



Therapeutic  
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## Abstract Booklet

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# ABSTRACTS

## **Navigating Through Defenses to Arrive at Core Shame**

Julie Cradock O'Leary, Seth Grossman, Donna Kelley, Arrillaga, Mitsugu Murakami

Shame is an often-present, but frequently hidden phenomenon in clinical work (Lewis, 1987; Tangney & Dearing, 2002). This symposium will demonstrate how multimethod assessment can both clarify how shame defenses compound clients' difficulties and facilitate accessing core shame. Four Collaborative and Therapeutic Assessment (CTA) cases will describe how assessors integrated results from self-report and performance-based measures to paint a complex picture that equipped them to help their clients with feelings of shame via Assessment Intervention Sessions and other efforts.

The client's own words, contained in each presentation title, illustrate key dynamics of shame and related problems in living. The first case, 'What if I tell you I think it's all BS and I want a real diagnosis?' will illustrate how the MCMI-IV and the TCTS clarified that a 19-year-old male's longstanding coping patterns were attempts to cover up shame and a dread of failure. The presenter will also describe how the teenager and his family were challenged to integrate multiple explanatory narratives. The second case, 'Just need to get through this at the moment and not fall apart or give into this,' will illustrate how the self-report tests (e.g., MMPI-3, MCMI-IV) of a 57-year-old widow reflected some denial and attempts to present herself positively, but performance-based measures (e.g., AAP, Wartegg, TCTS) accessed her emotional pain and detailed a complex defensive structure. The presenter will describe how she used testing data to help her client gradually move away from her defenses and into her shame and unresolved grief. The third case, 'I need to be fully independent and not ask for help or support because I will just burden others,' will demonstrate how the TCTS, MMPI-3 & TAT captured and honored a 22-year-old's profound shame and demoralization. The presenter will describe how the assessor, client and his father collectively uncovered that the client's early insecure attachment was the breeding ground for self-doubt and feeling unworthy and unlovable. The fourth case, 'Every move I make, someone is watching,' will describe how testing data, particularly the TCTS and Wartegg, informed how the assessor helped a 29 year old woman break free from a lifelong grip of shame and need for external validation. Referencing shame theory and using these cases as examples, the discussant will describe how shame defenses may emerge throughout the CTA process. She will also explain how key principles of CTA, when properly embodied, can naturally reduce shame.

## **University Training in ET/C: Simulation with Actresses**

Marianela Cafrune Gervilla, Ernesto Pais

Simulation-based education (BSE) has established itself as an essential bridge between theory and clinical practice, grounded in social constructivism and supported by classical theories such as Dewey's active learning and Vygotsky's zone of proximal development. Clinical simulation allows students to actively construct knowledge through interaction with scenarios that mimic reality and reflection on experience. This methodology facilitates the acquisition of procedural skills and the development of a contextualized understanding of clinical concepts. (Díaz-Guio et al., 2024) This paper presents an innovative simulation practice implemented with 5th±-year students of the subject of Supervised Professional Practices (PPS) of the Bachelor's Degree in Psychology of the UAI. It is presented as a pedagogical sequence having as its axis the model of Collaborative Evaluation and Therapy whose main objective is to bring students closer to the experience of clinical practice through the simulation of initial sessions with patients represented by actors where a student fulfills the role of therapist in front of an actress who simulates a patient, allowing the application of the clinical skills worked on in the proposed didactic sequence. An evaluation is carried out based on categories developed from the EC/T model. Descriptive statistics will be presented on a survey answered by 45 students who carried out this process. The results underline the positive impact on them, 88.6% of the participants refer to the maximum score in relation to the usefulness for their professional training and future practice. Likewise, a qualitative analysis of the feedback of the participating students will be presented. The results highlight the importance of simulation to decrease anxiety and increase students' confidence in their future professional role, fostering collaborative and compassionate learning.

## **How Do They Do It? Implementing TA Weeks for Skill Development and Client Benefit**

Hilde De Saeger, Maartje Hermans, Filippo Aschieri, Inge Van Laer

Therapeutic Assessment (TA) is traditionally conducted over several weeks or even months, making it a time-intensive and costly process. For assessors in training, becoming proficient in the model takes considerable time, and despite the availability of introductory trainings, the first independent client encounter remains a daunting challenge. Meanwhile, the mental health sector struggles with waiting lists and limited resources, necessitating creative and efficient solutions.

