

# **The Dynamics of the Personal and Familial Change in the Anxious Patient Through the Experiential Psychotherapeutic Approach. A Case Study.**

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## **Abstract**

**Introduction:** *With a view on understanding the general framework of the anxiety issue within which change must be operated, one must investigate both the therapist's and the client's perspective from the very beginning. The challenge of finding out what lies under the so complex symptoms of anxiety, of discovering what mechanisms cause, facilitate and fuel them, by retracing, understanding and giving new significance to every client's life story thread, constitutes the most laborious and, at the same time, the most exciting aspect both for the therapist and for the client.*

**Objectives:** *The general objective of the paper consists in identifying the mechanism of individual change within the integrative-unifying psychotherapeutic labour, while the practical-applicative one refers to offering a possible methodological register in order for practitioners to be capable of monitoring the dynamics.*

**Method:** *The present paper represents „an excerpt” from an ampler study that analysed, using qualitative methodology, the effects of the integrative-unifying therapeutic endeavour of experiential type on anxious-depressive disorders.*

**Results:** *The effects resulting from an integrative psychotherapeutic endeavour of experiential type on people suffering from subclinical anxious-depressive disorder, who were monitored dynamically and during follow-up, were the following: the remission of the anxious-depressive disorder symptoms, assuming anxiety as an emotional state signalling misbalance that can be solved by discovering the mechanism causing it and by connecting to one's own resources, by identifying blocking and neurotic repetitive individual behavioural patterns with similar finality and individual psychological mechanisms of anxiety.*

**Conclusions:** *The structuring on three dimensions (symptoms, the existential dimension and the dimension across generations) of working methods and techniques used within the integrative-unifying psychotherapeutic endeavour highlights the importance of monitoring the client's individual dynamics.*

**Keywords:** *life script resignification, personal development*

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## I. Introduction

The challenge of finding out what lies under the so complex symptoms of anxiety, of discovering what mechanisms cause, facilitate and fuel them, by retracing, understanding and giving new significance to every client's life story thread, constitutes the most laborious and, at the same time, the most exciting aspect both for the therapist and for the client. The emotional force, generated by the insight, awakens curiosity in both of them and also assures compliance to therapy. Thus, the client becomes interested in and responsible for his own work on himself.

The present paper represents „an excerpt” from an ampler study that analysed, using qualitative methodology, the effects of the integrative-unifying therapeutic endeavour of experiential type on anxious-depressive disorders.

The general objective of the paper consists in identifying the mechanism of individual change within the integrative-unifying psychotherapeutic labour, while the practical-applicative one refers to offering a possible methodological register in order for practitioners to be capable of monitoring the dynamics.

The general hypothesis states the fact that the integrative-unifying psychotherapeutic labour, of experiential type, leads to simultaneously restructuring the client's life scenario on three levels: symptoms level, existence level and the level across generations.

With a view on understanding the general framework of the anxiety issue within which change must be operated, one must investigate both the therapist's and the client's perspective from the very beginning.

Hence, an important starting point in monitoring and observing the dynamics of the client's individual change consists in the therapist's flexibility. It is important for the therapist, who is trained according to a certain method and supervised, to realize that, faced with a new client, although he is armed with an entire arsenal of scientifically valid methods and techniques and although he is capable of using them due to his qualification, he cannot anticipate how the therapy will unfold or „flow”. Will the therapeutic thread lead to cognitive restructuring, to a separation labour, to reshaping an identity passage or to reconstructing relationships within one's family?

As it is observational-meditative, the therapeutic undertaking from the perspective of unifying therapy is highly conscious, creative and flexible, within the context of preserving the logical thread well-individualized and well-guided. Undoubtedly, there is the risk that, when the therapist remains focused on the technique, he may be

„manipulated” by his own feeling that he „knows” what will happen during therapy. By not focusing on the spontaneous and authentic dynamics of the therapeutic process, he might not be curious about and open-minded to the unpredictable in the client's evolution, in other words, to the dynamics of change. He will, inevitably and ... anxiously, focus on applying „the technique as correctly as possible,” which will cause a shift in the fundamental objectives of the therapeutic endeavour, namely monitoring the client's inner mapping and enabling him to establish direct contact with himself.

