Treatment Methods in Psychiatric Social Work

Unit-IV

Paper-IV

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4.2 Approaches of Counselling:
1. Psycho-analytic Approach to Counselling:
   • Psycho-analytic Approach to Counselling is given by Sigmund Freud (1856-1939). During his career as a medical doctor, Freud came across many patients who suffered from medical conditions which appeared to have no ‘physical cause’.
   • This led him to believe that the origin of such illnesses lay in the unconscious mind of the patient.
   • Freud therefore started to investigate the unconscious mind, so that he could understand his patients and help them recover.
   • Psycho-analytic counselling is based on Freud’s idea that true knowledge of people and their problems is possible through an understanding of three particular areas of the human mind.
   i. The Conscious – things that we are aware of, including feelings or emotions, such as anger, sadness, grief, delight, surprise, and happiness.
   ii. The Subconscious – these are things that are below our conscious awareness but fairly easily accessible. They may include, for example, events that we have forgotten, but will easily remember when asked an appropriate question.
   iii. The Unconscious – this is the area of the mind where memories have been suppressed and is usually very difficult to access. Such memories may include extremely traumatic events that have been blocked off and require a highly skilled practitioner to help recover.

Applications of psychoanalytic Counselling
Psychoanalytic therapy can be used by those with a specific emotional concern, as well as those who simply want to explore themselves. Understanding why we are the way we are, often brings with it a sense of well-being and a strong sense of self. As psychoanalytic therapy is considered one of the more long-term therapy types, it is perhaps less useful for those seeking quick, solution-focused therapies. Psychoanalytic therapy is a gradual process that takes time, yet the results are said to be life changing. Some believe that due to the nature of therapy, psychoanalytic work is better suited to more general concerns such as:
   1. Anxiety
   2. Relationship difficulties
   3. Sexual issues or low self-esteem.
   4. Phobias
   5. Social shyness
6. difficulties sleeping
Psychoanalytic therapy can also be applied in a group setting. This is called group analysis. This form of therapy brings together psychoanalytic techniques with interpersonal functions.

Freud maintained that the personality consists of three related elements:

- **The Id** is the part of our personality concerned with satisfying instinctual basic needs of food, comfort and pleasure. It is therefore present from (or possibly before) birth.
- **The Ego** is defined as “the realistic awareness of self”. It is the logical and common sense side to our personality. Freud believed that the Ego develops as the infant becomes aware that it is a separate being from its parents.
- **The Superego** develops later in a child’s life, from about the age of three. The Superego curbs and controls the basic instincts of the Id, which may be socially unacceptable. It therefore acts as our conscience.

Freud believed that everybody experiences tension and conflict between the three elements of their personalities. For example, desire for pleasure (from the Id) is restrained by the moral sense of right and wrong (from the Superego). The Ego balances the tension between the Id wanting to be satisfied and the Superego being over strict.

The main goal of psychodynamic counselling, therefore, is to help people to balance the three elements of their personality so that neither the Id nor the Superego is dominant.
2. Humanistic Approach to Counselling

1. Humanistic counselling recognises the uniqueness of every individual.
2. It assumes that everyone has an innate capacity to grow emotionally and psychologically towards the goals of self-actualisation and personal fulfilment.
3. Humanistic counsellors work with the belief that problems are not caused by life events themselves, but how we experience them.
4. Our experience, in turn, will affect and be affected by how we feel about ourselves, influencing self-esteem and confidence.
5. The humanistic approach to counselling therefore encourages the client to learn to understand how negative responses to life events can lead to psychological discomfort.
6. The approach aims for self-acceptance of both negative and positive aspects of our characters and personalities.
7. Humanistic counsellors therefore aim to help clients to explore their own thoughts and feelings and to work out their own solutions to their problems.
8. This is very similar to the approach used in coaching, except that coaches are more focused on the present, and less on the past. In essence, coaching aims to address the issue of ‘how’, and counselling looks at ‘why’.

The American psychologist, Carl Rogers (1902-1987) developed one of the most commonly used humanistic therapies, client-centred counselling. This encourages the client to concentrate on how they feel at the present moment, this is also the essence of mindfulness.
3. Clint-Centered Counseling:

The central theme of client-centred counselling is the belief that we all have inherent resources that enable us to deal with whatever life brings.

1. Client-centred therapy focuses on the belief that the client—and not the counsellor—is the expert on their own thoughts, feelings, experiences and problems.

2. The client is therefore the person most capable of finding appropriate solutions.

3. The counsellor does not suggest any course of action, make recommendations, ask probing questions or try to interpret anything the client says.

4. The responsibility for working out problems rests wholly with the client. When the counsellor does respond, their aim is to reflect and clarify what the client has been saying.