One of the solutions is condensing the process into intensive one-week TA sessions, where we discovered significant benefits for both clients and our workflow. Not only did this model help us reduce waiting times, but it also reinforced adherence to the TA model through structured supervision sessions. Nowadays we use these TA weeks as an effective training tool for new colleagues. Our current training model immerses new assessors in a collaborative learning environment, where experienced and novice professionals work together intensively for a full week. Inspired by the advanced training at the Center for Therapeutic Assessment in Austin, we developed a slightly modified format that allows for more hands-on involvement.

In this symposium, we will outline the implementation of TA weeks for adults, adolescents and couples, emphasizing their impact on client outcomes. We will discuss the advantages and challenges of this approach and explore how to determine whether a client is suitable for such a condensed intervention. Through various case illustrations, we will highlight the key learning experiences and insights gained from this method.

Furthermore, we will present the structured training model that we use during TA weeks to support new assessors in rapidly acquiring essential TA skills. Finally, we will discuss how this format can also be leveraged for experienced professionals, helping them refine their TA skills and maintain adherence to the model.

## **When Collaborative Assessment Accompanies Grief**

Marianela Cafrune Gervilla

Grief is a natural and complex process that involves emotional and cognitive reorganization in the face of the loss of a loved one. Bowlby (1993) describes the stunned phase in grief, which stands out for disbelief in the face of loss and shock as an adaptive response and protective mechanism. That a patient seeks to initiate a therapeutic process at this time of grief usually indicates despair and vulnerability. This is how Paula, 40±, a member of a police force, introduced herself, who consults after the recent unexpected loss of her mother, asking the question Why me? during the initial session. Manifests intense emotional distress associated with feelings of guilt, anguish and anger due to the recent event. Through the Collaborative Evaluation, those feelings of guilt, self-demand, and abandonment were addressed. Through the co-construction of questions, the use of standardized tests (MMPI-2, Rorschach, AAP) and the development of new narratives, a safe framework was provided to explore intense emotions and resignify past experiences. The therapeutic approach focused on building a context of trust for Paula, facilitating the confrontation of difficult memories and emotions. The work emphasized the importance of validating and emotionally containing, while going through their grief, introducing new perspectives, facilitating a more compassionate narrative about loss. This process allowed Paula not only to recognize her emotional resources, but also to use them adaptively, reducing her situational discomfort. CE provided a safe space to integrate and transform grief, making it possible to resolve problems prior to grief, showing the value of this approach in sensitive clinical contexts. It will also address how intervention and follow-up sessions revealed a significant transformation in their ability to manage grief, moving from a narrative focused on guilt and failure to a more compassionate understanding of loss.



## **Drawing Out Meaning: Wartegg-Based Case Conceptualization within the Context of CTA**

Jacob Palm, Stephen Finn, Alessandro Crisi, Pamela Schaber

Recognized as an invaluable tool within the context of CTA, the Wartegg Drawing Completion Test lends itself well to use throughout the assessment process, including Extended Inquiries, Assessment Intervention Sessions, and Summary and Discussion Sessions. More importantly perhaps, the Wartegg, when interpreted with the Crisi Wartegg System (CWS), provides deep clinical data about our client's personality organization, structure, and dynamics, as well as normative data related to thinking, perception, coping, affective resources and management, and interpersonal relationships. Wartegg personality conceptualization-- which integrates theoretical understandings of personality structure/function with normatively-derived data-- oftentimes provides a unique and incremental window into the functioning of our clients, unavailable from other measures. This symposium presents three cases in which the CWS drove case conceptualization, highlighting the impact of Wartegg-derived data on client understanding, insight-development, and outcome. Implications for use of the CWS within the context of CTA will be discussed.

## **Using the AAP in TA with Attachment Trauma and Core Shame**

Carol George, Melissa Lehmann, Edward Jenny, Rob Riddell

This symposium demonstrates the application of the Adult Attachment Projective Picture System (AAP) in Therapeutic Assessment in helping uncover and treat attachment trauma and the childhood origins of core shame. Paper 1 provides a brief orientation to the conceptualization and measurement of attachment trauma and shame using the AAP. Two subsequent papers discuss the assessment and treatment of clients who were classified insecure-unresolved. Assessments featured the AAP along with a range of measures (e.g., R-PAS, MCMI-IV, MMPI-2, PAI, EMP, Social Responsiveness Scale – 2). Several of the clients' assessment questions concerned their childhood relationships with their parents. Paper 2 highlights assessment intervention sessions using the AAP with a depressed and suicidal CIS mother in her early 30s. The speaker discusses how these sessions helped his client get in touch with feelings of loneliness and anger from her childhood and gain a better understanding of the hidden shame she had been carrying. The discussion demonstrates how interventions using specific AAP stories can help clients develop self-compassion and understanding of core shame. Paper 3 describes a gender-nonconforming young adult male whose parents referred him for an assessment because they were concerned about his failure to launch, odd behavior, and high-risk sexual behavior. The assessment suggested possible severe atypical depressive disorder with psychotic symptoms. During the assessment, therapist and client were able to "rethink" some of his psychological distress in terms of attachment trauma by using the results from his AAP. The speaker will highlight how using a developmental attachment perspective helped his client understand his lack of trust in others and unveil his core sense of shame; an idea he acknowledged for the first time as being a deep and controlling force in his life. Additionally, his "neurodivergent" behavior in childhood and adulthood was helpfully recast in terms of attachment defenses. The discussion presents the two case conceptualizations and how combining the AAP with other assessments can help address client's questions and reduce shame for individuals with unresolved attachment trauma.