If we change perspective and „take a look” at the client, we must emphasize the emotional pressure that an anxious person possesses when entering the psychotherapist's office. Hence, the whole dynamics of subsequent change may depend on the very manner in which this pressure is managed during the first sessions. The whole picture may be „envisioned” by the specificity of the anxious-depressive disorder itself and by the way in which it is experienced by known to the person in this condition. The emotional, cognitive and behavioural charge of the „luggage” accompanying the client to his first session at the psychotherapist's office includes: lack of understanding regarding the symptoms that he develops and their long-term effects on the body, their catastrophic interpretation, multiple medical exams, mixed information on his problem coming from numerous sources and less from his life scenario, deteriorating social relationships against the background of his own behaviour of avoiding some situations and the others' lack of understanding regarding their sources („come on, there's nothing wrong with you, you're just spoilt!”, „you don't look sick!”, „cut the crap!” etc.)

The analysis of all „battles” fought so far against affective conditions, thoughts, physiological reactions and one's own behaviour patterns leads the client to acknowledge the great number of „defeats” and his own lack of efficiency in solving the problem, the feeling of incapability, the fact that he is „abnormal” and that madness is just one step away.

Therefore, the client reaches the psychotherapist's office with the idea that this decision, of seeing a psychotherapist, is his last resort. Because of the anxious-depressive disorder symptoms that display an important somatic component intensely experienced by the client on a physiological level, the focus lies within the need to clarify its idiopathic nature. Thus, paradoxically, although he resorts to a psychologist, most of the times, the client is not very certain that he suffers emotionally. The explanations he

provides for himself to account for the occurred symptoms are purely physiological, despite the fact that, in most cases, there is confirmed evidence of numerous medical investigations of physical health.

The person is trapped inside his own ideas and affective conditions and no longer succeeds in finding himself, in using his creative potential, in freeing his resources. Anxiety represents the „Trojan horse” sent by the existential standstill to the personality structure. The client is really engaged in battle, only that the enemy is his own ego. Hence, the objective of the first session with an anxious client is to assist him in ceasing the battle and in creating an adequate and realistic reference to the symptom.

The change in perspective offers the client the possibility:

- to free himself from the exaggerated monitoring of physiological elements, which are associated with interpretations of idiopathic nature and catastrophic anticipation of their prognosis;
- to become responsible for the undertaking of looking for solutions to the crisis he is in.

Rendering the client responsible for his own therapeutic endeavour plays a double role: on the one hand, it removes the client from his part of a victim and, on the other hand, it makes him become aware of the fact that he is the only one capable of giving a new meaning to his life scenario.

With the aim to naturally introduce him to the experiential manner of working on himself, the therapist’s task, from the very first session of the therapeutic undertaking, is not that of evaluating the situation that the client is going through, but that of accompanying him in obtaining a new perspective on his anxiety. The client receives assistance in working on the symptoms of fear in order to transform them.

## II. Methods

We continue by presenting a therapeutic scenario, in order to illustrate the way in which the combination of the three levels may determine individual changes in the life scenario.

### Case study

*The Laura Case – „what does being a woman mean?”*

Laura, aged 38, married, one daughter, aged 14.

Main elements that were the foundation of case decryption

The symptoms that Laura complained about at the beginning of the psychotherapeutic endeavour were unjustified fear, inner anxiety, tension, panic attacks,

sadness and dissatisfaction with herself. They had been present for more than a year and they had increased against the background of a sum of responsibilities that she had had to fulfil over a timespan during which she had had a leadership position. The principles that governed her behaviour, „to endure,” „to be humble,” „not to upset people,” „not to fight back”, did not comply with the position she held, which, at work, generated an agglomeration of tasks that she preferred doing herself rather than delegating responsibility so as to avoid any type of conflict. „I prefer bowing my head in order to have peace and quietness” Laura said. Peace and quietness for whom? Thus, Laura unconsciously slipped into the victim role (because neurotic roles have costs) at the cost of sacrificing her inner peace.

Laura’s psychotherapeutic undertaking focused on the labour of rehabilitation and giving new meaning to the development stages in her life scenario. *As she stated, Laura had to be born again.* The association that Laura used to make, if she had to imagine herself without the anxious-depressive symptoms, was the idea that she would be free. *Free of...What was keeping her prisoner?* In the beginning, Laura’s therapeutic objective was to get rid of emotions. She did not want to feel anything!! *What was it that made her deny her feelings?* She must have experienced a feeling lacking so much agreement with what she meant to herself that she wanted to eradicate them all. Step by step, her inner chart developed. Emotions „made her visible”, but she wanted to be unnoticed. If she had managed to remain unnoticed, the possibility of being involved in any conflict would have diminished.

