

# USING SOCIAL SIGNALING TO TARGET EMOTIONAL LONELINESS

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## IN ANOREXIA NERVOSA AND OTHER DISORDERS OF OVERCONTROL

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# Aim of Talk

Provide a brief overview of some of the core **theoretical principles and treatment strategies** underlying **Radically Open-Dialectical Behavior Therapy (RO-DBT)**

# Status of RO-DBT Efficacy Research

- RO-DBT informed by 20+ years of translational treatment development research
  - Designed specifically for disorders characterized by overcontrol
- The **feasibility, acceptability, and efficacy** of RO-DBT is evidence-based
  - 5 published clinical trials and 1 multi-centre RCT completed and submitted for review
  - 300+ patients have received RO-DBT in research trials throughout the world—plus, 1000s clinically

# The Search for Unifying Principles

*How did our species survive  
without claws, horns or  
thick skins?*

We survived because we developed capacities to  
***work together in tribes***  
and  
***share valuable resources***  
with other members of our tribe who were  
not in our  
immediate nuclear family

# OUR TRIBAL NATURE

*Required us to find a way to*

***‘bind genetically diverse individuals together’***

*in such a way that*

***‘survival of the tribe’***

*could override older ‘selfish’ tendencies linked to  
survival of the individual*

# Social bonds and self-control

**Self-control = the ability to inhibit emotional urges, impulses, and behaviors in order to pursue long-term goals**

Self-control capacities enabled a person to *not* immediately consume valuable resources and instead save for a 'rainy day'

**PLUS**

*not* acting on every impulse allowed us to work together in groups without the fear of being immediately attacked if we stepped on someone's toe

**Lack of self-control—linked to substance abuse, criminal activities, domestic violence, financial difficulties, teen pregnancy, smoking, obesity—and more!**

# **Bio-Temperament as a Unifying Principle**



# Remarkable consistency emerging from large- scale studies examining comorbidity

(e.g., Kendler et al., 2003; Krueger, 1999; Krueger et al., 1998; Vollebergh et al., 2001)

- **A common factor** may underlie chronic mental health problems, personality disorders, and treatment-resistant conditions (Clark; 2005; Lynch, Hempel, & Clark, 2015)

## Undercontrolled

- **High reward sensitivity and low inhibitory control; plus, BPD & Antisocial PD show high threat sensitivity too**

## Overcontrolled

- **Low reward sensitivity, high detail-focused processing, high threat sensitivity and high inhibitory control**

# Defining Overcontrol: 4 core deficits

- ***Receptivity and openness***: manifested by high risk aversion, hyper-vigilance for threat, avoidance of novelty, and automatic discounting of critical feedback.
- ***Flexible-responding***: manifested by compulsive needs for structure and order, hyper-perfectionism, compulsive planning/rehearsal, rigid rule-governed behavior, and moral certitude.
- ***Emotional expression and awareness***: manifested by inhibited expression, and/or disingenuous expression (e.g., smiling when distressed) and minimization or low self-awareness of distress.
- ***Social connectedness and intimacy***: manifested by aloof/distant relationships, high social comparison, envy and bitterness, and low empathy and validation skills.

# Overcontrolled Clients...

**Are not roaming the streets in gangs**—they are not causing riots or the people you see yelling at each other from across the street

**They are hyper-detail-focused perfectionists** who tend to see ‘mistakes’ everywhere (including in themselves)

**And tend to work harder than most to prevent future problems** without making a big deal out of it.

**Plus, are expert at not ‘appearing’ deviant on the outside** (in public).

# Overcontrolled bio-temperamental biases...

**Make it more likely for OC clients...**

**To unintentionally bring perceptual and regulatory biases into social situations that function to isolate them from others.**