## **Enhancing Therapeutic Assessment Through Technology**

Krista Brittain, Kate Thomas, Anna Sapozhnikova, Sarvenaz Sepheri

As psychological assessment evolves in our digital age, this symposium explores how technology can enhance the Therapeutic Assessment (TA) process while maintaining its foundational human-centered approach. Four clinicians will present on methods for integrating various technological tools into assessment practice, from visual presentation platforms to artificial intelligence applications. The presentations will address critical ethical considerations including client privacy and the appropriate boundaries of AI assistance. Throughout, speakers will demonstrate how thoughtfully selected technological tools can support rather than supplant clinical judgment, while potentially making assessment findings more accessible for clients.

Dr. Krista Brittain will explore the innovative use of slide shows (ex: PowerPoint, Canva) as tools for organizing summary/discussion sessions and providing written feedback during the Therapeutic Assessment process. These technologies provide a platform to support clear, engaging, and client-centered communication of assessment findings and answers to assessment questions. Furthermore, utilizing these formats may be preferred by and more accessible for clients. Participants will see examples for how slide shows can be used with fables and in place of a TA letter to support the TA process and foster insight, story editing, and self-compassion during the discussion and written feedback processes. Participants will explore methods of creating individually-tailored, visually compelling slides that synthesize findings and answers to questions using graphs, visuals, and narrative elements to support a meaningful experience of the assessment process for clients.

Dr. Kate Thomas will discuss ways she has incorporated visual information into each step of the Therapeutic Assessment (TA) process. She will show how she has used visual stimuli throughout a TA, from sharing information pre-contact, through all the in-person sessions, and concluding with visual information in client letters and reports. She will also share times she has “over done it” or over-intellectualized when sharing visual information with clients. In discussing these examples, she will highlight how she has learned to modify when and what she chooses to share with clients based on their specific needs and preferences.

The conversation about how to thoughtfully integrate AI into one’s assessment practice is alive and in motion. Dr. Sarvenaz Sephari will help us join the dialogue in exploring how the values of Collaborative Therapeutic Assessment can serve as guideposts as we navigate the AI x Psychological Assessment landscape. Ethical and practical considerations will be viewed through a lens that promotes active collaboration with clients; respects diversity and prioritizes compassion for clients in their contexts; and engenders curiosity. We will highlight the humanistic qualities that continue to make Therapeutic Assessment an effective intervention in a digital ecosystem that relies on pattern recognition and machine learning.

Dr. Sapozhnikova will present on the structured integration of AI tools across three key phases of the Therapeutic Assessment process. We will examine AI applications in organizing clinical notes and interview data; collaborating with AI in synthesizing patterns across multiple assessment modalities; as well as in developing feedback hierarchies that help sequence themes based on their emotional impact and therapeutic timing. Throughout, we will focus on leveraging these tools while preserving, and perhaps even enhancing, the essential human elements of therapeutic assessment and clinical judgment.

## **Am I Bad? TA and Filial Piety in Asian Clients**

Stephen Finn, Raja David, Noriko Nakamura, Qiwu Sun

In Asian cultures with a Confucian tradition, filial piety (respect for and veneration of elders) has long been considered an essential trait of “good” family members. This Confucian ideal has led to mental health challenges in recent years as Asian clients adapt to radically changing cultural norms that emphasize individual achievement and personal contentment. In this symposium 3 clinical practitioners will discuss how they used Therapeutic Assessment to help clients integrate individualist and collectivist perspectives, overcome shame, and balance connection and individuation. Then, Dr. Finn will discuss the case presentations and draw lessons for working with Asian clients during the current era of intense cultural shifts.

