PRACTICAL STEPS IN EXISTENTIAL PSYCHOTHERAPY AND ONE YEAR FOLLOW-UP OF A CASE

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SUMMARY

Psychotheraphy based on principles of Existential Philosophy has been described step-by-step. Its suitability in Indian patients has been discussed along with its effects in a case after one year follow-up.

In psychiatric training enough is spoken about psychotherapy, outlines of procedure are given, eminars are held but systematic practical steps are seldom taught. Mainly because it is considered to be highly subjective and individualistic. There is a feeling that present psychotherapeutic training is inadequate (Agarwal, 1989) and that the fundamentals of Western psychotherapy that is imparted to trainees can seldom be practiced (Neki, 1979). Existential psychotherapy has also been criticised as unsystematic and individualistic in technique (Strupp and Blackwood, 1975). In this paper a systematic step-by-step procedure of this Western form of psychotherapy is described. Its suitability in Indian patients has been discussed along with its effect in a case after one year follow-up.

Existential Principles

Human birth is natural. At birth one is placed in a concrete and historical environment. While living in this logically ordered society one is subjected to distorted reality of himself and others (Herbert, 1975), though in reality one's presence is subjective and is beyond theorizing (Manfred, 1968; Srinivasan, 1967). Objectivity not only dehumanises but it leads to self estrangement (Srinivasan, 1967). Estrangement in modern man is connected with changes in society (Heinmann, 1953), and his total involvement in interpersonal (social) existence to cope with his anxities and universal fear of death (Fuller and McMurrin, 1969.; Srinivasan, 1967). However from social context the emphasis should not be on "what causes suffering but on the kind of world experienced by the suffering person" (Herbert, 1975). The ultimate task is to come to grips with frustrations and become conscious and responsible of one's own idiosyncratic existence.

Self realisation, the final goal of psychotherapy is achieved by de-emphasis of symptoms or complaints in a totally open, non defensive encounter and by guiding to stand out and over while being part of the world (Herbert, 1975; Frank, 1986). Freedom the other goal of psychotherapy is attained by overcoming the social forces that seemingly determine man's destiny. By this one succeeds in ceasing to blame the past and takes charge of one's own destiny and achieves freedom and self-realisation (Strupp and Blackwood, 1975).

PROCEDURE

Step no-1. Information gathering Subject is asked to write down

- (a) Symptoms or problems in detail.
- (b) Possible causes for above symptoms

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as the subject believes and whether he considers them somatic, psychological or both.

(c) Description of family and significant social members and personal relation with them.

Step no. 2. Information analysis

The subject is made to read out the information written. Points which are not clear are clarified and additional information is added if any. This step hetps to build up rapport, to understand the subject's immediate problems, his mode of perception of events, mode of reasoning and the persons significant to him.

Step no. 3. Explaining rules and nature of psychotherapy

The nature and rules of psychotherapy are explained in following explicit terms

- 1. As the problems are basically psychological it will be dealt psychologically.
- 2. With the help of dialogue the subject will be made to think rationally about human nature in general and his nature in particular.
- 3. Statements, remarks and questions during discussion are intended mainly to know the responses, analyse them and guide the subject to think in an analytical way. During this process the remarks of the therapist could be derogatory and socially unacceptable. Therefore until the end none of the therapist's statements should be taken as the final opinion or advice.
- 4. The discussion should not be taken as an intellectual discourse. The subject should be free and frank to express opinions, seek clarifications, challenge, and dispute the therapist's statements so as to understand the subject matter under discussion. He

should not have any inhibitions or reservations to express views and opinions even when they appear to be socially unacceptable, immoral, contradictory, impracticable, unintelligent or contrary to therapist's statements.

Step no. 4. Reasoning and insight giving sub-step No. 4-A

The subject is asked to write answers for following questions in detail;

- 1. What is life?
- 2. What is the purpose of life?
- 3. Why are we born?

Discussion is held till the subject expresses his inability to define life adequately. In dealing with the question of 'life' and the 'purpose' invariably one tends to stress only some aspects of life and leaves out some. Sometimes the definition of life and purpose of life are dealt interchangeably. These aspects are explained to give insight to the subject that definition of life and the understanding of the purpose of life is invariably incomplete. It is made clear that though one cannot define "life" one is self certain of "what life is ?". This is followed by therapist's confession of his difficulty in defining life covering all its aspects. However a broad definition of life is given which apparently looks complete though much is left unspelt.

