

## **A Specific form of Psychodynamic Oriented Psychotherapy for Emotional Maturity**

**Alice Chacko<sup>1</sup>, Sabiha Alam Choudhury<sup>2</sup>**

<sup>1</sup>Assam Don Bosco University, Guwahati

<sup>2</sup>Mizoram University, Aizawl

<sup>1</sup>anjanafcc@gmail.com

### ***Abstract***

Knowledge of oneself is a basic key in acquiring maturity through persistent intellectual and emotional advancement. People are selected and promoted in every field, evaluating their capacity to manage emotions. It is prime time to understand the fact that, success of the people today depends not only on their IQ level but of their EQ, irrespective of all the innovative facilities of the modern world. Psychotherapy is a powerful tool in the pursuit of this self-knowledge and a profound help in reaching integral maturity as it deals with both the structure and psychodynamic of an individual. Today's advancing technological and secular world makes extraordinary emotional demands on human beings and requires strong emotional maturity as a psychic resource to withstand the intense stress modern life demands. This article explores the psychodynamic oriented psychotherapy along with the theoretical background of humanistic psychology, Christian anthropology and psychodynamics, be a useful instrument in improving emotional maturity. This article will elaborate features, techniques, aim and uniqueness of this specific form of psychotherapy. It also details an account of determining factors and distinctive aspects of this relevant psychotherapy.

**Keywords:** -psychodynamic; psychotherapy; emotional maturity.

### **Introduction**

Human beings are inclusive of body, mind and soul. At any time, any one of us may need help if one of these three characteristics is impaired in some way. In the case of psychological concerns, Psychotherapy is a beneficial tool which aids those suffering from some form adversity. Over time, advancement in various kinds of psychotherapies have materialised from different schools of psychology with the aim to help individuals overcome distressing psychological problems. Maladaptive behaviours, feelings and thoughts issuing from nature-nurture hazards are prevalent in today's hectic consumer society affecting many with problems not always easy to resolve. Psychotherapy offers solutions which have a significant impact on a person's challenges as well as the capability to improve the quality of their lives. Furthermore, it is an asset to help re-educate mentally, emotionally and psychologically disturbed individuals to reevaluate their mental state and their ability to reason without anxiety or stress as well as effecting their overall well-being in mind, body and spirit.

### **Psychodynamic oriented Psychotherapy**

Psychotherapy in general, is not only a scientific advantage, but it can also be considered as an art or tool. According to Weiner & Bornstein (2009), the goals of

psychotherapy are easy to describe but not easily achieved. In the opinion of Truant & Lohrenz (1993), “the ultimate goal in any therapy is the removal, change of syndromes, symptoms or pattern of thinking, feeling and behaviour or a disposition to these that is regarded as having an emotional basis” (p.9). Psychotherapy has its origins in psychoanalysis – the “talking cure,” (Breuer & Freud, 1895/2001, p.30) a treatment method that operates through linguistic action and interaction (Marx et al. 2017) between the therapist and patient first developed by Sigmund Freud (Vaughan, 1998).

Psychotherapies differs in goals, focus and approaches. Psychoanalytic and psychodynamic terms are used alternatively in discoursing psychotherapy (Gabbard 2007; Shedler, 2010). Psychodynamic oriented psychotherapy focuses primarily on the consequences of past experience in moulding of patterns of behavior and expectations through certain cognitions and interpersonal styles of interactions (Ursano et al, 2004). A strong ego function, good intelligence, the capacity for self-examination, and the skill to speak about one’s own thoughts and feelings are essential as it simplify processing in psychotherapy (Cabaniss, 2011). All these are essential since this type of psychotherapy explores a person’s life in an effort to enable them to resolve conflicts and determine the influence of the unconscious as well as the nature of interpersonal relationship. Moreover, it can change the maladaptive defences into coping mechanisms and take control over one’s emotions. The dynamically based psychotherapies, all offshoots of psychoanalysis, and which require one or two weekly scheduled sessions between the client and the therapist (Goldstein, 2001).

