

“I understand everything, but I still feel differently.”

Conditions for Change in Transference-Focused Psychotherapy: *Defensive and Structural Constraints* on *Therapeutic Transformation*



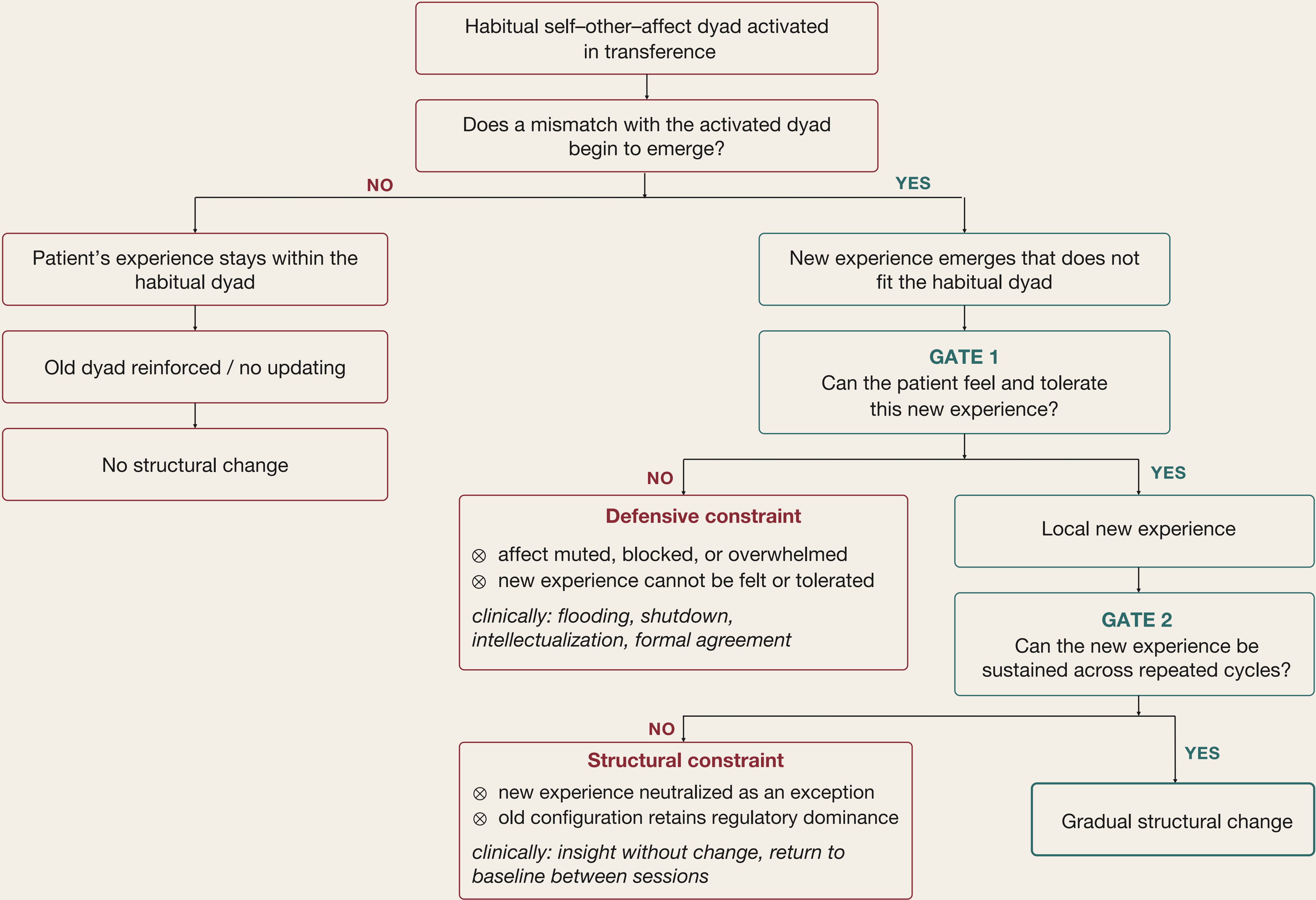
Anna Sokolova, PhD
Certified TFP Therapist
Clinical Fellow, International Neuropsychoanalysis Society
HSE University, Moscow, Russia · info@annavsokolova.ru

Conceptual framework

This work builds on a neuropsychoanalytic model of resistance to change (Sokolova, 2026), which reframes psychoanalytic understanding of therapeutic transformation through predictive processing (Friston, 2010; Solms, 2021).

Object-relational dyads — self-other-affect configurations — function as the mind’s learned relational expectations. Change requires a lived relational mismatch — a clinically meaningful prediction error — that can be felt, tolerated, repeated, and gradually integrated.

From “Which dyad is active?” to
“Can new experience emerge — and be sustained — once the dyad is activated?”



Conditions for Therapeutic Transformation

- 1 The habitual dyad is activated in the transference
- 2 New experience emerges that does not fit the dyad
- 3 The new experience can be felt and tolerated
- 4 It is sustained across repeated cycles, not neutralized as an exception
- 5 An alternative organization gradually accumulates regulatory weight through mourning and repetition

Clinical illustration

A middle-aged patient with narcissistic personality organization gradually understood the defensive function and destructiveness of her perfectionism — the inner requirement to be perfect to be loved. Yet letting go of it felt catastrophic:

*“I can’t give up these demands.
And somewhere — I don’t want to.
Without them, I don’t know how to live. I lose meaning and direction.”*

Affect was accessible and tolerable; insight was present. Yet the old configuration remained structurally indispensable: it organized meaning, direction, and the very structure through which she experienced herself.

Orienting questions for the TFP therapist

- 1 Is affect muted, overwhelming, or alive?
- 2 Does affect confirm the old dyad or signal mismatch?
- 3 Is new experience emerging, or is the same pattern being repeated?
- 4 What does the old configuration organize — identity, connection, meaning, orientation?

The dominant constraint determines the timing, dosing, and focus of intervention