## **Enhancing Collaborative Assessment with COSMO: A New Coding System for the Picture Frustration Study**

Carlo Vetere, Filippo Aschieri, Dale Siperstein

This symposium introduces COSMO (Collaborative Scoring Method), a new approach to coding the Picture Frustration Study (PFS) that enhances its clinical value within Collaborative and Therapeutic Assessment. COSMO redefines the PFS as a tool for understanding personality functioning and interpersonal style in a way that is empirically grounded, clinically relevant, and especially shareable with clients.

**Redesigning the PFS: A Collaborative, Interpersonal Approach to Scoring**

Carlo Vetere will present COSMO's structure and the empirical data supporting its reliability and clinical applicability. The system offers a dual framework: a categorical coding that identifies interpersonal styles using the dimensions of Agency and Communion, and a dimensional coding for the severity of emotional dysregulation, relevant to understanding Level of Personality Functioning (LPF). Vetere will also share key results from recent research, including inter-rater reliability, the tool's discriminative power across clinical and non-clinical groups, and a cluster analysis that identifies distinct response patterns and interpersonal profiles.

**From Anger to Connection: Using COSMO in Therapeutic Assessment**

Filippo Aschieri will illustrate the clinical power of COSMO through a Therapeutic Assessment case involving a young client referred for anger issues. He will show how collaboratively discussing COSMO results helped shift the focus from behavioral control to a deeper understanding of underlying loneliness and relational disconnection, facilitating emotional insight and client engagement.

**Using COSMO Feedback in Complex Family Assessments: Enhancing Effectiveness Through Dialogue**

Dale Siperstein will demonstrate how COSMO can be integrated into a multi-method assessment process. She will present a complex family case in which COSMO was used alongside instruments such as the Rorschach, MMPI-A, and the Personality Assessment Inventory (PAI). Her presentation will highlight how the dialogical discussion of COSMO results helped clarify the family's dynamics and supported a meaningful therapeutic alliance.

Overall, COSMO transforms the PFS into a collaborative, person-centered tool that supports insight, therapeutic dialogue, and integrative case formulation.

## **Recognizing Shame Through Psychological Tests**

Noriko Nakamura, Stephen Finn, Alessandro Crisi, Francesca Fantini, Julie Cradock O'Leary

Research has shown that shame is one of the most common elements of many different psychological disorders and that it greatly interferes with mental health treatment. Yet, many clinicians do not recognize clients' shame when it occurs in sessions or in assessment instruments. The goal of this symposium is to identify unhealthy shame in clients' presentations and in their test materials. Five experts in psychological assessment will explain how shame is manifested through various tests, each concentrating on one of those tests. Dr. Stephen Finn will begin with how to identify signs of shame in the MMPI-3. Dr. Alessandro Crisi will discuss how shame appears in the Wartegg Drawing Completion Test (WDCT), Dr. Francesca Fantini will discuss how shame is visible in the Early Memory Procedure (EMP), and Dr. Julie Cradock O'Leary will discuss how to assess shame and defenses against shame with the Thurston Cradock Test of Shame (TCTS). Finally, Dr. Nakamura will discuss how to recognize shame in the Rorschach Test.

## **Working with Japanese Clients, Shame via TA**

Mitsugu Murakami, Noriko Nakamura, Yasuko Nishida, Masamichi Noda, Naoko Ogura

Shame is a universal human experience, deeply embedded in our social and emotional fabric. However, its expression, triggers, and societal implications can vary significantly between cultures. In particular, Japan often has been said to have a "shame culture," making it a very useful context for exploring the multifaceted nature of shame. This cultural framework makes Japan an ideal setting for examining how shame manifests in individuals and influences interpersonal dynamics.

Over the past two years, the Asian Pacific Center for Therapeutic Assessment (ACTA) has sponsored a series of workshops focusing on shame and Collaborative/Therapeutic Assessment (C/TA). These workshops have delved into how shame arises and is expressed in psychological tests, using tools such as the Rorschach, the MMPI-3, the Wartegg Drawing Completion Test (CWS), and the Thurston Cradock Test of Shame (TCTS). The workshops aimed to deepen clinicians' understanding of shame-related dynamics and equip them with strategies to address these in their therapeutic work.

In this symposium, after first giving an overview of the concept of shame in Japan, four Japanese clinicians will present case examples to demonstrate their approach to identifying and working with shame in clients from a Japanese cultural context. Each case example will illustrate how various psychological assessment tools were used to uncover underlying shame-related dynamics. By integrating test findings with the broader cultural understanding of shame, these clinicians were able to design and implement meaningful therapeutic interventions. Their presentations will highlight the role of Japanese cultural values in shaping the experience and expression of shame. The symposium will conclude with insights from a discussant who will reflect on the broader implications of these findings. By considering how shame is both familiar and culturally unique in Japanese clients, the discussant will offer perspectives on working effectively with shame across diverse cultural contexts, emphasizing its relevance in global clinical practice.