## **Features of Psychodynamically oriented Psychotherapies**

### **Therapeutic Alliance**

Establishing a good therapeutic relationship and productive working alliance is one of a therapist’s major tasks when therapy sessions first begin (Horvath, 1995). Regardless of the type and goal of the sessions, psychotherapy takes place in an interpersonal relationship between the client and the therapist. A client’s previous relationship experiences and their capacity for internal objective relations are very significant in forming therapeutic alliance (Truant, 1999). It is a means to form better relationships outside of therapy (Truant & Lohrenz, 1993). Therapist and client come together with a common goal focusing on the purpose and direction to achieve this goal (Dryden, 2006). A good working alliance between them helps to set a goal and come to an agreement regarding the sessions. This is known as ‘vehicle for success’ (Messer & Wolitzky, 2010) as it creates a link between therapist and client characterized by mutual respect. A good therapeutic “describes the relatively non-neurotic, rational rapport the client has with the therapist” (Usher, 2013, p.13). It is a bond between therapist and client about how both are connected and engaged in working towards therapy goals. Mutual endorsing and valuing the goals set for the therapeutic sessions by the therapist is a sign of strong working alliance (Horvath & Luborsky, 1993).

### **Free Association**

Freud first called free association the ‘fundamental rule’ of psychoanalysis (Britzman, 2003). It is a technique in which the client spontaneously verbalizes his/her thoughts and feelings without reservation or suppression regardless of any kind of embarrassment,

humiliation or sexual and/or aggressive content. Free association is extremely useful for clarifying unconscious processes, a technique which is particularly important for psychodynamically oriented psychotherapy and essential for psychoanalysis (Cabaniss, 2011). Therefore, 'saying whatever comes to the mind as it comes' remains as a basic norm for this psychotherapy. Moreover, by saying what comes to mind in free association, new historical information and/or new, previously unconscious, emotional attitudes to the life, become conscious (Hersen, 2002). A client's genuine thoughts, memories, feelings and emotions are exposed without any restriction through free association (Jaehnig, 2020). This very effective therapy never emphasises how logic and systematic, orderly and silly, logic or illogical, relevant or irrelevant a client's vocalization may be. Therefore, free association appears to be a key concept and a tool to open the door to the unconscious. While the client is free associating, the therapist does not sit behind the couch silent, "blank-screen approach" (Corey, 2013, p.72) instead intervenes at appropriate moments with suitable therapeutic techniques. Though this technique became a corner stone of psychoanalysis therapy, it was not without criticism. Erik Fromm, (1955) states that there is a danger of transforming the situation into a friendly dialogue. Free association is also criticized for its overuse of association.

### **Transference and Counter-transference**

Transference and counter transference are the other important factors in the middle phase. Quatman, (2015) states, "it is like interlocking pieces of a puzzle" (p.127) and a means for examining the forgotten and repressed past (Bateman et al, 2010). Transference enters in the relationship and reflects the reality of the client, who releases his feelings, thoughts and impulses on the therapist without being aware that he is doing it. Free association unfolds affect-experiences, and it re-experiences in full force which may lead the client to have an emotional reaction to the listener as transference reactions. According to Weiner and Bornstein (2009), transference is displacement of thoughts, feelings, attitudes and impulses experienced toward a previous figure in a client's life to a present figure that is not justified by reality. It refers to an imaginary relationship that is developed by the client to the therapist (Quatman, 2015). Transference gives a direct and personal understanding of basic emotional reactions of the client. In addition, transference reactions are both positive and negative. However, in transference there is an exaggeration, a distortion that is not in a real relationship and it is only a situation in a therapeutic situation. Though transference is a displacement of past relationship to the present, the nature of transference depends on the real characteristics and behaviour of the therapist (Renik,1993; Hoffman, 1998). As therapy progresses, free association leads 'client's childhood experiences and feelings to be moved from the unconscious and then clients regress emotionally and consequently may develop transference relationship.

Countertransference, like transference, has several meanings (Bateman, Brown & Pedder, 2010). Initially, it is unconscious, acknowledged by therapists through various kinds of actions such as forgetting sessions, arriving late, and the manner in which one dresses (Gabbard, 2004). Though it was an obstacle in the primary approach, Heimann (1950) nevertheless it is an important tool in psychotherapy. Maintaining a conscious effort in

dealing with it correctly will contribute to greater information and understanding about the client's illness (Enid & Balint, 1961). Countertransference is important not only because of what therapists can learn from it, but also because recognizing and controlling countertransference is a necessary part of the therapist's commitment to maintain a constructive working alliance. Gabbard (2004), explained that tolerating the countertransference and using it to have an interpretative understanding of the client are effective ways of managing countertransference. Though transference is particular to psychodynamic, it can ensue in every interpersonal relationship, and can even determine the strength of it.

