

# Power Threat Meaning Framework (Johnstone & Boyle, 2012)



14. september 2023  
kl. 8.30-16:30  
Hótel Reykjavík  
Grand, Sigtún 28,  
105 Reykjavík

Vinnustofa um nýtt  
skýringarmódel  
andlegrar líðanar

Leiðbeinandi: Dr. Lucy Johnstone

**Um dr. Lucy Johnstone:** Dr. Lucy er ráðgefandi klínískur sálfræðingur, hún er höfundur bókarinnar *Users and abusers of psychiatry* (3. útg. Routledge 2021), *A straight-talking guide to psychiatric diagnosis* (PCCS Books, 2. útg. 2022); meðritstjóri *Formulation in psychology and psychotherapy: making sense of people's problem* (Routledge, 2. útg. 2013) og meðhöfundur *A straight talking introduction to the Power Threat Meaning Framework*, 2020, PCCS Books) ásamt fjölda annarra kafla og greina sem fjalla á gagnrýninn hátt um geðheilbrigðisfræði og ástundun hennar. Lucy er fyrrverandi námsstjóri Bristol Clinical Psychology Doctorate í Bretlandi og hefur starfað við geðheilbrigðisþjónustu fullorðinna í fjölda ára, síðast í Suður-Wales. Hún er gestaprófessor við London South Bank-háskólann og félagi (ens. *fellow*) í Breska sálfræðifélaginu.

Lucy er aðalhöfundur, ásamt prófessor Mary Boyle, *Power Threat Meaning Framework - PTMF* (2018), útgáfu Breska sálfræðingafélagsins sem var þróuð í samvinnu við notendur geðheilbrigðisþjónustu. PTMF er hugmyndafræðilegur valkostur við geðgreiningu sem hefur vakið athygli víða um heim. Lucy er reyndur fyrirlesari í kennslu, á ráðstefnum og víðar og starfar nú sem sjálfstæður þjálfari. Hún býr í Bristol á Bretlandi.

## Dagskrá

8:30-9:00	Skráning / Registration
9:00-10:15	Kynning: Yfirlit yfir stóra samhengið / Introductions: Overview of the wider context
10:15-10:35	HLÉ / BREAK
10:35-12:15	Yfirlit yfir Power Threat Meaning Framework, spurningar / The Power Threat Meaning Framework: summary and questions
12:15-13:00	HÁDEGISHLÉ / LUNCH
13:00-14:45	Æfingar - litlir hópar / Exercise - small groups
14:45-15:05	HLÉ / BREAK
15:05-16:20	Æfingar og endurgjöf / Exercise and feedback
16:20-16:30	Spurningar að lokum / Final questions

Þessar upplýsingar og dagskrá er hægt að nálgast á vef Rótarinnar, [hér](#).

Nánari upplýsingar um Power Threat Meaning Framework er að finna á vef Breska sálfræðifélagsins: <https://www.bps.org.uk>. Þar er allt efni sem varð til við vinnu verkefnisins og er það öllum opið. Þar má nefna stutt yfirlit yfir PTMF, rúmlega fjögur hundruð blaðsíðna bók um hugmyndarammann, glærur, leiðsögn um hvernig efnið er notað bæði fyrir einstaklinga og fagfólk. Einnig er þýdd grein eftir Lucy á vef Rótarinnar:

<https://www.rotin.is/handan-gedheilsuhugmyndarinnar/>.

Vinnustofan er haldin með styrk frá matvælaráðuneytinu sem hafði umsjón með líknarsjóði Sigríðar Melsted sem slitið var árið 2022.

# A POWER THREAT MEANING NARRATIVE

- 'What has happened to you?' (How is **Power** operating in your life?)
- 'How did it affect you?' (What kind of **Threats** does this pose?)
- 'What sense did you make of it?' (What is the **Meaning** of these situations and experiences to you?)
- 'What did you have to do to survive?' (What kinds of **Threat Response** are you using?)
- 'What are your strengths?' (What access to **Power resources** do you have?)
- 'What is your story?' (How does all this fit together?)

## POWER

**Biological or embodied power** - E.g., strength, physical health, attractive appearance, sporting ability, and so on. Or pain, disease, brain injury, disfigurement, or disability.

**Coercive power or power by force** - E.g., using aggression, violence, or intimidation to make someone do things they don't want to do or to frighten or control them.

**Legal power** - The law is needed so that we can all live in a fair and peaceful society where our rights are protected. The law can also be used to impose unfair or harmful policies on vulnerable people.

**Economic and material power** Having enough money to live on, with good housing and enough to eat, and so on.

**Social or cultural capital** such as equal access to educational, job, training, and leisure opportunities. It is also about whether we benefit from social connections and a sense of social confidence and belonging in the society we live in.

**Interpersonal power** - Relationships with others, including family, colleagues, teachers, friends, neighbours, employers, healthcare staff, and public officials, are an important source of security and support. They can also have negative aspects such as neglect, bullying, abuse, abandonment, invalidation, shame, humiliation, discrimination and so on.