# Overcontrol is a problem of emotional loneliness

Secondary to Low Openness &  
Social-Signaling Deficits

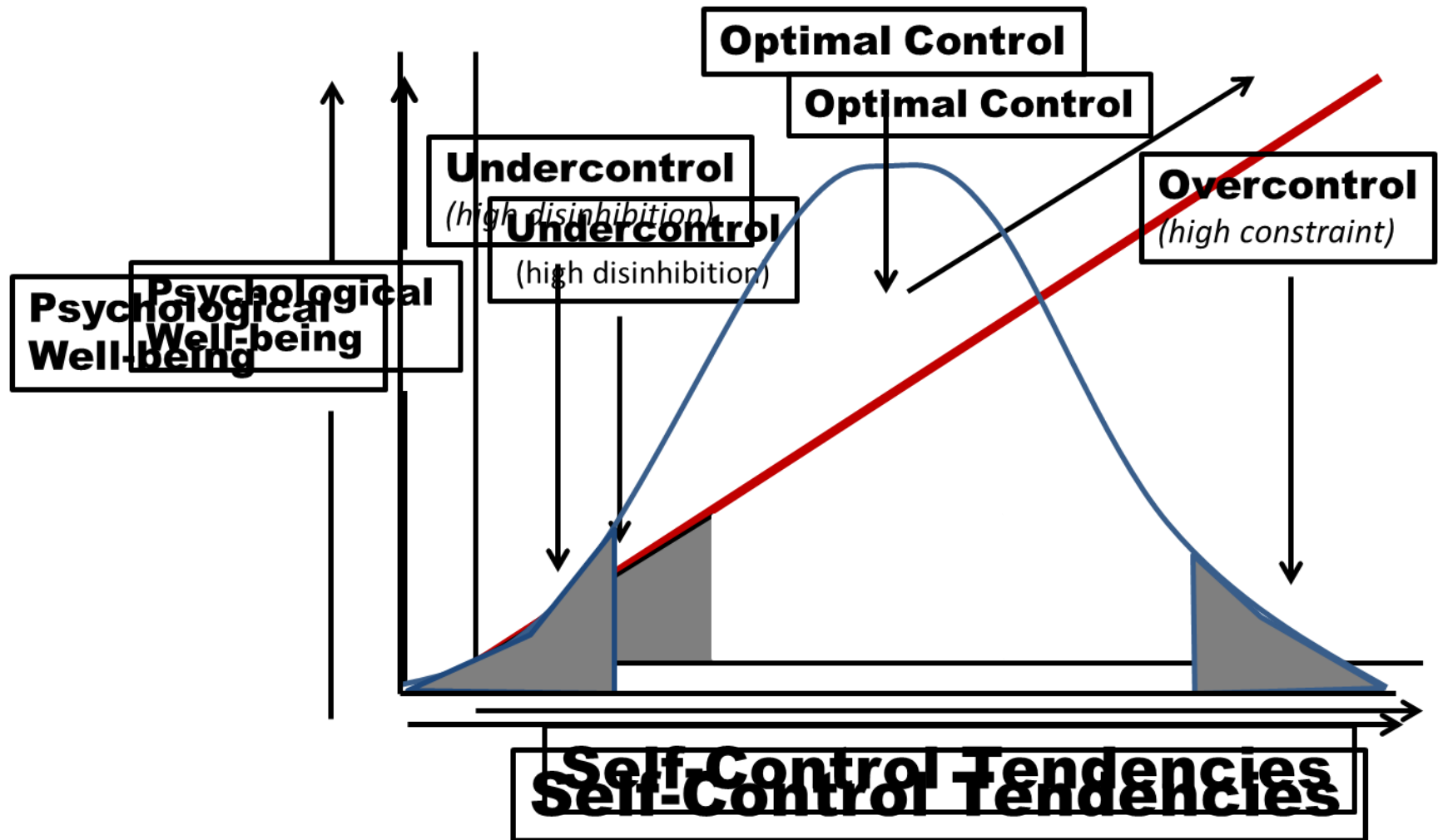
# Undercontrol is a problem of emotion dysregulation

Secondary to Poor Distress Tolerance &  
Lack of Impulse Control

**Thus...**When it comes to treatment...

**One size  
does NOT  
fit all**

# Self-Control Tendencies



# **The Self-Control Dialectic**

## **Undercontrolled (uc)**

## **Overcontrolled (oc)**

### **Emotionally Dysregulated and Impulsive**

- Borderline PD
- Antisocial PD
- Narcissistic PD
- Histrionic PD
- Binge-Purging Eating Disorders
- Conduct Disorders
- Bipolar Disorder
- Externalizing Disorders

### **Emotionally Constricted and Risk-Averse**

- Obsessive Compulsive PD
- Paranoid PD
- Avoidant PD
- Schizoid PD
- Anorexia Nervosa
- Chronic Depression
- Autism Spectrum Disorders
- Treatment Resistant Anxiety-OCD
- Internalizing Disorders