On the other hand, she wondered why she was so scared of what the world might say, why her image of a serious woman was so important. When she grew tense, agitated, anxious, she blushed.

The mere fact of being noticed by a man who had an open, sociable attitude, or who paid her a compliment, activated her fear to be perceived as „an easy woman”, „what others might think of her if they saw her blushing, they might think she had feelings for the man”. She had had no extramarital affair, and the mere fact that she might like certain types of behaviour in other men than her husband terrified her. The fact that she liked talking to other men and appreciated aspects in other men which she said she did not see in her husband (politeness, sensitivity, communication skills), seemed a great mistake to her.

She felt inadequate as a woman. It was as if she had no idea how to behave, which were the

boundaries of desirable behaviour concerning her status as a wife. She did not take on the shadow (the seductive, flirty, adulterous woman).

The lack of femininity assumption leads to taking on excessive motherhood, to addiction to the child towards whom she behaves as if he found it impossible to manage on his own (as if he had remained at the baby stage). As a mother, she is overprotective, she does not allow her daughter to grow up so as to prove to herself that she is a mother and not any type of mother, but a perfect mother (at the age of 14, her daughter's „sole” responsibility was „to learn”, as all household activities that the daughter could have done, even the simplest things, were done by Laura, just because they were related to the child's independence from an adult).

What Laura was looking for was freedom. It was not the others who had to establish boundaries, but she had to let herself feel and think as if there was nothing wrong with it.

The issue contained the „guardian” father (an authoritarian, harsh father who did not allow children to play), who established the order and the boundaries and who was still making decisions for her. The father's lack of confirmation of her sex-role blocked her development. She built up her feminine identity starting with what she was not allowed to do („*she must not talk to boys*”, „*she must not come home knocked up*”). Everything that violated family rules was dangerous, degrading and caused fear (of punishment). During teenage years, she could have lost the family she came from, now she might lose the family she built, if her reputation as an „honest, decent woman” was affected.

Across generations, the family stream has been acknowledging acceptance of those who obeyed the rules, while those who did not, were punished or they could generate conflicts between parents. Thus, she was afraid her family might not love her anymore if she did not observe the roles that the statuses of mother and wife entailed (she played them excessively, in fact she exaggerated them). Hence, she justified her usefulness as a mother and wife.

Her lack of emotional expression led to the enhancement of inner tension. The energetic conversion of her emotions into fury made her believe that, if she spoke her mind, if she fought back, she would be violent. Being a perfectionist got her even tenser; and it was constantly fuelled by the confirmation she always received when she performed an activity flawlessly.

In Laura's case, the psychotherapeutic

endeavour had a particular development, as it was one in which another variable occurred. Being a religious person, she used to go to church every Sunday and, every time she had the opportunity, she would talk to her confessor about what she accomplished during therapy. Receiving the priest's confirmation enhanced her satisfaction with herself, with her evolution, with the objective changes in her life.

Therefore, my client made up a team and I ended up working with a „co-therapist” in this case. It was as if Laura needed both „mother” and „father” in order to accomplish her process of growing up.

### **Effects**

She grew up, experiencing childhood, adolescence, early youth, giving new significance to and negotiating each facet of the ego, which was in full restructuring process, each important character in her life scenario, getting rid of her own ghosts and demons and, above all, forgiving. She assumed her own femininity and she integrated her shadow. Thus, she improved her marriage relationship and noticed aspects about her husband that she had not seen before („he is actually sensitive, but he only played tough”, „he is resourceful, socially pleasant; he would never give me up”). She started socializing again; she was once more in touch with her friends and colleagues of the opposite sex whom she used to neurotically avoid. She changed her attitude towards herself and others; she concretely and correctly established boundaries by expressing emotions and developing assertiveness. Changing jobs was no longer necessary because she no longer had anything to run away from. She broke down the „doors that used to hurt her, the fortress gates” that she had suffered from before and she started living freely.

