

# [Existential therapy focuses](https://assignbuster.com/existential-therapy-focuses/)

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Julia is a 43-year old woman who claims that she never experienced the feeling ofhappiness. She said that there are certain times when she had been feeling that her life is progressing well as compared to other times; however she had never remembered feeling any sense of joy in her entire life. Julia said that most of the time she had always been pessimistic on everything new. She had never really believed that there was a man who is right for her and, apparently, due to this notion, she had remained single. It is really difficult for her to express amusement and Julia claims that she does not have the sense of humor.

Often, she sighs she always has the sentiment of carrying on her shoulders the weight of the world. Julia’s has actually been diagnosed with a chronic weight problem. She has always been on a diet; however, her weight has kept going up and down the scale. She says she has a great need for sleep; however, at most times she experiences insomnia and walks around all day feeling tired. Julia perceives that the blame for this is on her energy and its chronically low level. She has always stressed up with what could have been rather simple decisions.

She claims that she loathed her being indecisive. There are people who accused her of devoting 50% of her day with disagreements toward herself. Tracing back to her high school days during her junior year, the guidance counselor advised her to work on her very low self-esteem. At her age right now, Julia feels that it is too late to change, and she had already accepted the fact that she will forever stay unfulfilled and unhappy. Julia is reported to have been suffering from a mild and long-lasting form ofdepressionclassified as dysthymia.

This type of depression is also considered as a minor type of depression that is characterized by its long-term effects. With this, people often suffer all throughout their lifetimes. Dysthymia is in general identified in people who have experiences of its symptoms every day within two years and without greater than two months p of having no symptoms. In adolescents and children, the principal symptom is dissimilar in comparison with the symptoms experienced by the adults. The adults initially experience extreme sadness, while adolescents and children habitually manifest defiance and irritability.

The children usually tend to become inferior in school specifically during the stage of depression. Aside from the feeling of being depressed, the major symptoms should be prevalent in order to diagnose dysthymia which is overeating or poor appetite, oversleeping or problems sleeping, low self-esteem, low energy, poor concentration, feelings of hopelessness and difficulty in making decisions (Williams, Barrett & Oxman, 2004). The depression known as dysthymia has been known to affect two to three women for every man, and is perceived to be instigated duringchildhoodand adolescence stages.

If this is left untreated, the dysthymia will generally carry on throughout the life of a person. People who are diagnosed to have dysthymia frequently have other associated disorders like apersonalitydisorder, anxietydisorder or phobia (Williams, Barrett &Oxman, 2004). One of the most widespread psychological problems is depression; it affects almost everybody in the course of the depression of afamilymember orpersonal experience. Every year more than 17 million adults in the US experience a phase of clinical depression. The cost of human suffering is unable to estimate.

It can cause interference with the normal performance or functioning, and normally roots problems with family and social adjustment and with work as well. It can cause extreme suffering and pain not only to those directly affected by the disorder, but as well as those who are concerned with theirhealthand welfare. Moreso, serious depression can actually destroy the life of a family and the entire life of the person suffering from depression (Williams, Barrett &Oxman, 2004). Depression has tremendous impact including extreme emotional pain; as it disrupts the millions lives of people, it unfavorably affects the lives of friends and families.

Likewise, it reduces the absenteeism and productivity of the individual at work and has considerably negative encompassing impact on the economy as well. Depression is considered a psychological condition which changes how a person feels and thinks and it also affects the person’s sense of physical well-being and social behavior. People have all felt sadness at certain points of time; however that is not considered depression. There are times that people have been feeling tired from working too hard or are easily discouraged when facing very serious and complicated problems.

Such situations are not also considered as depression. These kinds of feelings normally pass within a period of few days or a matter of weeks, by the time the people have become adjusted to thestress. However, if such feelings seem to be present, and have intensified and have began to cause interferences in school, family responsibilities or at work then this can be considered as depression. The reality lies that depression can affect almost anyone, having been identified, majority of the people diagnosed with the psychological problem of depression have been successful with their treatments.