**Ideological power** - Ideological messages, or ways of looking at ourselves and the world, can come from a whole range of sources, such as parents, social networks, schools, advertisements, healthcare staff, politicians, and other public figures, as well as the media, internet, and social media. This can affect:

- Our sense of identity as women, men, trans, black or minority ethnic, as an older person, as someone with 'mental health problems', etc.
- How we believe we should think, feel, look, and behave in order to be an acceptable member of a group or of society. This can include almost anything, from the 'right' body size and appearance, to the 'right' lifestyle, the correct way to bring up children, express sexuality, or religious beliefs, and so on.
- How we interpret our experiences, behaviour, and feelings, and develop our own understandings, beliefs and values.

## THREATS

### Relationships

- **Emotions and feelings** e.g., feeling anxious and overwhelmed.
- **Social/community** e.g., feeling excluded or bullied.
- **Economic/material** e.g., not having enough to eat or a safe place to live.
- **Environmental:** People may live, or have lived in, deprived and unsafe situations, either in their houses and/or in areas of poverty, conflict, or war.
- **Bodily:** This could include ill-health, chronic pain, disability, injury, brain injury, starvation, exhaustion, having your body attacked or invaded.
- **Identity:** This includes lack of support to develop your own beliefs, values, and identity; loss of status; loss of social, cultural, or religious identity.
- **Value base:** This includes loss of purpose, values, beliefs, and meanings; loss of community histories, culture, rituals, and practices.
- **Knowledge and meaning** - such as the information or knowledge to make sense of your life in a way that is right for you.

## MEANINGS

Unsafe, afraid, attacked; abandoned, rejected; helpless, powerless; hopeless; invaded; controlled; emotionally overwhelmed; bad, unworthy; isolated, lonely; excluded; trapped, defeated, failed, inferior; guilty, blameworthy, responsible; betrayed; shamed, humiliated; sense of meaninglessness.

## THREAT RESPONSES

Fight, flight, freeze, flee; hypervigilance; panic, phobias; hearing voices; dissociating (losing track of time/place; flashbacks, nightmares; emotional numbing; giving up, low mood; suspicious thoughts; withdrawal; rapid mood changes; holding unusual beliefs or other experiences; physical symptoms such as tension, dizziness, physical pain; attention or concentration problems; confused/unstable sense of self; self-injury; self-starvation, binge eating, over-eating; grieving; self-blame and self-punishment; body hatred; compulsive thoughts and rituals; hoarding; avoidance of/compulsive use of sexuality; impulsivity; anger, rage, aggression and violence; suicidal thinking and actions; distrust; perfectionism, overwork; using drugs, alcohol, smoking.

## STRENGTHS AND RESOURCES

- Loving and secure early relationships
- Supportive partners, family, and friends
- Social support and a sense of belonging
- Leisure and educational opportunities
- Having access to information/knowledge/alternative views (e.g., on mental health)
- Positive/socially valued aspects of your identity
- Skills/abilities - such as intelligence, resourcefulness, determination, talents
- Bodily resources - appearance, strength, health
- Belief systems - faiths, community values and so on
- Community practices and rituals
- Connections to nature and the natural world

## Case Vignette - Anna

### Personal history

Anna is a white woman in her 40s who was born and brought up in a small village in the East of Iceland. She has a younger brother. Her parents were labourers and have both passed away.

Anna's parents both had problems with substance use and they separated when she was 9 years old. After that her mother, who had a difficult childhood, became dependent on prescription drugs for chronic pain, and her father moved to Capital Area. Anna had long periods of staying with her father as a child and adolescent. She suffered emotional abuse from her mother who was very critical and controlling of Anna and offered her very little support. As a result, Anna felt she could never rely on her mother, and did not feel secure at home. While her father tried to do his best, he had problems with alcohol and got more and more isolated. She has had no contact with her brother for a long time after a dispute over her mother's finances.

Anna finished high school and a university degree in teaching and worked as a teacher for some years but has been on disability pension for the last 15 years. She had a child at nineteen but separated from her son's father 3 years later. Her son lived with his father from the age of five, and Anna has little contact with him now that he is an adult. When she was 32, Anna married a man whom she had met in treatment. He was very violent and after their separation, five years later, he was convicted of a life-threatening attack on her.

Anna began using alcohol when she was 13 years old after having been bullied at school. She joined a group of pupils who also used alcohol and often truanted from school. She was raped when she 23 and reports a very humiliating process in the justice system, which did not result in a prosecution. After this, her use of alcohol increased.

Anna is a talented artist, and is well-liked by the staff, who can see her potential. She has a few close friends and is very supportive to other service users. She enjoys hiking and spending time in nature.

### Psychiatric history

At various times, Anna has been diagnosed with PTSD, depression, anxiety disorder, and borderline personality disorder. She also has fibromyalgia, asthma, and other physical health problems.

Anna first went into substance use treatment when she was 28 years old and has gone through 12 treatments. She was expected to go to AA meetings and "work the Steps", but she disagreed with the suggestion that she should apologize to people who had hurt her. She also found it hard to manage her emotional pain without the use of alcohol. But she felt she did benefit from her first treatment at the National Hospital. She had a few years in recovery later and was a very active AA member. However, during this time she became depressed and suicidal, and was admitted to psychiatric hospital on two occasions, where her main treatment was psychiatric medication.

Anna then relapsed and had a long period of entering substance use treatment again and again. She did not feel safe in the presence of male clients at the detoxification hospital and at that time there were no gender segregated treatment offers.

At the moment, she is out of hospital and trying to set up a small business selling her artwork.