### **Resistance**

Resistance is a common term denoting all those forces within the client that *oppose* the procedures and processes of psychodynamic therapy (Greenson, 1967). "Helping the client to understand resistance is a central feature of psychodynamic therapy" (Gabbard, 2007, p.3). According to May (1996), resistance is a guide and an essential part of every individual character. It is a defence in order to protect the status quo in spite of the conflicts or problems faced by the client. Resistance manifested in different forms such as; silence in therapy session, avoiding certain topics which are perceived difficult and failing to remember a session. Irrespective of its sources and forms, resistance is anything that goes against the progress of psychotherapy that is generated out of anxiety (May, 1996). It is not merely negative, it also has a positive aspect because it indicates that the person is active and that there is some dynamic to know how the person functions. Resistance is a client's way to defend oneself against the changes. It need not be considered as a block, but it is a revelation about the influence of a client's past and its effect on their present life.

### **Defences**

Defences are unconsciously motivated involuntary responses to perceived threats; these responses protect individuals from intra-psychic conflicts involving ideas, emotions, shame, anxiety, loss of self-esteem, and other unacceptable feelings or thoughts. Fernando (2009) defines defence as "a psychical reaction or process that attempts to keep some mental content; a wish, feeling, judgment, etc. from conscious awareness and/or behavioural expression" (p.25). Defences manifested and functioning as resistance include: repression, denial, intellectualization, reaction formation, undoing, and identification with the aggressor, (Usher, 2013). "It is assumed that interpretive techniques aid patients to develop insight about the defensive process and therefore change them" (Petraglia et al, 2015, p.2). Increased anxiety and perceived threat to self in the therapeutic session induces the client to use defences. Therapist working with defences would aim at exploring the defences those are inappropriate and unhealthy and increase coping mechanisms appropriate to the age and state of the person.

## **Techniques of Psychotherapy**

### **Attentive Listening**

Attentive listening involves not only mere hearing and understanding of the verbal communication of the client but observing the non-verbal communication such as eye contact, body posture, facial expressions, use of pauses in the conversation, behaviours, tone

of voice, and manifestation of affect (Berman, 2005). According to Quatman (2015) listening in psychodynamic psychotherapy is ‘attuning’, an art that “involves accessing parts and pieces of our human repertoire that we may not fully know are there” (p.12). A therapist’s capacity for empathy is an important element in attentive listening which allows easy access to the inner emotional life and experience of the client. It focuses both conscious and unconscious feelings and thoughts of the client other than focusing only on conscious thoughts in natural listening (Frederickson, 1999).

### **Clarification**

Clarification is aimed at gaining a more detailed understanding about the client. It is an important means when the client is emotional and lacks the capacity to think clearly enough about the present details. Clarification also helps to go deeper into the client’s feelings and behaviours (Fahrurroji, 2021). Succinctly, it is a simplistic request for more information about the client’s thoughts, feelings, behaviours and to have a better understanding to client’s experience (Sublette &Novick, 2004; Richard &Huprich, 2009; Pipich, 2021).

### **Confrontation**

Confrontation involves tactfully but firmly pointing out maladaptive behaviors and emotional expressions. It is calling the client’s attention to discrepancies or absurdities in the client’s narration or their verbal and nonverbal behaviour which they can readily become conscious of. “This is done in an effort to better understand conflicting mental states or representation of experience that implicitly address the patient’s defensive operations” (Usher, 2013, p.21). It shows the incongruences by pointing out repetitive behavioural patterns (Sublette &Novick, 2004) derived from experiences feelings and thoughts.