Unluckily, depression is usually not diagnosed, for the reason that many of its symptoms imitate physical illness, like appetite disturbances and sleep. The recognition of depression is the initial step towards treatment (Williams, Barrett &Oxman, 2004). The type of depression the client is suffering is the dysthymic disorder which is characterized by chronic depression, except that it has a lesser amount of severity compared with a major depression. The crucial indication for dysthymic disorder is an approximately every day depressed disposition for at least two years, although lacking the needed criteria for the type of major depression.

Sleep, disturbances in appetite, low self-esteem and low energy, are more often than not a part of the medical representation as well. People who have been diagnosed with dysthymic disorder will frequently claim that they do not remember not having the feeling of depression; however they may be reasonably efficient in the aspect of managing their lives, even though the indications are harsh enough to root interference and distress in their important role responsibilities in life.

It is imperative to have an absolute material to overcome any physical illnesses that could possibly be causing the state of depression. In addition, if the affected person has a chronic medical condition which seems to be the major cause of the depression subsequently the accurate conclusion may be a mood disorder because of a serious medical condition, despite of meeting the criteria of a dysthymic disorder. The argument lies as to whether the condition is the root of depression instead of creating a distress which is chronically psychological in nature that has been the cause of depression.

Regardless of the long term background of dysthymic disorder, the aid of psychotherapy is helpful in order to reduce the indications of depression, and can assist the person in organizing their life more. There are people affected with dysthymic disorder who are able to respond well enough to medication with the use of antidepressants, aside from psychotherapy, an evaluation for the chosen medication is considered ideal as well, moreover consulting a psychologist is also needed (Adler, Irish & McLaughlin, 2004). There are many ways in order to identify dysthymic disorder.

It is greatly associated with the changes in feeling, thinking, physical well-being and behavior. In terms of changes in feelings, a lot of people feel sad for no reason at all. Some have reported that they are not enjoying things that most people enjoy. They are lacking ofmotivationand are on the run of getting indifferent. They usually are tired and have the feeling of slowing down. They are also irritable and are experiencing difficulty in controlling their temper, eventually it can lead to feelings of hopelessness and helplessness (Franklin, 1999).

In terms of the changes in thinking majority of the people are experiencing extreme difficulty in decision making and concentration. There are also affected individuals who have been reported to be suffering with problems in terms of forgetting a lot of things most of the time and having short term memory. Thinking and thoughts of negativity are the major attributes of depression. Poor self-esteem, pessimism, self-criticism and excessive guilt are very much common and for some people affected with more serious type of depression usually have very self-destructive thoughts (Franklin, 1999).

In terms of physical well-being, during depression, there are negative emotional feelings which are most of the time associated with negative physical emotions. Despite getting more sleep, chronic fatigue is also common. Most of the people have the difficulty to have normal and sound sleep, they usually stay awake for very long hours or are awaken from time to time, for some, and they sleep for longer hours, even much longer than usual and they still feel very tired.

Most of them have also loss their appetite, they complain a lot on many pains and aches and they usually feel slowed because of the depression which they have been experiencing (Franklin, 1999). When it comes to behavior, the affected people feel more apathetic, simply because that is how they are feeling. They are also uncomfortable with the presence of other people and they have the tendency to withdraw themselves from society. They either eat more or eat less as a result of changes in appetite.

They also cry excessively due to chronic sadness. Oddly enough, they complain about anything and they usually manifest outbursts of temper and anger. On the extreme aspect, affected people usually display negligence on how they look and much worst is neglecting their hygiene and personal care. They also tend to lose their sexual desires which leads to lack of sexual activities. As gees, a person suffering from depression is not doing much work, and what suffer are their household responsibilities and work productivity (Franklin, 1999).

Based on the object relations theory, depression is due to problems which people have in terms of developing the representations of healthy and sound relationships. It is an outcome of a constant fight which people who are depressed bear for them to try and sustain their emotional contact with their desired things. There are two types that such process can follow the introjective and anaclitic patterns. Although these terms are presently not used in the DSM, there are therapists which tend to associate them with various types of depression.