### **III. Results**

The effects resulting from an integrative psychotherapeutic endeavour of experiential type on people suffering from subclinical anxious-depressive disorder, who were monitored dynamically and during follow-up, were the following:

- the remission of symptoms of the anxious-depressive disorder;
- assuming anxiety as an emotional state signalling misbalance that can be solved by discovering the mechanism causing it and by connecting to one's own resources;
- identifying blocking and neurotic repetitive individual behavioural patterns with similar finality;
- identifying individual psychological mechanisms of anxiety;
- the remission of the already established dependence;

- unblocking personal resources;
- restructuring relationships with people within the client's existential dimension;
- rebalancing power in the couple relation;
- identifying trap roles, ghosts and demons, roles which were or were not assumed, which led to clarifying, giving new meaning to and restructuring her life;
- understanding the significance of the occurrence of anxious-depressive symptoms from the perspective of their prone connection to certain personal life themes;
- emotional, cognitive and behavioural detoxifying;
- valuing forgiveness as a factor in mending the life scenario;
- restructuring the life scenario on the existential level, across generations level and personal development level;
- accomplishing objective changes in her life, which led to a realistic, coherent, creative and nutritive life style.

#### IV. Discussions

*The methodological stages of the integrative-unifying psychotherapeutic endeavour*

The procedural line unfolds onto three main elements - reconstructing (exploring-repairing), providing meaning (the client finds meaning to the experience) and reconversion/finding new meaning - and becomes concrete by means of:

- symptom analysis (within the concrete context of the client's life);
- decrypting the significance of their symbolic nature;
- activating the experiential content of the past (accomplishing the present-past connection);
- restructuring the experience (accomplishing the past-present connection);
- finding new meaning by activating personal resources (accomplishing the present-future connection).

The psychotherapeutic plan displays three directions:

1. the symbolic analysis of the symptom (decryption) – we must take into consideration both the manifested symptom (evaluated according to: nature, duration, intensity, frequency, conditions of occurrence/reoccurrence) and the masked symptom;

2. the study of the existential dimension (context) – identifying occurred disturbances and consequences of the symptom on all levels: parent-child, couple, social, professional.

Because the occurrence of anxiety alters the power balance within the couple, its remission will logically affect its equilibrium as well. In cases where

the inner dynamic mechanism of the client's anxiety is related to altering the roles assumed and the ones not assumed within the family/couple, the client is integrated into working sessions with his/her partner, in situations where such a thing is possible and after a certain number of individual sessions, in order to validate, within quotidian reality, the beneficial result of personal and family restructuring as a final goal of the therapy.

In this case, the psychotherapeutic undertaking aims to identify:

- the elements of couple/family dynamics altered by the occurrence of the client's anxious-depressive disorder;
- aspects that facilitate or fuel anxiety within the couple/family;
- roles that were activated by the client's anxiety in his/her partner, new characters that appear in family life (who usually „help” the anxious person, unconsciously fuelling symptoms);
- deficient behavioural patterns;
- built alliances, changes in the members' behaviour, one towards the other, in the moment of anxious-depressive symptoms occurring and evolving, established dependence, the nature of boundaries, assuming new roles (e.g. the child becomes over adapted, he „becomes the parent' in order to take care of his parent; the partner, who was considered weak before the manifestation of the client's anxious-depressive disorder, becomes the powerful one, being invested by the anxious person with new responsibilities by means of a nutritive, realistic relationship; the altering in the couple balance will now be operated by the occurrence of anxiety, which neurotically obliges the client's life partner to integrate roles that were not assumed).

3. the analysis of the across generations dimension – key themes, the crypt/ghost phenomenon, myths and secrets within the family unconsciousness that may show what the symptom „solves” within the present existential dimension.

It must be mentioned that dimensions interconnect. She comes back to the existential dimension from the across generations one (an aspect, which is concretely achieved during therapy by reparatory labour). The standstill brought to the surface is converted and the client found the meaning for suffering („how can I help myself?”, „what lesson must I learn?”).

#### V. Conclusions

The structuring onto three dimensions (symptoms, existential and across generations) of

working methods and techniques used within the integrative-unifying psychotherapeutic endeavour highlights the importance of monitoring the client's individual dynamics.

Tackling anxiety from the angle of the three dimensions addresses the idiopathic nature of symptoms, specific to each client, and it gives new meaning to life. Based on that, the client builds some new psychological landmarks of personal development (ensuring continuity on the time axis: the past-present-future relationship). The psychotherapeutic undertaking implied relying on understanding and finding new meaning to the individual psychological mechanism which served as the trigger mechanism of the anxious-depressive disorder. Being a creative endeavour, which in turn monitors the inner mapping of the client, his verbal and non-verbal, metaphorical and symbolic responses, the techniques are used so as to pass from one dimension to another in order for the client to gain access to his personal messages and symbols of anxiety

with an understanding view that provides new meaning to standstills and experiences not integrated, in order to change one's own life scenario.

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