A trained client-centred counsellor aims to show empathy, warmth and genuineness, which they believe will enable the client's self-understanding and psychological growth.

- **Empathy** involves being able to understand the client's issues from their *own frame of reference*. The counsellor should be able to accurately reflect this understanding back to the client. You may also be interested in our pages: *What is Empathy* and *Types of Empathy*.

- **Warmth** is to show the client that they are valued, regardless of anything that happens during the counselling session. The counsellor must be *non-judgmental*, accepting whatever the client says or does, without imposing evaluations.

- **Genuineness** (sometimes termed *congruence*) refers to the counsellor's ability to be open and honest and not to act in a superior manner or hide behind a 'professional' facade. You may be interested in our page on *Truthfulness*.
4. **Gestalt approach:**

   Gestalt therapy is a client-centered approach to psychotherapy that helps clients focus on the present and understand what is really happening in their lives right now, rather than what they may perceive to be happening based on past experience.

   Main originator & developer of Gestalt Therapy Fritz Perls (1893-1970) / wife Laura Perls (1905-1990) "I am not in this world to live up to other people's expectations, nor do I feel that the world must live up to mine." --Fritz Perls

   - Gestalt is a German word which refers to the total shape of something.
   - A gestalt, or whole, both includes & transcends the sum of its parts.
   - It cannot be understood simply as a sum of smaller, independent events.
   - It is an existential/phenomenological approach
   - Therapists try to increase clients’ awareness
   - It is grounded in the client’s “here and now”

**Key concepts of Gestalt Therapy:**

   Gestalt Therapy is another type of counseling that is based upon the existential framework. Key elements include:

   **Phenomenological Basis:**
   You are seeking to focus on the client’s perception of reality

   **Experiential:**
   The client is being asked to come to understand about what and how they are thinking, feeling, and doing as they interact with the therapist and the other people in the world

   **Existential:**
   The person is to take responsibility for their destiny and identity

   **Awareness:**
   A key element in this theory is helping the client come to an awareness of what he or she is doing and experiencing

   **The Now:**
   Our “power is in the present”. The only moment that is significant is the present. For many people the power of the present is lost

   **Unfinished Business:**
   Feelings about the past are unexpressed. For Example: hatred, pain, anxiety, grief etc. These feelings are associated with distinct memories & fantasies

   **Result:**
   Unexpressed feelings can result in physical symptoms. For Example: Preoccupation, compulsive behavior & self-defeating behavior etc.
So Gestalt therapists emphasize paying attention to the bodily experience.

- Gestalt’s basic understanding of the human being is that people can deal with their problems, especially if they become fully aware of what is happening within oneself and outside of oneself.
- Change happens in a person’s life when he or she can reintegrate a disowned part of the self back into the mix of identity.
- Gestalt is a process of “reowning” parts of the self that have been disowned.

Gestalt View of Human Nature:

- Living with “masks” and does not promote change.
- Problems begin when a person tries to be who or what he or she isn’t.
- In fact it promotes stagnation of the personality.
- According to Gestalt, the more a person tries to be who they are not, the more they stay the same.

Therapeutic Goals:

- Move towards increased awareness of themselves.
- Gradually assume ownership of their experience.
- Develop skills and acquire values that will allow them to satisfy their needs without violating the rights of others.
- Become more aware of all of their senses.
- Learn to accept responsibility for what they do, including accepting the consequences of their actions.
- Move from outside support toward increasing internal support.
- Be able to ask for and get help from others and to give to others.

Therapist’s Function and Role:

- Therapist encourages the present time, Bring the past into the present by re-enacting it in the present.
- Therapist should focus on the “what” & “how” of a person without asking the “why” questions. This is to promote an awareness of the moment.
Questions such as “What is happening now?” or “What are you feeling in this moment?” are used to intensify the experience of the present & create awareness. “Why” questions lead only toward rationalizations and “self-deceptions” away from the immediacy of the moment.

- Pay attention to the client's body language.
- Focus on the language

**Therapeutic Methods/Techniques:**

- Experiments
- Role-play
- The 'open chair' technique
- Dialogue
- Discussing dreams
- Attention to body language
- Fantasy
- The Body as a Vehicle of Communication
- Identification
- Locating emotions in the body
- Repetition and exaggeration
- Confusion
4.3 Psychotherapy: Meaning, Objective, Level Techniques and Models

Meaning of Psychotherapy:

Psychotherapy is a treatment process to help people deal with psychological issues, such as depression, anxiety, and posttraumatic stress disorder. Unfortunately, many people are unaware of how it works or how problematic untreated mental health issues can be. This lesson covers what psychotherapy is and how it

Definition:

A process which attempts to help the patient relieve symptoms, resolve problems or seek personal growth through a structured relation (i.e. specified goals and methods) with a trained professional therapist.