## **Collaborative and Therapeutic Assessment in Latin America**

Ernesto Pais, Daniela Escobedo-Belloc, Camila Rojas, Maria Cecilia Marucci, Valeria Tamayo-Cárdenas, Ana Paula Laria-Zavala

Collaborative and Therapeutic Assessment (CTA) (Finn, 2007) has been widely disseminated in the United States, Europe and Asia. Its culturally sensitive and responsive approach positions it as a particularly appropriate intervention, although its presence in Latin America remains limited (Smith, 2016). CTA is a key model that promotes psychological well-being in contexts characterized by high levels of poverty, inequality, and constant crises, where complex trauma is prevalent (Pais & Escobedo, 2022).

In this symposium, sociodemographic characteristics and mental health care of Argentina and Mexico will be presented, to then give an account of how CTA has been integrated into university services in these countries. These devices offer psychological care based on CTA, and at the same time function as teaching and research spaces, promoting professional development and student training.

The CTA process carried out with four adult women who experienced complex trauma will be presented through a single case analysis. The cases illustrate how CTA facilitated their trauma processing, facilitated their self-knowledge, and a more compassionate view of themselves. At the same time, CTA allowed them to explore alternative ways of coping, improving their relationship with mental health providers. Some of the cases illustrate the work in the intervention sessions and how, from this perspective, issues related to diversity are addressed (Fantini et al., 2022) and work is done on epistemic hypervigilance (Fonagy & Allison, 2014; Kamphuis & Finn, 2018).

The results underline the positive impact of CTA on psychological care and professional training, in Latin America. The importance of expanding its implementation in the region is highlighted, and how promising this model is to achieve greater mental health coverage.



## **All Roads Lead to Roma: Paths to Personal and Professional Growth in TA Certification**

Sarah Bharier, Dale Rudin, Serena Messina, Krista Brittain

In this symposium Drs. Sarah Bharier, Krista Brittain, and Serena Messina provide a closer look into the process of certification in Child, Adolescent, and Adult Therapeutic Assessment. Each of the presenters has completed or is currently going through the Therapeutic Assessment certification process. An overview of the core values of Therapeutic Assessment and of the Therapeutic Assessment certification process will be provided, including a review of the competencies for certification. Additionally, each presenter will discuss aspects of professional and personal development that has occurred through the context of the child, adolescent, and adult models of Therapeutic Assessment. The transformative process of Therapeutic Assessment will be explored through the sharing of case examples. Dr. Messina will overview her experience of getting certified in Child Therapeutic Assessment using the whole case model and will focus on different aspects of the parallel process that she experienced with her clients, and that helped her develop deep empathy for the family with whom she worked. Dr. Bharier will share about her ongoing process of certification in Adolescent Therapeutic Assessment using both the whole case and the mentor model. Dr. Bharier will discuss ways a shift to the process over the product paralleled increased attention to shame and its defenses. Finally, Dr. Brittain will describe her experience of seeking certification in Adult Therapeutic Assessment using the mentor model, also reflecting on the importance of epistemic trust in both the assessment and certification processes. Presenters will review the values of Therapeutic Assessment and reflect on the certification process as an opportunity to more deeply embody those values. Therapeutic Assessment concepts related to shame, zones of proximal development, and epistemic trust will be integrated into case discussions and their relevance to certification. . Our discussant, a Therapeutic Assessment supervisor/consultant, will also share their perspective on supervision of Therapeutic Assessment. As Therapeutic Assessment grows in popularity, the aim of this presentation is to help demystify certification and illuminate it as a highly rewarding process of learning and growth.

## **The Art of Feedback: Core Concepts and Case Examples Using the Wartegg to Provide Therapeutic Feedback**

Jacob Palm, Mitsugu Murakami, Stephen Seger, Sarah Bharier

The Crisi Wartegg System (CWS) provides rich clinical information regarding client functioning-- including thinking, interpersonal relationships, affect regulation, and coping resources-- significantly aiding the assessor's conceptualization and understanding of the client. However, given the complexity of information gained through the CWS, it can sometimes be challenging to explain the test, collaboratively discuss results, and provide therapeutic feedback to clients. This workshop aims to provide an overview of core concepts of Wartegg feedback, illustrated by a series of brief case examples that highlight the Wartegg's utility within a CTA. Specifically, the use of visual-graphic representations of test results (including the WIP), examples of how to discuss and present indices and numerical data, and discussions of CWS box meanings, order, and Box Codes (both within the individual and family context) will be presented. Feedback preparation, including identification of 'Levels of Information' as indicated by CWS data, will be highlighted.