### **Interpretation**

Interpretation a “fundamental technical instrument” (Etchegoyan, 2005, p. 9) is an intervention made by the therapist to help the client clarify and understand the underlying causes of his or her behaviour, thoughts, or emotions (Dewald, 1994; Usher, 2013; Pipich, 2021). In the first part of the interpretation, therapists observe unusual and contradictory things and also discrepancy in the emotional state of the client prompting them in the second part to make an effort to guess or hypothesize its cause. It is a passage from truth to experience (Laufer, 1994). Interpretation helps the client to become conscious of some elements of his unconscious, have further exploration and its influence in their mental life. It to reconstructs the client’s usual understanding, cognitive and affective experiences. “It helps a person to realize that he or she is not controlled by external forces but by conflicts that lies within themselves” (Gurman& Messer, 2003, p.85). The scope of the interpretation is to lead the client towards a new manner of living her vocational life with emotional maturity.

### **Working Through**

Change is gradual in psychotherapy and the process of working-through facilitates change. Therapist’s repeated responses to a client repetitions regarding their difficulties, struggles in relationship patterns, internal and external conflicts, and emotional issues will lead them to insights and internalize new solutions. Working through, a term introduced by

Freud is a part of the therapeutic session which effects the greatest changes in the patient (Chessick, 1974). The therapist is prepared to address the same conflicts, the same resistances, and the same transference as they surface in a variety of different situations. According to Weiner and Bornstein (2009) the alternative views suggested that normally a client needs to repeat on several occasions, each time helping the client to better understand some aspects of themselves and their behaviour. This process is called as working-through. Only through a repetitive interpretation, observation, and confrontation will the client get mastery over the internal conflict. In this way working-through results in further explanation and understanding of issues which becomes increasingly conscious to the client but not yet fully integrated in life (Dewald, 1994). Change is gradual in psychotherapy and the process of working-through facilitates change. Therapist's repeated responses to a client repetitions regarding their difficulties, struggles in relationship patterns, internal and external conflicts, and emotional issues will lead them to insights and internalize new solutions. This process of working-through allows new psychic resources to cope with the conflicts and begins to work consciously in conflicts and difficulties.

### **Psychodynamic Psychotherapy for Emotional Maturity**

A typical psychodynamic therapy is a long-term therapy which requires at least 2 years of sessions. Psychotherapy for improving emotional maturity is a form of psychodynamically oriented psychotherapy (in-depth therapy). It is an attempt to help the person to a gradual growth in emotional maturity through deepening the knowledge of the client's emotional life in the light of their past emotional experiences and its influence in their present life. The therapy is conducted once a week or twice a week for 45 minutes by a trained therapist. Evans (2019), states that it is the mixture of reason and emotion that leads to emotional maturity which will boost the optimal functioning of the client. "Emotional maturity involves the ability to see life clearly and accurately and the capability to deal with life's ups and downs healthily" (Maniampra&Barretto, 2021, p.73). Through the technique of free association, a therapist will focus on the emotional life of the client effectually helping to bear the emotional discomfort. Psychotherapy is an effective tool to resolve childhood issues, gives insight into the blocks that kept one away from attaining emotional maturity and offers pathways to gain emotional maturity. Podimattam (2009) opines that therapy and introspection helps to figure out what went wrong in the early developmental stages. One can reach emotional maturity when he or she learns to cope with the emotional baggage that one carries from the past and make peaceful resolution with one's past in order to live fully in the present. In this psychotherapy, the client is enabled to unveil the emotional distresses of the past and reform it through process and techniques the therapy entails. "The client is provided with enough space in which to feel secure in helping them find their feelings, emotions as well as learning how to manage them" (Jamila, 2011, p.31). The pedagogy and values are the special interest of this psychotherapy for emotional maturity because it is emotions that moves one to commit to values and persons in situations (Kannanthanam, 2020). Emphasizing anthropological vision of the person in accordance with their religious belief and corresponding objective values makes it different from other secular psychotherapy. But like psychotherapy, it explores in depth the underlying motivations and psychodynamics that influence the motivational structure and functioning of the person (Sebastian, 2014).

During the process of therapy, both verbal and nonverbal emotional expressions are noticed by the therapist. Paying attention to the client's emotional experiences of the here-and-now helps them to become aware of their emotional expressions and evaluate its appropriateness. Conrad (2007), states that "many who are emotionally immature responded to their therapy by gradually maturing emotionally" (p.17). It enables them to acquire a feeling of personal worth and dignity, and becomes more sure of themselves in their interpersonal relationship. Enhancing emotional capacity through psychotherapy not only offers a host of benefits but also provides increased self-esteem, self-confidence, a sense of vitality and undoubtedly strengthens one's interpersonal relationships (Hendel, 2018).