Example : Life is everything and anything from birth to death

Here it is pointed out that except for the two points; viz; birth and death nothing much has been explained and it cannot be explained.

In subsequent sessions the question of purpose of life is dealt similarly. Discussions are held until arriving at the inevitable answer that we do not know real purpose of life except that we are certain of death one day

The third question "why are we born?" is also discussed until it is realised that we do not know why we are born but we know for certain that we are born.

In the course of above discussion inssight begins, with a clear understanding that we are ignorant about basic question of Life, Birth and Death. We are not only unaware of our ignorance but rarely ponder over such questions. We are hesitant to accept and admit even to ourselves that we do not have answer for such basic questions.

Sub-step no. 4-B : Fallacies in our observation & thinking

The next step is to discuss about the nature and fallacies in our observations, thinking and judgment. To achieve this some common fallacies which are summarised below are explained with the help of examples from day-to-day living experiences.

1. Our observations are distorted

We experience the surface of the thing or phenomenon but not the thing in itself or noumenon (Hamilton, 1985). An event or a thing when observed cannot be interpreted as such, in absolute terms. All our observations are subjected to perceptual interpretations. This perceptual interpretation is always under the influence of factors like past experiences, know'edge, current mood state, interest, prejudice etc. Therefore what we explain of this world and society is a secondary (phenomenological) experience and not a primary (noumenological) experience (Hamilton, 1985). Thus our observations can not be absolute and always in a danger of distortions.

2. Firm belief in our convictions

We never think that our thinking is based on faulty observations and prefor-

med social prejudices which at the outset were also based on faulty observations and judgment. We hold our belief and convictions as unquestionably true. This self certainty is so strong that alternative thoughts are never entertained. We manage our affairs according to our preformed and borrowed ideas happily or even unhappily. Unhappiness is tolerated because we believe that it is inevitable and inescapable, and no attempt is made to change our reasoning and convictions. This adherance to preconceived convictions which are socially borrowed and formed by distorted reality lead to miseries.

3. Polartity of thinking

Generally we tend to think in polarity; e.g. good andbad, love and hate, like and dislike, happy and sad. However it is possible for a person, a thing or an event to be neither good nor bad, and to assume a "neutral position". As we are accustomed to think in terms of polarity we automatically ascribe positive or negative qualities. This stirrs our passions and may lead to miseries.

4. Subscription to popular or common belief (generalisation)

One tends to believe in popular notions in the society and take them as the truth. But people like Buddha, Gandhi, Socrates, Christ to quote a few, propagated ideas and beliefs totally opposite to the popular contentions which were ridiculed at the begining but later their ideas influenced the majority. If the majority were to be truthful or correct at the outset, there could not have been scope for change. Further even now there could be fallacies in our understanding of their ideas as occured to them. Hence even now there are controversies about them and dissenting note about their ideology. Therefore instead of

believing in existing popular beliefs we should think, analyse and understand them before believing and acting on them.

After explaining the common fallacies, our observations and judgments about the concepts of morality, honesty, sin, virtues, criminality can all be questioned and disputed.

This discussion brings about the understanding that our judgment is based on faulty observations. The social values are also product of such faulty observations and judgments. We are not in a position to judge ourselves and therefore others too.

Sub-step no. 4-C : Insight about nature of our society

The discussion disputing social values naturally leads to the question of the role of a person in our society. This aspect can be discussed on following lines.

It is inevitable for a person to live in the society in which one is born. In this society after their birth vast majority of people are leading a superficial life guided by others. They lack personal decision and have no sense of responsibility. Anonymity is preferred to personal uniqueness and collectivity to individuality. They live in the crowd as a mere replaceable number (Srinivasan, 1967). They are not aware of their uniqueness. They lack inquisitiveness. But it is difficult for us to make them aware of their ignorance.