# Key Difference Between RO-DBT & Other Treatments

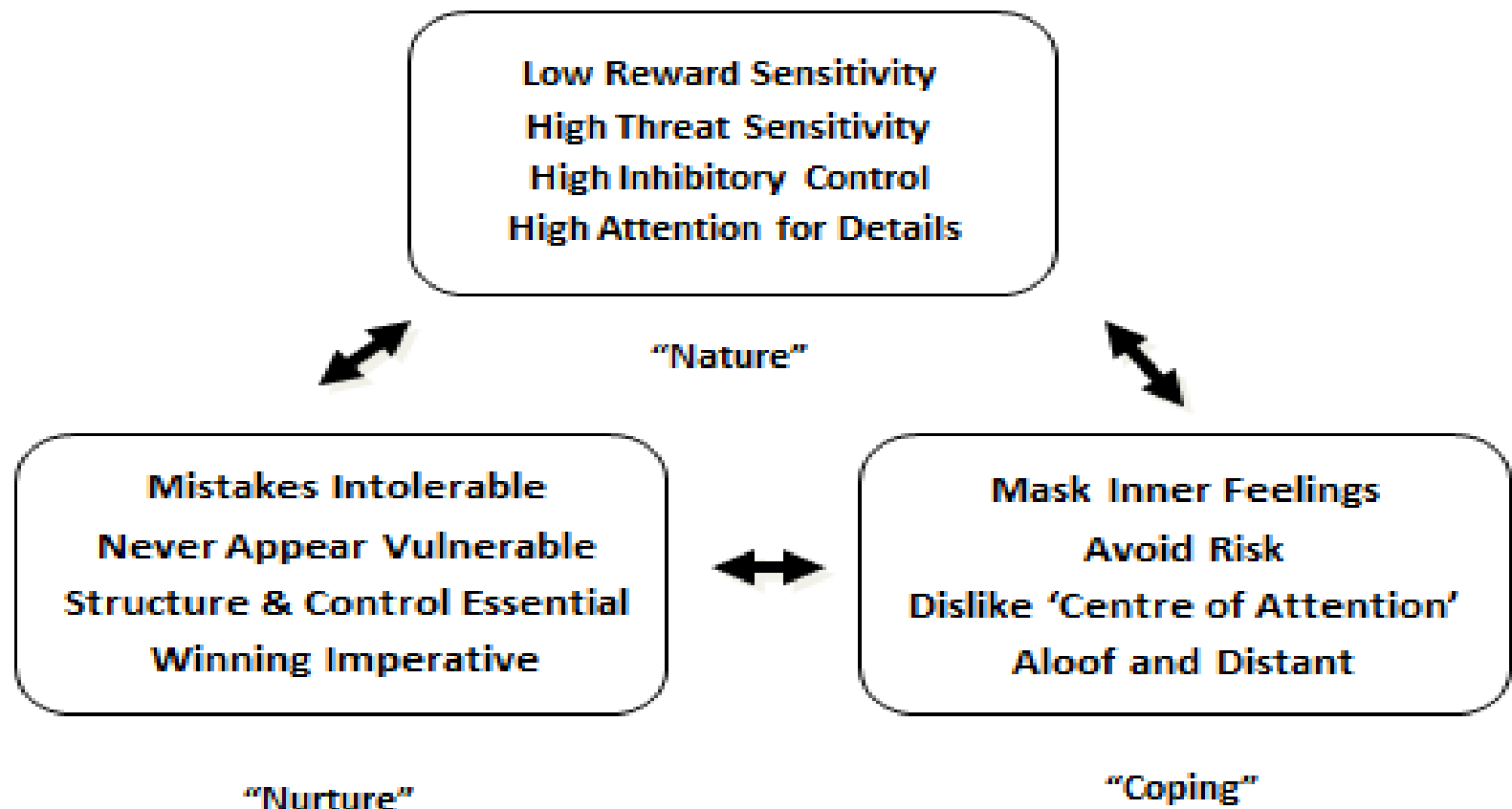
**Depression, Autism, Anorexia,  
Obsessive Compulsive PD, etc.**

is not considered the primary problem!