### **Phases of Psychotherapy for improving Emotional Maturity**

#### **Initial phase**

The initial phase of psychotherapy has certain basic processes. It is a period of evaluation and assessment of the client to prognosis for the therapy (Weiner & Bornstein, 2009). It involves identifying the presenting problem (low level of emotional maturity). Here the client is expected to explore the background of the problem as the client starts exploring his or her family, parents, siblings, developmental stages. The client begins to understand self as a person and arrive at a working formulation. The therapist and client make an agreement that both will work together towards the goal of overcoming the psychological difficulties which the client seeks after the sessions. During this initial stage, the rules of therapy is explained (Cabaniss, et al. 2011). It also includes fixing of time, place and regularity of the sessions. The therapist makes a keen observation in finding out the client's capacity to talk freely and insight capacity. Generally, it is done through personality assessment and psychological tests mainly TAT and Rotter.

Tharayil and Mullkariyil (2012) point out that expectations and norms form the background of emotions. The well-adjusted emotions of the early years of life ensure the emotional well-being of a child through family, social conventions and norms and external circumstances. As the child grows, some of his emotions change or are transformed into more mature forms, contributing largely to emotional maturity. "Emotional maturity can be blocked due to early childhood experiences in terms of relationship of the person with their primary caregivers" (Maniampra&Barretto, 2021, p.72). During the initial phase the therapist gets relevant information about the emotional development of the client. Through the narration of a client's life story, a therapist detects emotional patterns, ways of emotional expression, major emotions, expectations, rules and norms related to emotional life of the child, social taboos and cultural background of the client. The sequence, the context, the emotional tone, the style of presentation used by the client are in themselves extremely valuable data concerning the person (Sublette &Novick, 2004). The major technique used is free association - the client verbalizes whatever comes to mind without being diminished in any way as they relate both past and day to day experiences, or even addresses things concerned with the client's future.

#### **Middle Phase**

The middle phase is a period in which therapeutic techniques are used to acquire a deeper knowledge about the client. There are no fixed criteria necessary to enter this middle

phase. It may range from weeks to months depending on how well and strong the bond established between therapist and client in the initial phase is such as; such as therapeutic alliance, treatment contract, client's prognosis and capacity to work in the therapy. Therapist's objective in middle phase is to help the client to make changes in the maladaptive behaviour and give motivation for changes (Dogra, 2017). This phase is characterized by helping the client to understand his or her emotional dynamics and how and when these dynamics affect their interpersonal relationship (Sharpless & Barber, 2009). To process this middle phase, the therapist can choose any of the general steps or therapeutic techniques including working through, genuine interpretations, and other kinds of therapist interventions such as questions, clarifications, exclamations and confrontations. All of these techniques enable the client to delve deeper into the dynamics of the person and most especially those related to the emotional patterns, emotional regulations and expression of emotions.

### **Termination Phase**

Termination is not only the end but also the goal. Though perfection is an unattainable ideal (Weiner & Bornstein, 2009) throughout the period of psychotherapy, inevitably a person must make his or her effort to become emotionally mature in their daily interactions and relationships. However, achieving emotional maturity doesn't mean that there will not be any emotional issues which may arise at the end of the psychotherapy. Some of the reactions at this phase would be flight, withdrawal, regression, denial, projection, resignation and apathy (Schlesinger, 2005). The aim of psychotherapy is inevitably the 'graduation' of the client as an expert in the functioning of their own mind implying that the therapist and the client recognize each other as mature, autonomous, and independent individuals (Rivera, 1992). The questions the therapist asks themselves at this point is whether their client is functioning better overall or not? Has he or she learned to manage their own emotions in a mature way and are able to develop a strong interpersonal relationship? Consequently, the time of parting at the end of therapy can be counted as a moment to evaluate to what extent the client has become emotionally mature and how they are reacting or responding to this ending especially because the moment of termination of therapy is also a moment of the termination of the client's relationship with the therapist.