Using the Adlerian Therapy as a mode of growth, it emphasizes an optimistic human nature view and that people have the control on their own fate. People begin at a tender age in fashioning their very own distinct lifestyle and such style remains reasonably unvarying all the way through their lives. People are motivated in terms of formulating and setting theirgoalsand how to deal the tasks and social interests in life. The therapist in this approach needs to compile the family history as much as they can, with these data, they can help the client to set goals and have the idea of the past performances of the client.

This will help to challenge and encourage the clients. The focus of the therapist are to examine their lifestyles and the therapist will do his or her part to form a mutual trust andrespect, together with the client, they will set goals and encouragement to help the client to reach the goal and the therapist can eventually give recommendations or suggestions as to how the client can achieve the goals (Psyweb. com, 2008). Carl Jung, on the other hand, thought that there is no therapist who can lead his clients further than he had gone himself.

There is no such therapist who will be able to help a depressed people on the inner selves except they are incessantly struggling with their own cataleptic substance. The premise of the wounded healer is eternally valid and universal. It is archetypical. The thoughts and images which are emotionally charged have universal meanings. Existential therapy focuses on the freedom of choice in the endeavor to shape a person’s life. It teaches one to be accountable in shaping his or her own life and also involves the need for self-awareness and determination.

The individuality of each person shapes his or her own genuine personality which begins from the infancy stage. Existential therapy is focused on both the present and future. The therapist in this case guides and helps the client to realize the many possibilities which are in store for him in the future. The therapist will impose a challenge to the client for them to recognize that they are responsible in what transpires within their lives. This kind of therapy is very much suitable in helping clients make good dealings and wise choices in their lives (Psyweb. com, 2008).

Gestalt therapy facilitates the integration of the mind and body factors, by means of stressing integration and awareness. The main goal of the gestalt therapy is the integration of thinking, behaving and feelings. The client is viewed as having the capability to be aware of how their earlier life influences may have been the factors which changed their lives. The client is guided to be aware of theirresponsibilityin their own selves, to finish unfinished matters, how to avoid problems, in the awareness of now and to experience things in a positive light.

The therapist will take the role of helping their client to discover the awareness of each of the moments they experience in their life. They will challenge the client to gain the acceptance of their responsibilities in terms of taking care of themselves instead of relying to others. In this approach, the therapist can utilize confrontation, dialogues with polarities, or role playing to reach their set goals or by means of dream analysis. As such can improve treatment like marital or family therapy, crisis intervention, training, psychopathic disorders or children behavior problems (Psyweb. com, 2008).

Rational-emotive therapy is a well action-oriented approach which deals with the moral and cognitive state of the client. This kind of therapy emphasizes the ability of the client in terms of changing and thinking on their own. The therapist in the rational-emotive approach strongly believes that people are brought to the world, endowed with the ability if thinking rationally, but can as well become a victim of thinking irrationally. The therapist emphasizes the ability of the clients to think, take action and make sound judgments.

Through which, the therapist will make use of direct therapy and it is also believed that irrational thinking and irrational behavior results to neurosis. Both the cognitive-behavioral and rational-emotive therapist perceives the problems of the clients are due to their childhood as well as their belief system, which was honed during the childhood phase. The therapy will consist of methods which involve dealing and solving behavior and emotional problems. The therapist will also help the client to eradicate their self-defeating outlooks and to teach them to rationally view their life (Psyweb. com, 2008).

Most of the time, antidepressant medication is very much recommended for the depression of dysthymia. For client Julia in thiscase study, the approach of psychotherapy is the primary step to treatment. Initially, supportive counseling will help the affected person to ease the pain and therefore the feelings of hopelessness can be addressed. Next, cognitive therapy will be utilized to alter the unrealistic expectations, pessimistic ideas and critical evaluations that result to depression.

It can help the depressed person to distinguish their problems as minor or critical, and such can help them accept life (HealthPlace. com, 2000). Then the therapy of problem solving follows to address the client’s problems and later on use the behavioral therapy to help the client develop the skills of coping and to resolve their conflicts with their relationships, thus can be effective for the treatment of dysthymic disorder of depression.

## References

1. Adler DA, Irish J & McLaughlin TJ. (2004).