

Cnps 365 midterm 1 notes

Psychology, Psychotherapy



Chapter 4 & 5 Psychoanalytic Therapy • Sigmund Freud. • Freud's

psychoanalytical system = model of personality development, approach to psychotherapy • Often a benchmark used for other theories • Freudian view of human nature = deterministic • Behaviour determined by irrational forces, unconscious motivations • Biological/instinctual drives, evolve through key psychosexual stages in first 6 years of life • Instincts central • Libido = energy of all life instincts Libido, source of motivation that encompasses sexual energy but goes beyond it • Both sexual and aggressive drives are powerful determinants of why people act as they do • Psychoanalytical view – three systems for personality: id, ego, superego • Id = biological, ego = psychological, superego = social • Humans = energy systems • Id, original system of personality, at birth person is all id. Primary source of psychic energy and seat of instincts. Blind, demanding, insistent, lacks organization.

Cannot tolerate tension and discharges tension immediately. Ruled by pleasure principle (reducing tension, avoid pain, gain pleasure). Id is illogical, amoral, satisfy instinctual needs, never matures. Doesn't think, acts or wishes, largely unconscious. • Ego governs, controls, regulates personality. Controls consciousness and exercises censorship. Realistic and logical thinking, formulates plans of actions for satisfying needs. Ego checks and controls blind impulses of id, ego distinguishes between mental images and things in external world. Superego is judicial branch of personality. Includes moral code, main concern of whether action is good/right/wrong/bad. Superego represents values/ideals of society as they are handed down from generations. Inhibits the id impulses, to persuade ego to substitute moralistic goals for realistic ones and to strive for perfection. Superego

related to psychological rewards and punishments • Dreams, slips of tongue and forgetting, posthypnotic suggestions, material derived from free-association techniques, material derived from projective techniques, symbolic content of psychotic symptoms all represent unconscious.

- Unconscious stores experiences memory and repressed material
- Aim of psychoanalytic therapy is to make unconscious motives conscious.
- Anxiety – feeling of dread from repressed feelings, memories, desires, and experiences
- Anxiety develops from conflicts amongst id, ego, and super ego.
- Anxiety warns of impending danger

3 Types of anxiety, reality, neurotic, moral

- Reality anxiety – fear of danger from external world
- Neurotic and moral anxiety evoked by threats to balance of power within person
- Neurotic anxiety is fear that instinct will get out of hand
- Moral anxiety is fear of one's conscience
- Ego-defense mechanisms cope with anxiety, prevent ego from being overwhelmed.
- Defense mechanisms either deny/distort reality, or operate on unconscious level
- Psychosexual stages = Freudian development

Typical defense mechanisms: Repression, Denial, Reaction formation, Projection, Displacement, Rationalization, Sublimation, Regression, Introjection, Identification, Compensation

- Freud's psychosexual stages of development: oral stage, anal stage, phallic stage
- Oral stage – inability to trust self and others = fear of loving, close relationships, low self-esteem
- Anal stage – inability to recognize and express anger, leads to denial of one's power and lack of sense of autonomy
- Phallic stage, inability to fully accept one's sexuality and sexual feelings, difficult to accept self as man or woman.

All done within first 6 years of life, Oral(0-1), Anal (1-3) Phallic(3-6). First 6 years are foundation, if needs not met during development may become psychologically immature •Erikson's Psychosocial Perspective •Psychosexual + psychosocial development occurs together, each stage of life, faced with task of establishing equilibrium. •Crisis = turning point with potential to move forward or regress •Classical psychoanalysis grounded on idpsychology•Contemporary psychoanalysis based on ego psychology •Freudian goals include making the unconscious conscious and strengthen the ego •Blank Screen Approach – anonymous stance Transference relationship, the transfer of feelings originally experienced in an early relationship to other important people in a persons presentenvironment•Attention given to clients resistances. Analysts listens for gaps, inconsistencies, free associations, infers meanings of dream •Psychoanalytic therapy is somewhat like putting pieces of puzzles together •Free association – say whatever comes to mind, no self censorship (classical psychoanalysis) typical laying on a couch scenario •Transference – clients unconscious shifting to the analyst of feelings and fantasies that are reactions to significant others in the client's past.