### **The Theoretical Background**

#### **Psychodynamic Psychotherapy**

In general, psychodynamics is the study of the interrelationship of various parts of the mind, personality, or psyche as they relate to mental, emotional, or motivational forces especially at the unconscious level and between the different structures of the personality (McLeod, 2020). It clarifies "human behaviour through understanding unconscious processes" (Deal, 2007, p.189). Psychodynamic psychotherapy proposes that unconscious mental activity affects one conscious thoughts, feelings, and behaviour (Cabaniss et al, 2011) stressing that the essence of psychodynamic therapy is the exploration of the aspects of the self that are not fully known to the person (Shedler, 2010). Frequent sessions, empathic listening to the client's life story, free associations, attention to the unconscious are designed to facilitate insight into the deeper roots of the client's psychological difficulties and to encourage emotional growth (Hansell et al, 2008).



### **Humanistic Psychology**

Psychodynamic Psychotherapy for emotional maturity aligns with humanistic psychology, its prominence emanating from the 20<sup>th</sup> century and Abraham Maslow and Carl Roger are its foremost distinguished designers. Though the concept of the self is a central focal point for most humanistic psychologists, they have a holistic approach to human existence (Britanica, 2020). Abraham Maslow's theory, hierarchy of needs, he finds that all these needs are basically for survival and any deprivation of needs can have an adverse effect basically because these needs are innate. indicate that these "needs are aroused in a specific order from lowest to highest" (Kaur, 2013, p.1062), and only when the lower level needs are met that one can proceed to higher level needs. "Under stressful conditions, or when survival is threatened, we can regress to a lower need level" (Boeree, 2006, p.5). Psychologists are of the opinion that when basic needs are not met they control the motivating force of the individual's personality. Moreover, deprived needs can produce conflict which may lead a person to possibly developing psychological and emotional problems. The awareness of one's emotional needs will enable the individual to choose positive and constructive means to integrate these needs to the state of life (Manalel, 2011). Roger's contribution to psychology, however, is primarily self-actualization. "The organism has one basic tendency and striving - to actualize, maintain, and enhance the experiencing organism" (Rogers, 1951, p.487). Rogers stresses that, in the development of an individual's personality, the person strives for self-actualization, self-maintenance, and self-enhancement (Bauer, 2020). It also takes into account another insight from humanistic psychology, especially its concern about change. Fuller (1994) points out that in the humanistic view, religion is a by-product or projection of the active and conscious role of a person in giving form to his life and the importance of the values in this process. One of the basic points of Roger's anthropology is the importance of self-esteem or positive self-regard (Maddi, 1980).

### **Christian Anthropology**

Psychotherapy and empirical psychology have both given incredible help in alleviating human suffering and have "offered irreplaceable help to humanity" (Podimattam, 2009, p.273). Christian anthropology studies a human person in their relationship with God. It differs from secular discipline of anthropology, and Christian anthropological thought would claim about how people could live, should live and ought to live along with the anthropology if other religious backgrounds that states a normative vision of human reality. In the religious sense, anthropology deals with the origin, nature, and destiny of human beings (Pope, 2019). The identity and life of people that claims faith, grace and profession of vows, enforces the insertion of some aspects of Christian anthropology to this specific form of psychodynamic oriented psychotherapy. According to Pelzel (2013), the individual persons come to discover within themselves the dimensions of creatureliness, fallenness, redeemedness, and hopefulness that simultaneously constitute their humanity from a Christian perspective and helps them in their journey towards self- transcendence, the next level of self-actualization. George (2001) opines that the relationship between freedom and fulfilment is particularly important for understanding Christian anthropology.

### **The Aim**

Generally, the aim of any therapy is to help the client to function better, to remove hindrances and therefore lessen the suffering. It also aims to have insight into “personal conflicts, emotional maturity and capacity for strong and intimate interpersonal relationship” (Messer, 2015, p. 8). Restructuring the maladaptive emotional responses to adaptive and acceptable emotional responses is a way to overcome psychological dysfunctions (Eells, 2007). Psychotherapy for emotional maturity focuses on processes of emotional awareness and expression, emotional regulation, emotional stability and finally transformation of emotional immaturity to maturity. It aims at alleviating emotional distress that cause problems in people lives and helps them to modify their behavioural patterns and characteristics so as to strengthen their interpersonal relationships (Weiner & Bornstein, 2009). Denying and repressing one’s emotions make the person emotionally immature rather than a mature, committed and happy individual. The aim of this therapy is greatly beneficial in freeing individual capacity for life commitment from the influence of unconscious inconsistencies that emerge from emotional conflicts (Sebastian, 2014). Emotional maturity is a kind of an awareness and comprehension of what I am, what I should and what I could. What one individual is shaped and fashioned by the emotions one go through. When one fails to be aware of feelings and handle them properly, it leads to a negative formation of one’s personality or leads to emotional immaturity (Arun, 2009). The person learns to know self, including the subconscious areas of personality, and is helped to take the initiative in renewing in depth and leads to grow in maturity.