Objective of Psychotherapy:

- Removing existing symptom
- Modifying existing symptom
- Changing disturbed patterns of Behavior
- Promoting positive personality growth and development
- Find out causes for emotional problems
- Environmental manipulation
- To Improve IPR
Techniques of Psychotherapy:

- Listening
- Confrontation
- Clarification

Listening:

- Out of all the psychotherapy techniques, listening is perhaps the most essential. It is absolutely imperative that you understand what the client is saying, and if you don’t listen well you won’t be able to do that. Now, people think they are great listeners until they actually try to do therapy. Then, they realize that they really haven’t been listening at all. Rather, they have been “waiting to speak” as most people do.

- Listening properly takes a great deal of effort and concentration. You must clear your mind of all thoughts and distractions and focus only on what the person is saying. Oh, and not just what they are saying but how they are saying it. Although it sounds simple, this is actually quite difficult.

- A helpful technique is to paraphrase what the client is saying. This will help you slow down and focus. But don’t overdo this- you’ll sound like a parrot and the client will wonder why they are paying you good money just to repeat whatever they say.

Confrontation:

Another essential counseling technique is confrontation. And it’s another thing that is simple in concept but difficult to do, particularly for novice therapists. But it is actually a lot less scary than it sounds. When you confront a client you don’t do it because you are angry at them, or because you are trying to force them to see your viewpoint. You do it because you are genuinely confused. You see, they have either said or
have done something that conflicts directly with something they said or did earlier. What you are doing is expressing confusion about their inconsistencies, in the spirit of understanding them better so that you can help them. Framed that way, confrontation is a lot easier for therapists to swallow.

Clarification:

- Another great technique is clarification. Think about one of the most common reasons clients come to therapy: poor communication skills. And that includes their communication with you. So, you’ll have to ask questions in order to make sense out of their stories. But the most beautiful thing about this technique is while you are doing this, the client is also doing some work. See, they have to clarify it for themselves before they can clarify it for you. And...sometimes that is enough to actually address the issue itself! There have been occasions where my client didn’t need to return for future sessions, because he or she solved the problem for themselves during the intake session by answering my questions.

- Now, you have to be careful with this technique as to not make the client feel that they are being interrogated. I am a naturally curious person, and so this technique works well for me. Expressed in the spirit of wanting to understand the client better, it’s hard to go wrong.

Modals of Psychotherapy:

- Behavior Therapy
- Cognitive Therapy
- Dialectical Behavior Therapy
- Interpersonal Therapy
- Psychodynamic Therapy
- Family Therapy
- Group Therapy
4.4 Transactional Analysis: Meaning, Objective, Stages, Merits and Demerits

**Meaning of Transactional analysis:**

The Transactional Analysis refers to the psychoanalytic process wherein the interpersonal behaviors are studied. In other words, a social psychological model that talks about the personal growth and personal change, i.e., identifying the ego states of each individual to understand their behaviors and altering them to solve the emotional problems.

This model was originally developed by Dr Eric Berne, who during his observation found that his patients behaved in a way as if several different people were inside them. This forced him to study the personality and dynamics of self and its relationship with others which helped in determining the kinds of behaviors that an individual shows in different real time situations.
Objective of Transactional Analysis:

1. Awareness:

   The Johari Window

   Known to others
   Known to self
   Unknown
   Hidden
   Open
   Blind

3. Structural Analysis (Ego States):

   Parent ego state
   Attitudes, behaviours, thoughts and feelings taken in from parents or parental figures.

   Adult ego state
   Behaviours, thoughts and feelings which are direct responses to the current reality.

   Child ego state
   Behaviours, thoughts and feelings replayed from childhood and childhood decisions.

Ref: Eric Berne (1961)
4. Analysis of Transaction:

5. Life Positions:

<table>
<thead>
<tr>
<th>A BRIEF STUDY OF THE FOUR LIFE POSITION</th>
</tr>
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<tbody>
<tr>
<td><strong>I am not ok, you are ok</strong></td>
</tr>
<tr>
<td>(Therefore the best I can do is to get away from others or hide myself)</td>
</tr>
<tr>
<td><strong>DEPRESSIVE POSITION</strong></td>
</tr>
<tr>
<td><strong>I am ok, you are not ok</strong></td>
</tr>
<tr>
<td>(Therefore I best get rid of you to be ok)</td>
</tr>
<tr>
<td><strong>PARANOID POSITION</strong></td>
</tr>
<tr>
<td>(mentally depressed)</td>
</tr>
<tr>
<td><strong>I am not ok, you are not ok</strong></td>
</tr>
<tr>
<td>(Therefore there is no hope. I can never be ok nor could you give me what I need)</td>
</tr>
<tr>
<td><strong>FUTILE POSITION</strong></td>
</tr>
<tr>
<td>(worthless)</td>
</tr>
<tr>
<td><strong>I am ok, you are ok</strong></td>
</tr>
<tr>
<td>(Therefore you and me can get on with being open with each other)</td>
</tr>
</tbody>
</table>
6. Script Analysis:

- Script can be seen as a well defined course of action that we decide on as a child.
- The theory states that we experience the world and make decisions about how we need to be in order to survive in it.
- Script analysis is the method of uncovering the 'early decisions, made unconsciously, as to how life shall be lived'.
- The purpose of script analysis is to aid the client (individual or organizational) to achieve autonomy by recognising the script's influence on values, decisions, behaviors and thereby allowing them to decide against the script.

7. Game Analysis:

- An ongoing series of complementary ulterior transactions progressing to a well defined, predictable outcome can be conceived as a game
- A game involves a recurring set of transactions
- Repeating sequences of transactions that lead to a result subconsciously agreed to by the parties involved in the game
- This transaction may involve a concealed motive or gimmick.
Stages of Transactional Analysis:

1. Social control

2. Symptomatic relief

3. Transference cure

4. Script cure

Stage 1 – Social Control:

- In this first stage of cure, the person takes control over her behaviors, employing an Adult ego – state.
- She amends her social interactions to avoid the ones that had been causing her difficulty or pain and to substitute other behaviors that will produce more congenital results for her.
- At this stage of cure, the person does not set out to make any change in unresolved child feelings or confront outdated parental commands.
- She simply overrides these past influences by here and now behavioral control.
- It is by these change in behavior, together with the client's reports of outcomes, that we can observe the attainment of this first stage of cure.
Stage 2 – Symptomatic Relief:

- At this second stage, the person still maintains Adult as the ego state in charge of the process.
- However, now she goes on to address some of the problematic content of Child or Parent ego state directly.
- For example, she may reopen and express some of the unfinished feeling she is still carrying from moments of childhood trauma, always monitoring from the Adult ego state.
- In consultation with the psychotherapist, she may reappraise outdated beliefs that have accompanied these child feelings and decide to replace these beliefs with others that are more appropriate to her grown up situation.
- These changes in feeling and belief serve to reinforce, and are reinforced by, the changes in behavior she has made at the first stage of cure.

Stage 3 – Transference Cure:

- Here, the client substitutes the psychotherapist for the original parent. She now sees the psychotherapist as fulfilling a role in her script.
- But she experiences him as doing so in a more benign way than the actual parent did.
- The client may experience considerable relief from child fears and anxieties now that she has this more benevolent parent to relate to.
- She may also break free from some of her original destructive parental messages, substituting for them the positive messages she takes on board from the psychotherapist.
This stage, however, does not represent the final goal of cure, since the client still has to keep the psychotherapist around in her head in order to maintain her change.

**Stage 4 – Script Cure:**

- Berne described script cure as follows:
  
  “At a certain point, with the help of the therapist and his own Adult, the patient is capable of breaking out his script entirely and putting his own show on the road, with new characters, new roles, and a new plot and payoff. Such a script cure, which changes his character and his destiny, is also clinical cure, since most of his symptoms will be relieved by his re-decision”.

- Berne’s concept of the final stage of cure underwent some important changes during his career.

- In his early writing, for example, in Transactional Analysis in Psychotherapy, he still saw formal psychoanalysis as the ultimate route to personal change.

- Thus he spoke of the final stage of cure as psychoanalytic cure.

- By the time Berne wrote What Do You Say After You Say Hello?, he and his associates had accumulated a decade of experience in the psychotherapeutic application of script analysis.

- He had reached the view that TA’s own techniques could be used to facilitate even the most complete stage of cure, which he now called script cure.

- He now believed that the person could reach this end goal without the need of psychoanalysis.

**Merits of Transactional Analysis:**

- It can increase self-awareness.
- It promotes personal reflection.
- It helps people find more effective ways to communicate.
- It can help eliminate unhelpful thoughts, feelings, and actions.
- It can help people take responsibility for their thoughts and actions.

**Demerits of Transactional Analysis:**

- Potential for communication difficulties
- Expediting and monitoring of incoming quality
- Inflexible when flexibility may be required
- Tend to result in more delivery problems
- Quality will be only as good as required
- Suppliers provide the minimum service required
- Less effective performance by suppliers
- Customers are subject to more supply disruptions
- Supplier is not motivated to invest time and energy development of buyer’s products