Involves the unconscious repetition of the past in the present •Working through – exploration of unconscious material and defenses. Results in resolution of old patterns allows clients to make new choices •Countertransference, when therapist respond in irrational ways because their own conflicts trigger •Psychodynamic therapy – geared to limited objectives than to restructuring personality. Therapist less likely to use couch, fewer sessions per week, frequent use of supportive interventions,

more self disclosure by therapist, focus more on pressing practical concerns than on fantasy material. Aimed at increasing awareness, fostering insights into clients behaviour

- 6 basic techniques – maintaining the analytic framework, free association, interpretation, dream analysis, analysis of resistance, analysis of transference
- Carl Jung's analytical psychology is a explanation of human nature that combines ideas from history mythology anthropology and religion.
- Jung – more focus on finding the meaning in life as opposed to being driven by psychological and biological forces described by Freud.
- Jung – shaped by past and also future Present personality shaped by who and what we have been and aspire to be
- Persona – mask/public face we wear to protect ourselves
- Animus and anima = both biological and psychological aspects of masculinity and femininity
- Shadow – deepest roots and most powerful and dangerous of all archetypes,
- Jung – dreams are a pathway into unconscious, but they help people prepare themselves for experiences and events in the future, and work to bring a balance between opposites in a person. More of an attempt to express than to repress and disguise.
- Ego psychology developed largely by Erikson Psychoanalytical therapy, more concerned with long term personality reconstruction than short term problem solving

Chapter 5

- Alfred Adler – Individual Psychology
- Individual begins to form approach to life somewhere in first 6 years of living
- Humans motivated primarily by social relatedness
- Behaviour is purposeful and goal directed, more conscious than not
- Focused on inferiority feelings – wellspring of creativity
- Human behaviour not determined by heredity and environment, capacity to interpret influence and

create events •Biological and environmental conditions limit our capacity to choose and to create •Approach is holistic, social.

Goal oriented, systemic, humanistic •View world from clients subjective perception of reference = phenomenological, pays attention to how people perceive their world •Individual Psychology – Alfred Adler •Must fully understand all parts of an individual •Deterministic explanations replaced with teleological (purposive, goal-oriented) ones. •Interested in future without minimizing importance of past influences, decisions based on a persons experiences and on direction they are moving •Adler influenced by fiction •Fictional finalism, imagined central goal that guides a persons behaviour •Striving toward superiority or perfection Guiding self-ideal represents individuals image of goal of perfection •Inferiority not a negative factor in life, when experienced first in life, we are pulled by striving for superiority. •Cope with helplessness by striving for competence mastery and perfection •“ Lifestyle” A individuals core beliefs and assumptions guide each person’s movement through life and organize his or her reality giving meaning to life events “ plan of life, style of life, strategy for living and road map of life” •Develop a style of life through striving for goals and superiority •Unique style is primarily created during first 6 years of life, subsequent events may have effect on development of our personality. •Experiences not a decisive factor itself, but a interpretation of these events that shape personality •Can reframe childhood experiences and consciously create a new style of life •Social interest – action line of ones community feeling, it is the capacity to cooperate and contribute to community.

Striving for a better future for humanity •Social interest is innate, but also must be taught learned and used •Social interest is central indicator of health, feelings of inferiority and alienation diminish as social interest is developed. Expressed through shared activity and mutual respect •Community feeling – feelings of being connected to all of humanity, and being involved in making the world a better place. Lack of this causes people to become discouraged and end up on useless side of life. •Anxiety is the result of not feeling belonged. Must master 3 universal life tasks – building friendships, establishing intimacy, contributing to society. 2 added ones by Maslow and Erikson : getting along with ourselves and developing our spiritual dimension •Gives special attention to relationships between siblings and psychological birth position in one's family •Five positions: oldest, second of only two, middle, youngest, and only •Actual birth order less important than person's own view of where they are •Family relationships earliest and most influential social system.