### **Determining factors in Psychodynamic Oriented Psychotherapy**

There are contributing factors for the successful processing of a psychodynamic psychotherapy.

### **Motivation**

A true and high motivation of the client is essential to bring successful therapeutic results in therapy (Sifneos, 1978; Truant, 1999). A conscious desire to get to the root of the problem and to change. Poor motivation can be reflected in a lack of commitment to understand self, insufficient desire for change, and a tendency to terminate prematurely (Frayn, 1992). Motivational forces influence the therapeutic relationship and affects the learning process during therapy (Holtforth, & Michalak, 2012; Truant, 1999) and it may be wise to consider them when trying to build a helpful therapeutic alliance. Furthermore, the initial motivation can be changed as positive or negative during the course of the therapy. The evaluation of one’s motivation is not based on how the client verbalises externally but also from the unconscious attitudes or internal disposition of the client. Internally motivated clients are more willing to commit to the task of therapy and endure working through (Ryan, et al, 2011; Ogrodniczuk, et al, 2018). According to the psychodynamic theory of motivation, much of what motivates one is unconscious (Hansell et al, 2008), the motives disturbs hence, repressed by defense mechanisms. According to Holtforth & Michalak (2012) motivation for psychotherapy is influenced by various experiences, such as; suffering, positive experiences (hope of relief), fear of change, and the therapeutic bond.

### **Psychological Mindedness**

Another significant factor is psychological mindedness or a capacity for introspection. Psychotherapy counts on a client's capacity for introspection and self-reflection to develop awareness and promote healthy change (Christine & Ware, 2007). It is a capacity to remain in contact with one's own self, to look, to observe and to describe what is happening within. It involves awareness and capacity to understand psychological processes, such as thoughts, feelings, and behaviors (Beitel et al, 2004; Dewald, 1994). The client explores one's past life during the course of time, becomes aware of its influence in the present behaviours, thoughts, feelings, ideas, and emotional reactions. Psychological mindedness is significantly needed to give detailed description of problem situations and events, to acknowledge automatic negative thoughts and emotions associated with it, and differentiation of emotion in session (Truant, 1999).

### **Insight capacity**

Insight capacity or the ability to stand and reflect back for a while and look at one's circumstance, feelings and behaviour is an important step. As it enables one to take in the emotional life in the bigger picture (Jamila, 2011), any form of learning about oneself (Lacewing, 2014). According to Dewald, (1994) "insight implicates a superior degree of self-awareness and acknowledging elements in the individual's own mental and emotional life which previously had been preconscious or unconscious" (p.244). It is attributing a meaning and a significance after narrating the event by the client and it can also be an outcome of interpretation that is how significant it is to the person, and how the person interpreted that event until now. "The emotional dimension of the insight can be the emotion, desire, thought, connection that is acknowledged is at the same time experienced affectively" (Lacewing, 2014, p. 156). The fact or what happened will not change but the meaning given to it and how it was perceived until now can be changed. The client has new insight regarding his or her emotional life and how making use of this awareness will achieve a more stable and emotional maturity. It is important to have valid and correct information that emerges through insight about what is happening to the person in order to have emotional maturity.

### **The Uniqueness of this Psychotherapy**

#### **Pedagogy**

Pedagogy is the art or science of teaching and educational methods. A. Binet initiated psychological pedagogy. Imoda (1998) places it in the therapeutic intervention with a broader framework than its original meaning of a student's education based on the mental processes (Cristea, 2013). Pedagogy is the totality of interpretations and interventions made by the therapist to the client and by client to oneself in order to foster development and maturity (Imoda, 1998). Pedagogy during the process of therapy, is when the client learns to manage oneself in the face of emotional and relational issues. Like other psychotherapy, the pedagogical sessions investigate in-depth the underlying motivations and psychodynamics that influence the motivational structure and functioning of the person (Sebastian, 2014). The pedagogical aspects of this psychotherapy makes the client aware about the dynamics of different motivations behind their life.