RO-DBT posits social-signaling deficits stemming from maladaptive overcontrol as the core issue

Based on evidence showing that OC coping preceded the development of psychopathology

# Neurobiosocial Theory for Disorders of Overcontrol (Lynch, in press)



# SOCIO-BIOGRAPHIC INFLUENCES\*

**\*\*\*Family, Culture, Learning**

# For Undercontrolled...

## **The Person Learns**

***“If I escalate my  
emotional  
signaling—then  
good things may  
happen”***

**Whereas...**

**for Overcontrolled...**

**The Person Learns**

*“If I inhibit my  
emotional signalling—  
then good things  
may happen”*

But...when the Context Calls for  
Emotional Expression ....

...And Emotion is **Not** Expressed

# Then...Social-Signaling Matters

- **Emotions evolved to communicate** (Darwin, 1872/1965).  
*Species survival depended upon signalling cooperation.*
- **Human Facial-Expressions are Unconditioned Stimuli**— e.g., we are already emotionally reacting to a facial expression at 4 milliseconds (LaFrance, 2013)
  - *Open expression of emotion—even when the emotion is negative—signals trustworthiness and increases social connectedness* (Boone & Buck, 2003; Mauss et al., 2011; Feinberg, Willer, & Keltner, 2011)
  - *We become anxiously aroused when interacting with a non-expressive person AND we prefer not to affiliate with them* (e.g., Gross, 2002; Butler & Gross., 2003; Barnsley, Hempel, & Lynch, 2011).

# The Cost of OC Social-Signaling Deficits Is a Pervasive Sense of Social-Ostracism



# Expressive Flexibility and Social Affiliation

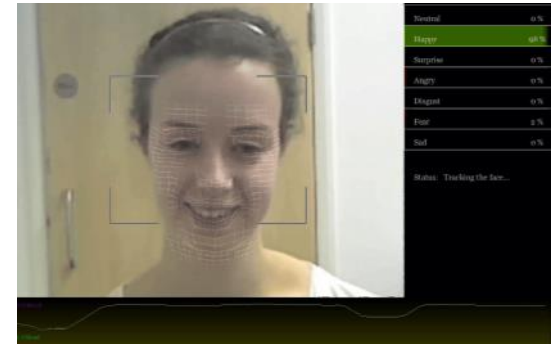
(Barnsley, Mizon, Hempel, & Lynch, in prep)