Theory is of a social one •Therapeutic process -> forming a relationship based on mutual respect, lifestyle assessment; disclosing mistaken goals and faulty assumptions -> reeducation of client towards useful side of life. Main aim to develop client's sense of belonging and assist in adoption of behaviours and processes characterized by community feeling and social interest. Accomplished by increasing client's self awareness, and challenging and modifying his or her fundamental premises life goals and basic concepts. Adlerians favour growth model of personality more than sickness model •Treatment focused on providing info, teaching, guiding, providing encouragement to discouraged individuals. Encouragement is most powerful

method available for changing persons belief and helps build self-confidence and stimulates courage •Courage – willingness to act even when fearful in ways that are consistent with social interest •Goals: Fostering social interest, helping clients overcome feelings of discouragement and inferiority, modifying clients views and goals (changing their lifestyle), changing faulty motivation, encouraging the individual to recognizeequalityamong people, helping people to become contributing members of society. Therapists look for major mistakes in thinking/values ie mistrust selfishness unrealistic ambition lack of confidence •Therapists determine early social influences through a family constellation •Early recollections also used as assessment – They are stories of events that a person SAYS occurred before 10 years of age – Useful to help understand the client •Process of gathering early recollections is part of lifestyle assessment, learning understanding goals and motivations of client •Dreams help bring problems to surface and points to patients movement •Adlerian counselling focus on desired outcomes Private Logic – concepts about self, others, and life that constitute thephilosophyon which an individuals life style is based •Steps in therapy : Establish proper therapeutic relationship; Explore the psychological dynamics operating in the client (an assessment); Encourage the development of self-understanding (insight into purpose); Help the client make new choices (reorientation and reeducation). Labelled as Adlerian brief therapy •Step 1 – Establish Relationship – seek to make person to person contact with clients rather than starting with problem.

Initial focus on person, not problem. Therapists provide support. Pay more attention to subjective experiences of clients than techniques. •Step 2 –

Explore individuals psychological dynamics – deeper understanding of individuals lifestyle. Proceeds from two interview forms, subjective interview and objective interview. Subjective interview, counsellor helps client tell his/her life story as completely as possible.

Throughout interview, listen for purposive aspects of clients coping and approaches to life, extract patterns and develop hypotheses about what works for client. Often end subjective interview with question, “ how would your life be different, what would you be doing differently if problem was not present”. Objective interview discovers information about how the problem began, any precipitating events, medical history, social history, reasons client chose therapy at this time, persons coping with life tasks, lifestyle assessment •Adler suggests it was through family constellation that each person forms his unique view of self others and life •Adlerian assessment relies on exploration of clients family constellation •Adler reasoned that out of the millions of early memories, we will remember the special ones that project essential convictions •Use early recollection to assess persons convictions of self, others life, ethics, assessment of clients stance in relation to the counselling session and counselling relationship, verification of coping patterns, assessment of individual strengths assets and interfering ideas •After gathering info from both types of interviews, integration and summary is next •General mistakes: Overgeneralization, False or impossible goals of security, Misperceptions of life and lifes demands, minimization or denial of ones basic worth, faulty values. Phase 3 : Encourage Self-Understanding and Insight – Self understanding only possible when hidden purposes and goals of behaviour are made conscious. Interpretation deals with clients underlying

motives for behaving the way they do in present. Adlerian interpretation usually are hunches and gusses. •Phase 4 – Reorientation and Reeducation – Focuses on helping people discover new and more functional perspectives. Clients encouraged to develop courage to take risks and make changes in their lives. Want to guide patients into the useful side of life at this point (contributing to society, confidence, acceptance of imperfection, courage etc). Encouragement very important in this step. •Encouragement process helps build courage.

Encouragement involves showing faith in people, expecting them to assume responsibility for their lives, and valuing them for who they are. •Discouragement is basic condition that prevents people from functioning, encouragement is the antidote. •Clients make decisions and modify their goals in reorientation stage. Commitment very essential if they want to change. •Counsellors seek to make difference in lives of their clients. •Focus more on motivation modification rather than behavioural change. •Based on a growth model, not medical model •Flexible Chapter 6 Existential Therapy •More of a way of thinking than any style of psychotherapy •Neither independent nor separate school of therapy, nor neatly defined model with specific techniques •Best described as a philosophical approach which influences a counsellors therapeutic practice •Grounded on assumption that we're free, therefore responsible for all our choices and actions, we are authors of our lives and design the pathways we follow •Rejects deterministic view of human nature espoused by psychoanalysis (Psychoanalysis sees freedom restricted by unconscious forces, irrational drives, past events, while behaviourists see freedom restricted by