## **If I See a Butterfly Does It Mean I'm Gay?**

Nicolas Giammona

Creation and contributions in mental health of the University Center for Collaborative Evaluation and Therapeutics (CUECyT) in Argentina Collaborative Assessment and Therapeutics (Finn, 2007) is widely recognized in the United States and Europe, as well as in Japan. However, in Latin America the knowledge and acceptance of this proposal is still incipient. In this paper, the University Center for Collaborative Evaluation and Therapeutics (CUECyT), which was born in 2021 as a project that integrates the Faculty of Psychology and Human Relations of the Inter-American Open University and the IECIS, seeking to provide answers to the mental health challenges intensified by the COVID-19 pandemic, will be presented. It is established on the basis of other models of Psychological Care Centers within Universities based on Collaborative Assessment and Therapy (EC/T), such as the European Center for Therapeutic Assessment (Aschieri et al, 2024), being innovative in the context of Argentina and Latin America. The CUECyT combines psychological care, academic teaching both undergraduate and postgraduate studies, research, and extension (Pais, Cayun, Marucci, Rojas, & Iglesias, 2022). It will be presented based on the analysis of the clinical histories of the people served, sociodemographic information as well as characteristics of the reasons for consultations and descriptive statistics of the processes carried out. Finally, a description of the teaching, research and extension activities that have been carried out will be included, making explicit a brief group intervention with a group of war veterans that was based on the values and some stages of the EC/T process. Based on the analysis of the information of the 54 people who underwent the process in the CUECyT, it is concluded that the Center is positioned as a response to the mental health needs of the community, thus also allowing to account for how universities can play a crucial role in community care even more in times of pandemic and post-pandemic (see for example, Calero-Evlira et al, 2022; Colón-Llamas, 2022). Likewise, the relevance of the CUECyT in professional training is established, to discuss the potentialities in the context of Latin America.

## **Use of the Wartegg (WDCT) with Gender Diverse Youth**

Alexis Clyde

The Wartegg Drawing Completion Test (WDCT) is a performance-based personality test that uses a creative drawing task to reveal information regarding thought process, interpersonal relationships and personality traits (David & Palm, 2022). While the Wartegg has been widely used in Europe for some time, it has just recently been making its way into the United States over the past decade (Crisi, 2022). As such, more study is needed to better understand this assessment tool in American contexts, including among gender diverse children and adolescents. There is also a great need to better understand how non-cisgendered children and adolescents present on psychological assessment tools in general, and a normative basis for gender diverse and transgender individuals does not exist. On some personality measures (e.g., MMPI), data from transgender samples result in greater scale elevations, limiting interpretability. This study explores the relationship between gender and anxiety (AI), impulsivity (IM) and a measure of overall distress (ITT-2) as measured by the WDCT and a parent-reported measure (BASC-3) of similar variables. Participants (N=82) were children and adolescents (aged five to 18) referred for comprehensive psychological assessment within the psychiatry department of a children's hospital in Texas. Findings indicate that more anxiety and overall distress were noted on the WDCT for non-cisgendered patients, as compared to males and females. There were also differences between gender groups on the impulsivity index (IM) of the WDCT. Parent-reported anxiety and a summary measure of internalizing symptoms from the BASC-3 were also elevated for the gender diverse sample, but there was no significant difference on measures of externalizing symptoms or hyperactivity/impulsivity. Transgender and gender diverse youth are at greater risk for anxiety and internalizing symptoms than the general population, due to minority stress, but further study on how non-cisgendered children and adolescents perform on psychological testing is important to prevent overpathologizing an especially vulnerable group.

## **Using the CWS in CTA with Children and Families**

Alison Wilkinson-Smith

Anyone conducting CTA with children has undoubtedly witnessed the power of metaphor to communicate complex concepts in a digestible way. Those who have tried their hand at therapeutic fables know that metaphors can also build connection and empathy. We have found that the Crisi Wartegg System (CWS) is a rich source of inspiration, both because it is a safe for children to represent their internal worlds, and because it provides ready-made metaphors for problems in living. The CWS can be a perfect jumping-off point for Extended Inquiries (EI) and Family Intervention Sessions (FIS). We will present two clinical cases that illustrate the utility of the CWS in CTA with children and families. The first case used an attempt at a standardized administration of the CWS in the assessment of the child, which triggered a trauma response in the child quite similar to the behaviors that his mother was concerned about. Later, using a modified CWS in the FIS, the interaction between the child and his mother provided a metaphor for their family dynamic and showed the ways in which their strong and loving relationship could help the child process emotions without becoming overwhelmed. In the second case, in an EI following the CWS, a child shared a poignant story from her past that served as a metaphor for her style of relating to others. This EI helped the child gain insight into her own struggles and allowed her to feel seen and understood. Later, a discussion about the CWS with her parents brought up the same memory and helped the parents develop ideas to support her interpersonal needs. We hope these case illustrations will help inspire more assessors to incorporate the CWS into their CTA work with children.