Suppress



No-Instruction



Enhance

## Findings:

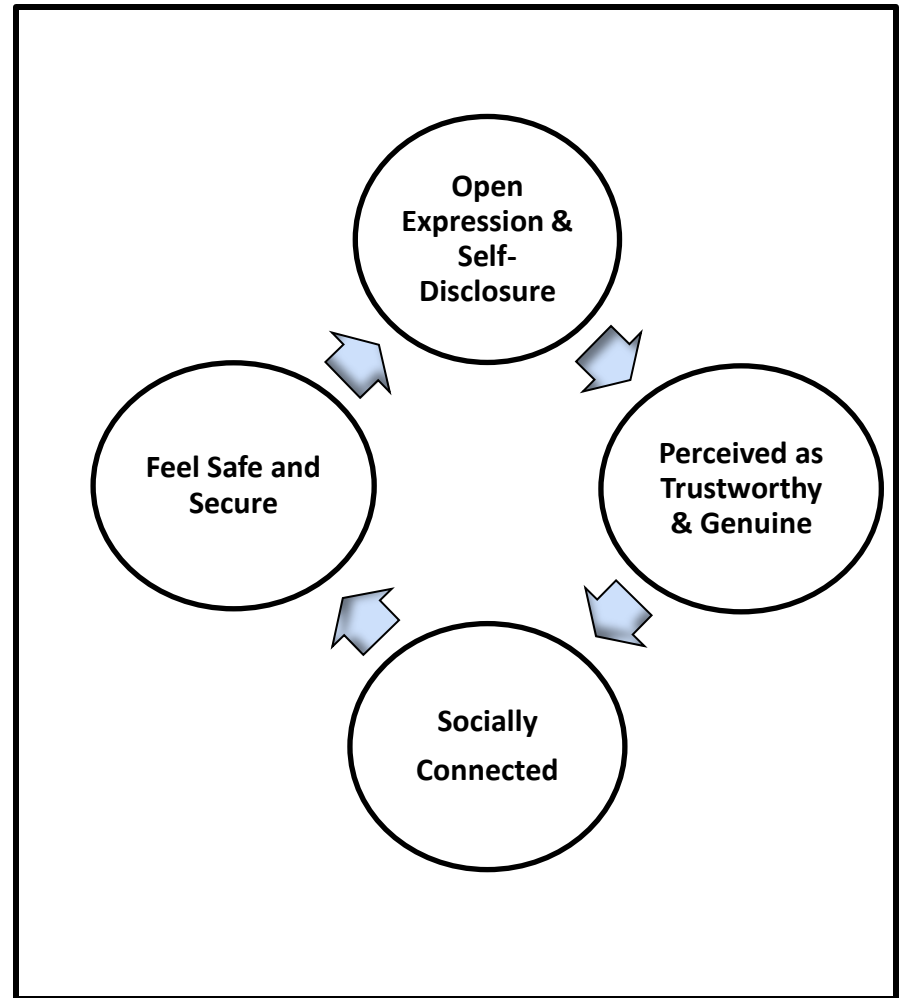
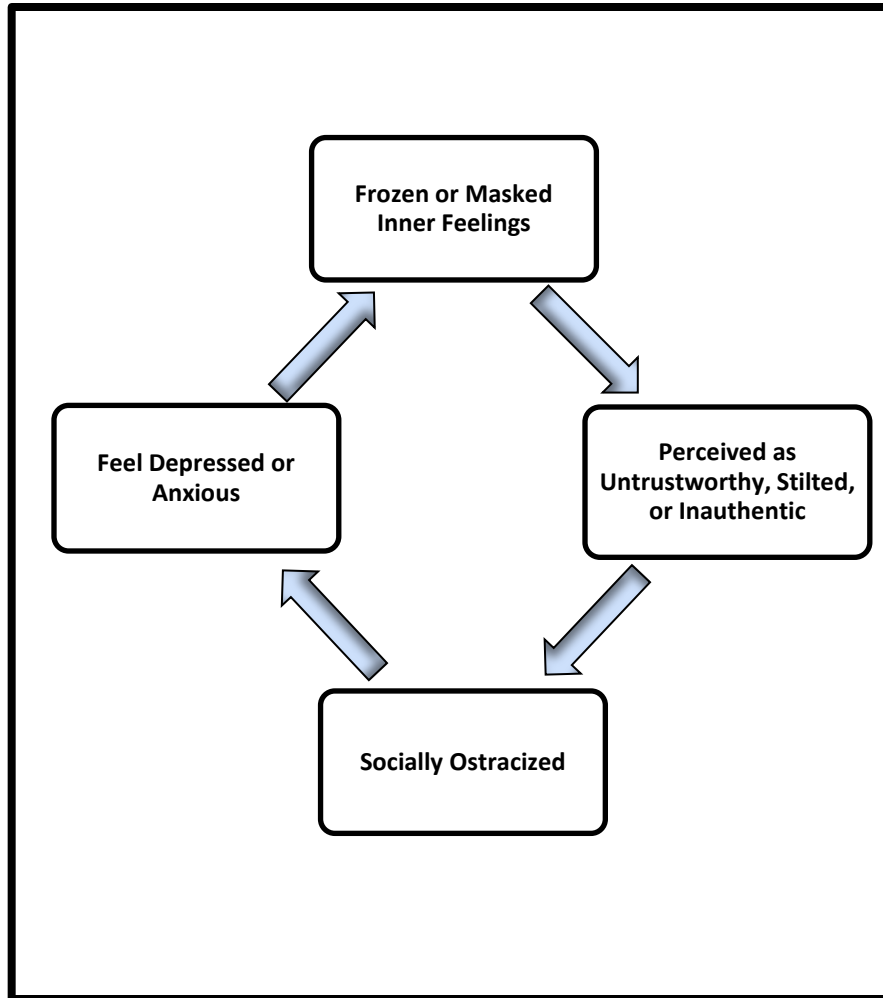
1. Subjects watching these videotapes preferred to affiliate with the individuals instructed to **enhance** their emotional expression and less with suppressors— regardless of valence (both positive and negative expressions)
2. HR reduced in observers of enhanced group and HR increased in observers of suppressed group—suggesting open expression is a safety signal

**A novel mechanism of change:**

***Open Expression = Trust = Social  
Connectedness***

***Overcontrol***

***Flexible-Control***



**But... OPEN EXPRESSION DOES  
NOT MEAN...**

**SIMPLY**

**“EXPRESSING EMOTIONS WITHOUT  
AWARENESS OR CONSIDERATION”**

**On the contrary.... effective  
emotional expression is always  
CONTEXT dependent**

# **SOCIAL-SIGNALING MATTERS**

AND...how you signal  
may matter most...