socioculture conditioning) •We are not victims of circumstances because we are what we choose to be. •Aim of therapy is to encourage clients to reflect on life, recognize their range of alternatives and decide amongst them. “ Once individuals recognize their role in creating their own life situation, they realize they have the power to change it” •One of the aims is to challenge people to stop deceiving themselves regarding their lack of responsibility for whats happening to them and their excessive demands on life •Doesn't view client as ill, and curing them like a medical model, but rather sick of life or clumsy at living. Attention given to clients present experiences with goal of helping them develop a greater presence in their life quest •Basic task to encourage clients to explore all their options for creating meaningful existence •European existential perspective focused on human limitations + tragic dimensions of life •Soren Kierkegaard – primary concern of angst (lies between dread and anxiety) Need knowledge of angst to become human. Need the willingness to risk a leap of faith in making choices •Freidrich Nietzsche – Importance of subjectivity. Kierkegard and Nietzsche considered originators of existential perspective •Martin Heidegger – We exist in the world, don't try to think of ourselves as being apart from the world which were thrown •Moods and feelings are a way of understanding whether were living authentically or not.

Phenomenology provides a view of human history that doesn't focus on past events but motivates individuals to look forward to authentic experiences •Jean-Paul Sartre –Failureto acknowledge our freedom and choices results in emotional problems. Freedom is hard to face up to, invent excuses in bad faith. Existence is not fixed nor finished, when attempting to pin down who

we are, we engage in self deception •Martin Buber – Humans live in “betweenness”, never just an I but always an other. Stresses Presence, which enables true I/Thou relationships; Allows for meaning to exist in a situation; Enables an individual to be responsible in the present. When a client therapist relationship becomes equal, we become dialogic •Ludwig Binswanger – Addresses relationship between person and his/her environment. “Thrown into the world” but still responsible for our choices and planning for future.

Existential analysis emphasizes the subjective and spiritual dimensions of human existence. •Medard Boss – Being-in-the-world, ability to reflect on life events and attribute meaning to these events. Therapist must enter clients subjective world without presuppositions. •Key figure Viktor Frankl for Existential Psychotherapy •Many people have means to live, but no meaning to live for. Therapeutic process aimed at challenging individuals to find meaning and purpose through suffering work and love •Therapist must be in touch with his own phenomenological world •Givens of existence : death freedom, responsibility, existential isolation, and meaninglessness. Bases therapy based on understanding of what it means to be human •Focus on the individuals experience of being in the world alone and facing anxiety of the isolation •Believe humans are in constant state of transition, emerging, evolving, and becoming. •Basic dimensions of human condition: Capacity for self-awareness; freedom and responsibility; creating one's identity and establishing meaningful relationships with others; the search for meaning, purpose, values, and goals; anxiety as a condition of living; awareness of death and nonbeing. •Capacity for Self-Awareness – Can reflect and make

choices as we are capable of self awareness. Greater the awareness, greater the possibilities for freedom.

Capacity to live fully expands as we expand awareness on areas such as: were finite and don't have unlimited time to do what we want; potential to take action or not to act; choose our actions; meaning is discovering how were situated in the world then living creatively; increase our sense of responsibility for consequences of choices through increased awareness; subject to loneliness, meaninglessness, emptiness, guilt and isolation; alone, yet we have an opportunity to relate to others. Decision to expand fundamental to human growth. Increasing self awareness goal for all therapy

- Freedom and Responsibility – freedom implies responsibility for our own lives. Existential guilt is being aware of having evaded commitment or choosing not to choose.

Authenticity implies were living by being true to our own evaluations of what a valuable existence is to oneself. Being free and being human are the same. Assuming responsibility is the basis for change.

- Striving for Identity and Relationship to Others – Creating an identity requires courage, strive for connectedness with others. Awareness of our finite nature gives us appreciation of ultimate concerns. Courage entails the will to move forward in spite of anxiety producing situations. Self awareness can help make everything easier for the client, and clients having the courage to admit things is a good indicator. Strength of aloneness, isolation.