## **Navigating Parental Challenges: Struggles in Implementing TA**

Hilde De Saeger, Sander Buuron, Inge Van Laer, Janneke Husson

At Viersprong, a center specializing in the treatment of clients with severe personality pathology and behavioral disorders, we recently implemented Therapeutic Assessment (TA) for children. This symposium will take you through the challenges we encountered during this process, particularly in adapting the model to the Dutch healthcare context.

Our introduction will focus on the complexities of introducing a children's TA program in an institution traditionally focused on adults and adolescents. Beyond simply implementing the child model, we had to translate and tailor it to fit the specific structures and demands of Dutch mental healthcare.

A key challenge was addressing the difficulties presented by parents, which pushed us to refine and expand the model. Their struggles required us to rethink standard approaches, test our creativity, and deepen our expertise. In particular, we found that the interaction between parental difficulties and child treatment outcomes called for innovative adaptations.

We will illustrate these challenges through three case studies, each highlighting a different parental dynamic that forced us to adjust the TA model:

1. Parents with different cultural backgrounds ? Exploring how cultural backgrounds impact engagement in treatment and how we adapted interventions accordingly.
2. Divorced Parents ? Examining the case of Sander and the complexities of co-parenting in therapeutic settings.
3. Parents with Personality Pathology ? Discussing the additional strain these challenges place on treatment and how we modified our approach to maintain effectiveness.

Through these cases, we will demonstrate how parental difficulties shaped our therapeutic interventions and ultimately strengthened the TA model for children. This symposium aims to share insights, inspire discussion, and contribute to a more adaptable and effective application of TA in child treatment.

## **An Attachment Perspective on the Early Memory Procedure**

Serena Messina, Pamela Schaber, Raja David, Diane Santas

Attachment theory highlights how early experiences with caregivers contribute to later emotional functioning in life, as the memories of these experiences are organized within Internal Working Models of Attachment (IWMs), i.e. mental representations comprised of information about the self, others and the way relationships work (Main et al. 1985). A plethora of studies support the view of IWMs as important factors contributing to individuals' development of emotion regulation and interpersonal skills (Mikulincer and Shaver, 2016; Thompson, 2016). The different attachment models and attachment defenses have an adaptive function, as individuals develop them to manage the caregiving and emotional environment that they are raised in. Although adaptive, attachment defenses also have costs, and uncovering clients' attachment defenses and their costs is often paramount during a Collaborative/Therapeutic assessment, when clients seek help to understand their struggles with their sense of self, their emotion regulation skills and/or the quality of relationships in their life.

The Early Memories Procedure (EMP, Bruhn, 1992) is an effective and time efficient assessment technique that can be used both during a psychological evaluation or in the course of therapy to explore the significant issues in the psychological landscape of the clients (Bruhn, 1990). As clients' concerns are often related to their attachment needs, the EMP can offer a powerful window into the clients' attachment world, because the EMP frequently elicits memories about how and if the clients' attachment needs were met during childhood. Thus, the EMP sheds light on the main sources of pain, internal conflicts and coping strategies the clients developed. The information gathered through the EMP can thus be an invaluable complement within a multi-method evaluation of the clients' attachment history. The papers presented in this symposium describe one mid-therapy case and two Collaborative/Therapeutic Assessment cases. The EMP work made it possible for clients to identify the connection between their mental health symptoms (depression and anxiety) and their attachment history. Further, the EMP was instrumental in highlighting how the clients' attachment history affected the quality of their current relationships, whether intergenerationally or with their partner.

## **Principles of Therapeutic Assessment in Residential Care**

Adam Anderson

Individuals entering residential due to issues associated with emotional and mental health are often experiencing significant and acute life challenges. There has often been a struggle to identify treatment paths that will assist in facing issues or challenges, changing life narratives, or finding fulfilling momentum or direction. Often there has been an extensive history of involvement in previous treatment at different intensities of levels of care. This presentation will focus on discussing the role of assessment based on therapeutic assessment principles in a residential treatment process, including the use of an individualized and collaborative assessment process with organized assessment questions, allied completion and interpretation of assessment instruments, and personalized formulation and feedback. This presentation will focus on discussing the ways that collaborative assessment can inform the treatment process, assist in providing an individualized formulation that inform the treatment team, and invite a collaborative treatment process. The session will include the results of an example of an assessment based on therapeutic assessment principles and strategies, and reviewing the ways that the assessment contributed to a meaningful change process during residential treatment.