*when it comes to social-connectedness*

# But...What is a Social-Signal?

- **Any behavior a person does in the presence of another person—**
  - Intended (or not)—e.g., *sometimes a ‘yawn is just a yawn’*
  - Conscious (or not)—e.g., *an involuntary sigh*
- **Actions, gestures, or expressions delivered without an audience (i.e., in-private)** are simply overt behaviors—not social-signals.
  - *Even when rehearsing in front of a mirror what you might say to your boss—you are not ‘social-signaling’—you are simply preparing your lines before you ‘go on stage’ (☺).*

**Social-Signal = “public” R (response)**

# Undercontrolled Signaling

**BIG AND LOUD**

**AND MOOD-DEPENDENT**

**Whereas, Overcontrolled Signaling is  
less direct and often rule-governed**



**Unfortunately...Habitual  
Indirect  
Social-Signaling  
Makes it Hard to Get to  
Know Someone  
And Trust Their Intentions**

# What are the two most common indirect social-signalling styles in OC?

- **Excessive Pro-Social Signalling**
- **A Conspicuous Lack of Pro-Social Signalling**

# **Excessive Pro-Social Signalling** *that is context inappropriate, pervasive, and unresponsive to the social-signals of others*

- *Frequent frozen & polite smiles that display teeth*
- **Excessive head nodding**
- *Overly attentive, ingratiating, or flattering behavior that is unnecessary, unasked for, or inappropriate.*
- **Frequent displays of submission or gestures of appeasement**—e.g., *Lowering of the head, covering the face with hands or hiding the face from view, slackened posture, lowering eyelids, casting eyes downward, avoiding eye contact, slumping shoulders, and postural shrinkage.*
- *Attempts to mask an emotion by displaying another—e.g., complimenting a rival to conceal envy*

# ***A Conspicuous Absence of Pro-Social Signalling*** *that is unresponsive, pervasive, and context inappropriate*

- **Flat dead-panned expressions**
- **Staring**
- **Lack of head nodding or smiling**
- ***Lack of friendly and cooperative signals***—e.g., *failing to shake hands; absence of eyebrow flashes during greetings or conversations; low frequency of open-handed or expansive gestures; lack of eye contact; or failing to join in with the laughter of another.*

# The Two Most Common *‘Plausibly Deniable’*

OC Behaviors  
that function to block  
change

# **‘Disguised Demands’**

## **Push-Backs and Don’t-Hurt-Me Responses**

- **What do they function to do?**
  - **Block unwanted feedback or requests to join community—they signal non-engagement indirectly**
- **How are they different?**
  - Push-backs-- “I’m not telling you what to do...but you better do what I want”
  - Don’t hurt me-- “You don’t understand my suffering...I just can’t do what you want.”

# Don't-hurt-me responses are difficult to challenge—

- ***“You don’t understand me and your expectations are hurting me”***
  - *“My exceptional suffering, traumatic history, and efforts to contribute to society and make self-sacrifices means...”*
  - *“Normal expectations of behavior do not or should not apply to me”*
- ***As Such:*** *“It is unfair for you to fail to recognize my special status and expect me participate, contribute, or behave responsibly like other members of my community are expected to behave”*
- ***Consequently:*** *“If you were a caring person you would stop pressuring me to change, behave appropriately, or conform with norms (e.g., stop expecting me to complete my homework, stop asking questions I don’t like, stop expecting me to participate in class discussions or exercises)”*
- ***The Ultimatum:*** *“And...if you don’t stop, I will fall apart—and it will be your fault!”*

# How does one intervene with Push-Backs and Don't-Hurt-Me responses?

- **Avoid reinforcing maladaptive indirect social-signaling—by placing it on an extinction schedule**  
*i.e., ignore it, behave 'as if' you are oblivious to the intended signal by carrying on with your agenda in a nonchalant manner*
- **If the social-signal is a prolonged don't-hurt-me response** that prevents normal communication—*bowed head, covering face, postural shrinkage, averting eyes*
  - Matter-of-factly ask them to sit up straight and look at you without making a big deal out of it
- **Finally, if the behavior continues** without the client more directly expressing their needs, wants, desires—shift to alliance-rupture protocol and enquire with an open mind about what is happening



