left her, because of feeling that she was “too cold.” Her new partner had asked her about her childhood, which had prompted the first clearer recollection of abuse memories. Amelia reported that sharing memories led to intense anxiety, especially because she feared that nobody would believe her.

1. *Conflict hypothesis 1*: wish vs fear
2. *Conflict hypothesis 2:* between parts of self:

**3. Developing hypotheses about symptoms formations**

1. How might Amelia’s defenses, conflicts, and symptoms be related?
2. What are the costs of his symptom formation:

4. **Developing hypotheses about personality organization**

What is Amelia’s likely personality organization?

**5. Developing therapy goals and recommendations**

Based on these hypotheses about perpetuating factors, what are relevant therapy goals and recommendations?

**6. Write a brief narrative of perpetuating factors, explaining your hypotheses about how symptoms, defenses, and conflicts may be related** (use tentative instead of deterministic language, such as “may be related” instead of “is related to”):