As we cannot change others and our society at best we can change ourselves. It is also true that even when we want, we cannot change others unless they are also troubled and are willing for such a change. Changes can occur only in the occasions the individual encounters with his own subjectivity and individuality in a critical situation when he has to choose between the given alternatives for a life time (Srinivasan, 1967). However it is inevitable to live in concurrence with the social rules and values though they may not stand the test of truth. We should stand out and over while being part of the world. While living in this so called real life, its unreality should be understood. The difference after self realisation is to be aware of our fallacies and to strive to achieve individual freedom and uniqueness.

As the sorrow, happiness, contentedness and miseries all originate within us in our thinking and judgment, they could be mitigated only by realising the true nature of thinking concerning them. It is unwise and also unjustified to search for causes of our miseries in others and wanting them to change. Others will also have their own individuality either with realisation or without it.

Step no. 5. Conclusion

All the subject matter hitherto discussed should be summarised and reviewed with the patient. During such summarising process discussions are to be permitted.

Step no. 6. Explanations about process and procedure of psychotherapy

1. How long it will take for change ?

No one can adopt to new mode of living overnight, one needs constant practice to live in a new mode. Integrating the existential principles in one's life is a matter of gradual cultivation and not a victory achieved over night (Srinivasan, 1967).

2. Why discuss ? Why not just read the principles

The process of discussion with an introspective quality brings a deep understanding, self realisation and enlightenment. This understanding can be used to analyse problems in future. Therefore discussion should be preferred to discourse and dialogue to monologue.

3. The utility of recording of discussions

Recording discussions either on tape or on paper is necessary, because our mind cannot hold all the information which is imbibed within a short period. The recorded discussion gives for re-discussion, better understarding, optimum use and shortens dependency on therapist.

Step no. 7. Folow-up and clarifcation

After a course of psychotherapy the subject may feel that he has understood everything. However rethinking and facing real life situations may pose many dilemmas and throw up unresolvable questions. This should be welcomed and discussed during follow-up period.

RESULTS IN A CASE ONE YEAR AFTER THIS FORM OF PSYCHO-THERAPY

Brief history

Mr. S a 22 years old hindu medical student reported with complaints of pain left knee and chest, acidity, tiredness, palpitation and frequency of micturition of one year duration after failing to benefit from medical treatment. On further enquiry he complained of lack of concentration, insomnia and fear of talking to girls, of 3 years duration. He had no past or family history of mental illness. His childhood was neglected and restrictive under a strict father and uninvolved mother who died when patient was 20 years old after a brief medical illness which led to arrival of an unwelcome step-mother. He has cordial relations with his sisters, one elder and one younger. His educational environment was strict and competitive but mixed with ample extracurricular activities. His overall performance was above average but had to pay capitation to fulfill his ambition of becoming a doctor. Premorbidly he was intelligent, ambitious, idealistic, ambivert and a sensitive person. On mental status examination he was anxious and preoccupied with the symptoms and qualified for the diagnosis of Anxiety Neurosis.

After psychiatric evaluation he was informed psychogenicity of his symptoms and psychotherapy was suggested for which he consented. The psychotherapy was carried out as detailed above. Totally 8 sessions of 1 to 2 hours duration were held spread over a fortnight. Later he came once or twice for 3 months. The results one year after is self evident in answers he has given for the questions by the therapist.

Q. No. 1. With what problems did you approach me?

- Ans. I can hardly remember the problems I had when I came, but I can recollect few of them;
- 1. Left knee joint pain.
- 2. Palpitation.
- 3. Hyperacidity.
- 4. Anxiety
- 5. Fear of talking to girls, etc.

Q. No. 2. Are you free from your complaints ?

Ans. Yes.

Q. No 3. What were the principles explained ?

- Ans. Principles of psychotherapy I remember now are;
- 1. Definition of life and that nothing in life is absolute truth and therefore it should not be taken too seriously.
- 2. Think rationally and act accordingly.

- 3. Every man does what best he can do in a given situation.
- 4. Live for yourself.
- 5. Social rules and values are not absolute truth. People in the society perceive and think in their own way and comment in their own way and in their interest.
- 6. Ultimate aim is self-realisation. To know what one is in the society and live accordingly.
- 7. One should not worry about a thing over which one has no control.
- Q. No. 4. How many times did you get into situations when you had to use the principles discussed ?
- I got into conflicting situations Ans. quite a few times I could come out of them. Most important situation being my step mother gave birth to a female child eight months back. I have accepted her as my sister. Earlier I was not even ready to accept my mother herself but now I have accepted her daughter also, why? Because whether I like it or not it is going to happen that way. Every woman thinks it is her right to have children and I cannot worry about a thing over which I have no control. Developments in home front does not brother me any more.