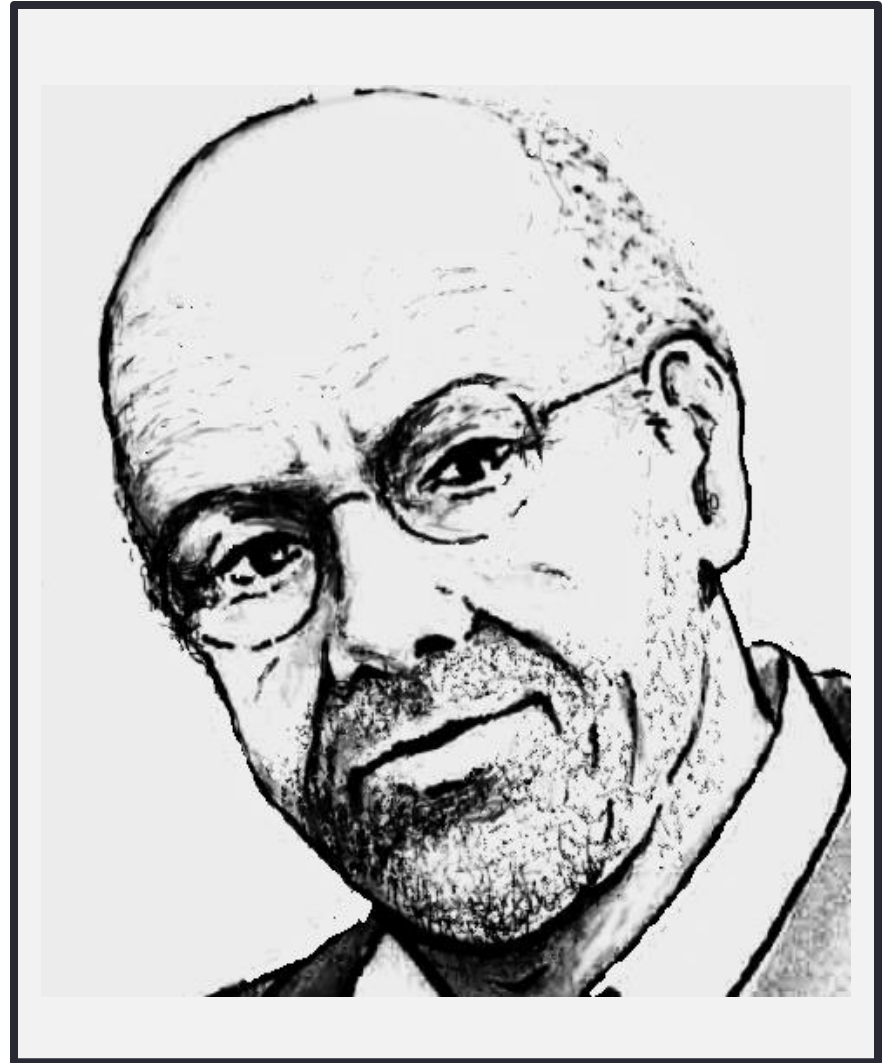
# What is the key for effective treatment targeting with OC?

**To not focus solely on inner experience as the source of OC suffering**—e.g., *dysregulated emotion, maladaptive cognition, lack of metacognitive awareness, or past traumatic memories*

**Ask instead:**

***How might their social signalling impact social connectedness?***

# Therapeutic Use of Micro-Mimicry and Mirror Neurons—using social-signalling to enhance OC client engagement



# In Summary... **Overcontrolled (OC) are Perfectionists**

*They don't need to...*

**GET SERIOUS!**

**TRY HARDER!!**

**DO BETTER!!!**

**So...When Tension is Present—Slow The Pace  
and Chill-Out—***by leaning back in your chair (if you are sitting), taking a deep  
breath, raising your eyebrows, and engaging a warm closed-mouth cooperative  
smile (aka Big Three + 1)*



# Thanks!

For more information  
[www.radicallyopen.net](http://www.radicallyopen.net)