## **Values**

One of the distinguishing feature of this psychotherapy is orientation on values. According to the opinion of Bergin (1980) though it is more difficult to address religious values in psychotherapy, it is possible considering the contributions of spiritual perspective of human nature in therapeutic processes as spiritual experiences can make some difference in behavioural patterns. Zollner (2006) opines that challenging the lived life of client with the values of the Gospel and showing the discrepancy and disagreement over it is indispensable in the process of therapy. The clients (if religious) are helped to live Christian and Gospel values most especially with the values of poverty, obedience and chastity. The other religions also have these values and highly appreciate them. Other values such as love of neighbour, empathy, forgiveness, generosity, forbearance, truth, and justice are also common to everyone that cannot be overlooked irrespective of religion or caste and creed. Teaching client values such as; commitment, service and sacrifice for others, adopting forgive attitude, will help to reach others in gratuitous and graced love (Perrin, 2021) and heal interpersonal difficulties, reduce intrapsychic distress and facilitate emotional maturity.

## **Changing the capacity to change**

The concept of change is fundamental reason to all forms of psychotherapy (Sebastian, 2014). Change is not an immediate result or easy to attain but often a complex process with ups and downs. Leiper&Maltby (2004), states that “the capacity for further change becomes an objective of psychodynamically oriented therapeutic interventions” (P. 4). Mostly it can be categorized either as the effects of insight or the effects of a new relationship (Pulver, 1992). This specific form of psychodynamic oriented psychotherapy focuses on change or transformation through the insights they gain about their past life events. The client’s experience of being treated with empathy and warmth by the therapist is a factor for change. The capacity to change and respond appropriately to different situations in adaptive and creative ways indicate adequate psychic resources and healthy mind. It happens only when both therapist and client put 100% commitment into the session.

## **Needs and Attitudes**

Another unique element of this psychotherapy is the awareness of *needs* that motivates every behaviour. Needs are innate tendencies, source of motivation and common to people. It can be derived from a deficit in the organism (Cencini&Manenti, 2010). Henry Murray (1938) describes personality in terms of needs. He brought out a list of 21 needs that are universal for a person. He distinguished each need as unique, but recognised commonalities among the needs. Along with other techniques used, the therapist helps the client to understand the influence of needs in their emotional issues and how it leads to emotional management. Rulla (2004) points out 14 needs and found seven which affect negatively. They are abasement, aggression, avoid failure, exhibition, harm avoidance, succorance and sexual gratification. Whereas seven positive needs may enable emotional maturity. They are achievement, affiliation, domination, knowledge, nurturance, order and counteraction (Kannanthanam, 2020; Rulla 2003; Rulla et al, 1988; Cencini&Manenti, 2010). He recognized in his research that these needs influence the motivation and aptitude.

*Attitudes* are mental predisposition to respond (Katz, 1967) and repeated behaviours reveals one's attitude. Attitude is comprised of three components; affective, cognitive and conative (Rosenberg & Hovland, 1960; Cencini & Manenti, 2010) and are formed from the childhood interactions and personal experiences. This primitively formed emotional attitude becomes the foundation, but fixed and buried in unconscious. Many realities of life are built on them and are not placed in relation to the actual emotional attitude. During psychotherapy, it is necessary to help the client to understand this early formed emotional attitude and its effects on present emotional issues. In short, emotional maturity is possible when a client is able to reconstruct the already existing emotional unconscious, that is responsible for the present emotional attitude.

### Conclusion

The human person is a whole and complex being with different dimensions which are dynamic and interconnected. A block in one dimension of a person hinders and blocks the other dimensions and therefore has a negative impact on the individual becoming a fully functioning person. Psychodynamic psychotherapy provides insights and understanding to deal with these hidden blocks by restructuring the psychic structure of the person by putting together different aspects. Psychotherapy for emotional maturity enables a client to understand the influence of the unconscious in emotional issues, and change their emotional pattern, attitudes and educate the client to live values according to their belief and their chosen way of life.

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