Now I am in a better position to weigh praises and criticism of others. Earlier I used to be carried away by such things.

I cannot remember how many times I used psychotheraputic principles because it comes spontaneously to me. I cannot differentiate it from my original solution to a problem. But certainly now I am in a better position to solve any problems.

- Q. No. 5. How many times have you read the questions and answers written during the discussion?
- **Ans.** In the first 3-4 months I read it once a month afterwards I have read it 3-4 times till now.

Discussion

Diminishing interest in psychotherapy may have many dimensions. In our country this has been attributed mainly to (1) Impracticability of psychotherapy of western origin. (2) Individualistic and unsystematic nature of psychotherapy. (3) Insufficiency of practical training, besides other factors. I have attempted answers to these issues briefly.

1. Many Indian Psychiatrists have commented upon unsuitablility of Western psychotherapy in Indian setting but when they say Western it is mainly referred to psychoanalysis. The main obiections raised are; (1) The concepts of psychoanalysis are not in consonance with Indian culture. (2) Its non-directive technique is unsuitable to less intelligent and highly dependent patients. There appears to be some solution for these two main objections in existential psychotherapy. Though existentialism is Western it has enough Eastern thoughts and therefore can easily be Easternized in general and Indianised in particular as evidenced by scholarly comparison of existentialism with Hindu philosophy by Srinivasan (1967). In the author's experience too some patients during this form of psychotherapy expressed the view that most of the concepts were familiar to them but they had not understood its full dimensions. Further, existentialism deals with basic questions of existence, birth, life, death and miseries, which are common to all human beirgs in whatever culture they are. Once the central concepts are suitable for any culture the

details can be added or subtracted according to cultural beliefs and patient's acceptance and expectation. As regards the technique in existentialism there is scope to make it directive and assertive for less intelligent and introspective and analytical for more intelligent persons.

2. It is the author's view that almost all forms of psychotherapy are to some extent individualistic so also the existential psychotherapy. Extreme rigidity many a times may give birth to splintered schools of psychotherapy. Therefore individualistic approach should be welcomed as long as one does not digress too much from central and core concepts. The central and core concepts could be made systematic as exemplified in this article. Once this is achieved the individualistic approach in method of explainations, analogies given, therapist's acceptance of limitations in understanding a particular concepts etc. are more beneficial in a therapeutic setting. This is one of the reasons why the author has summarised the contents under each step, rather than rendering them in verbatim.

3. It is quite true that practical training in psychotherapy in this country is inadequate in many post graduate centers. There are various reasons for this unfortunate neglect. Some of them are :

- 1. It is highly subjective and individualistic. This objection has been already dealt briefly.
- A post graduate student in psychiatry is exposed to psychological and philosophical concepts for the first time, which are sometimes difficult to comprehend within his training period.
- 3. Some psychotherapeutic methods advocate analysis of the therapist which appears impracticable.
- 4. The existing process need quite a long time sometimes extending beyond the training period.

5. Lack of personal inclination in some students for this method of treatment.

Fortunately still there are many teachers who are inclined, interested and committed to this method of treatment who raise hope and confidence in some interested students who persue this therapeutic management in their practice. However many psychiatrist with little practical knowledge but varied and sometimes limited theoretical knowledge have to experiment with their patients at the expense of limited time they have. This was the case with present author who with some theoretical knowledge of existentialism experimented this form of psychotherapy for a few years, getting delighted and frustrated with success and failures and gradually reached this present form which is far from being final with the inquisitiveness to see whether this form of psychotherapy could be adopted to impart practical training to motivated students and colleagues, an attempt was made to impart training to a D. P. M. student and a few colleagues in which endeavour a reasonable success has been obtained.

In conclusion existential psychotherapy with concepts familiar to our culture and its flexibility of being directive or non-directive appears to be suitable to our patients. Its concepts being easy to understand and time needed to persue this kind of psychotherapy being brief, some of the motivated students can easily be subjected to a practical training during their studentship.

Note: The author has verbatim (written and taped) recording of the discussions held with some patients.

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