A function of therapy is to help clients distinguish between a neurotically dependent attachment to another and a life affirming relationship in which both persons are enhanced. Fear of dealing with aloneness can cause one

being trapped. •Search for meaning – Existential therapy can provide framework for helping clients challenge the meaning in their lives. Therapists trust is important in helping clients trust their own capacity to discover a new source of values. Meaninglessness in life can lead to emptiness and hollowness, or a existential vacuum. Often happens when people are not busying themselves. Establishing values that are part of a meaningful life are issues that become the heart of counselling. Logotherapy designed to help clients find a meaning in life.

Therapist should be pointing out clients can discover meaning even in suffering. Shows human suffering can be turned to human achievement. Like pleasure, meaning must be pursued obliquely. •Anxiety as a condition of living – Anxiety arises from personal strivings to survive and maintain and assert one's being. Existential anxiety is the unavoidable result of being confronted with givens of existence – death, freedom, choice, isolation, meaninglessness. Existential anxiety can be a stimulus for growth. Anxiety can indicate when a person is ready for personal change. Can't survive without anxiety. Neurotic anxiety is out of proportion to the situation, not aware of it, and tends to immobilize a person.

Van deurzen says that existential therapy not to make life seem easier or more comfortable, but to encourage clients to recognize and deal with sources of their insecurity and anxiety. More self confidence leads to less anxiety. •Awareness of Death and Nonbeing – Death is not negatively, but hold awareness to death as a basic human condition which gives significance to living. Necessary to think of death when thinking significantly of life. Death should be a motivation to live fully. Awareness of death is a source for

zest for life and creativity. People who fear death fear life. Realization of death makes us realize more clearly our actions count, we have choices, we must accept responsibility for how well we are living. Existential therapy considered an invitation to clients to recognize the ways in which they aren't living a fully authentic life and to help them make choices that will lead to what they are capable of being.

- Assist clients moving toward authenticity and learning to recognize when they are deceiving themselves
- No escape from freedom, we are always responsible
- Helps clients face anxiety and engage in action that is based on the authentic purpose of creating a worthy existence
- Teach clients to listen to what they know of themselves
- Assist clients in recognizing they aren't fully present in therapy and to show them how the pattern may limit them outside of therapy; support clients in confronting anxieties; help clients redefine themselves
- Increased awareness is central goal
- Therapist need to understand subjective world of client

Clients are expected to go out into world and decide how they'll live differently and must be active in therapy process, as they must decide what fears guilt and anxieties they will explore

- Major themes of therapy sessions include anxiety, freedom, responsibility, search for identity, living authentically, isolation, alienation, death and its implications for living, continual search for meaning. Assist people in facing life with courage hope and a willingness to find meaning in life
- Therapists strive to create caring and intimate relationships with clients, core of the relationship is respect. Display genuine concern and empathy.
- Not technique oriented
- Priority to understand the clients world.
- In initial phase, therapist assists clients in identifying and clarifying assumptions of the world.
- In middle phase, clients

encouraged to fully examine source and authority of their present value system. Final phase focuses on helping people take what they are learning of themselves and put it into action •Appropriate for people with developmental crises, experiencing grief and loss, confronting death, facing a major life decision •Most appropriate for clients that are committed to dealing with their problems about living and for people who feel alienated from the current expectations of society or those searching for the meaning of their lives •Highly relevant in multicultural context, doesn't have a particular way of viewing or relating to reality, broad perspective •Main limitation is the level of maturity, life experience, and intensive training that's required of practitioners. Chapter 1, 2, 3 •Counselor must be authentic and shed stereotypes, otherwise client will keep themselves hidden •Therapists serve as models for clients, clients will take from us. Effective therapists have: Identity, respect and appreciate themselves, open to change, make choices that are life oriented, authentic, sincere, honest, sense of humor, make mistakes and willing to admit them, live in present, appreciate influence of culture, have sincere interest in welfare of others, effective interpersonal skills, deeply involved in their work, are passionate, able to maintain healthy boundaries •Having been a patient first greatly contributes to being a counsellor •Counsellors role is to create a climate in which clients can express themselves and arrive at solutions that are best for them, and their values not your own. •Mandatory ethics – view of ethical practice that deals with the minimum level of professional practice •Aspirational ethics – higher level of ethical practice that addresses doing what is in the best interest of clients •Positive ethics – do their best for

clients rather than simply meet minimum standards to stay out of trouble

- Difficult to strike a balance for informed consent •