## **Strategies for Safely Conducting Assessment Intervention Sessions in a Child Psychiatric Ward**

Shogo Baba

In Therapeutic Assessment, there are semi-structured steps, one of which is the Assessment Intervention Session (AIS). In AIS, it is essential to recreate emotional states related to the presenting problems while ensuring emotional safety. This presentation reports the case of a 14-year-old girl in which the involvement of a therapist contributed to the safe implementation of AIS.

Case A, at age 13, presented to the child and adolescent psychiatry outpatient department at our hospital due to depressive moods. She was later admitted to the child and adolescent psychiatry ward at age 14 after expressing suicidal ideation. She lived with her parents and younger sister. Although there was no history of abuse or bullying, her father was described as a strict individual. During her hospitalization, two psychologists worked with her: the presenter conducted a Collaborative/Therapeutic Assessment, while the other psychologist provided psychotherapy. She had a tendency to restrict her self-expression, believing that her words and actions might upset others. This led her to be overly concerned with others' reactions, which exacerbated her depressive mood, which exacerbated her depressive mood. As a result, she struggled to talk to her parents about mental states and cope with her negative emotions. However, she felt safe with her therapist, with whom she had established a trusting relationship. In the AIS, the presenter conducted the consensus Rorschach test with her and the therapist, providing a safe space for self-expression. Following the session, she reported that she was able to share her distressing emotions and experiences with her mother.

This case suggests that the involvement of a therapist in AIS contributed to providing a safe environment, which supported the client in attempting new behaviors.

## **Collaborative Assessment in a Forensic Hospital**

Grier Potter

This presentation is an exploration of the complexities and benefits of conducting therapy informed by collaborative assessment principles in an inpatient forensic hospital. There are many obstacles to effective and meaningful therapy in this unusual setting, including limits to confidentiality, elevated apprehension and risk of violence, and conflicting treatment priorities from various stakeholders. The authors, both doctoral candidates in clinical psychology, reflect on how practices and principles of collaborative assessment influenced and supported their clinical work in this unique environment and fostered meaningful insight that is conducive to growth for their patients.

In a forensic hospital, clinicians can often be seen as representatives of the punitive and carceral institution, so it is unsurprising that it can be difficult for trust to develop between therapist and patient. In turn, lack of trust hinders the possibilities of therapy to generate symptom relief, recovery, or progress. This foundational challenge is further complicated by numerous other factors: working with acute presentations of serious mental illness, possible legal implications of disclosures or therapeutic change, and attending to cross-racial and cross-gender dynamics. The ambiguous role of a doctoral student as a clinician adds an additional layer of complexity to an already multifaceted power dynamic. Therapy informed by collaborative assessment principles and practices is an approach that can help alleviate the intrinsic tension of the forensic environment and foster patient trust in the process of the therapeutic relationship.

The authors of this paper discuss using projective and personality assessment measures collaboratively with their patients - men with serious mental illness who are either facing charges and are not yet competent to stand trial or are adjudicated as not criminally responsible for serious crimes. The authors' strategies included actively engaging clients in the decision to use assessment tools, having reflective discussions of the assessment experience and results, focusing on client strengths and resilience, and adapting interventions or interpretations over time to meet clients' specific needs. Conducting therapy using these tactics provided opportunities for vulnerability, connection, growth and insight that may not have been possible otherwise. The authors reflect on how these experiences changed the way they conceptualize patients, and how that influences how they see their careers going forward.

## **When the Body Tells the Story: Understanding Dissociative and Somatic Presentations in Adolescent Assessment**

Raja David, Abby Scalise-Hughes

Dissociative and somatic symptoms are common in adolescents even when traumatic experiences are not evident, and yet are often overlooked during psychological assessments. This symposium is designed for clinicians who are looking to improve their understanding of how to assess for dissociation and somatic distress, understand the role these symptoms play in adolescent and family functioning, and how to discuss these issues with adolescent clients and their caregivers. After an explanation of key concepts and common assessment measures of dissociation and somatization, an adolescent clinical case will be shared. This case will explore how dissociative and somatic symptoms can be addressed in the context of a Therapeutic Assessment, and how to conceptualize these symptoms from a family systems perspective. Interventions for both treating these symptoms and shifting the family system will be explained. This symposium will help increase understanding of how to work with clients who present with dissociation and somatization, both for those following a traditional model of assessment and those following a collaborative/therapeutic approach.

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