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| Debate 1: Reflective Practice  Reflective practice is a thought process of where individuals register and examine their memories to find deeper understanding of them and their selves. This increases self-awareness which helps understand deepen emotions of ourselves and of others. Despite there exist individual differences in society, having a deep understanding of yourself, could help understand the needs of others, because at root we all have similar needs to fulfil, which consciously take different meanings.  The Atkins stages of self-practice are Describe & Analyse, Evaluate, Identify. The Describe & Analyse are the first parts of recalling and recognizing what triggered a certain feeling. Describe is used to explain the situation in context, while Analyse represents trying to understand the emotion of the event in sense, also considering in different context what results would have been.  In my opinion, the Atkins model represents a model to increase intrinsic value of understanding of the self. There are multiple cues, or triggers at a conscious level which influences our perception of the environment, of relations, or ourselves. The benefits in living without a conflict with the self, could be having a healthy perception which would affect positively daily experiences or relations, and understanding people that surround start firstly by understanding ourselves. Only when we love ourselves, we can learn to treat others as we would treat us. |
| Debate 2: Psychodynamic Approach  Psychodynamic analysis creates a healthy safe, environment, for the patient to be able to construct and integrate all their experiences and feelings, in support of the therapee.  Transference represents the projection of the patient unsolved or solved issues on the therapist. Countertransference is the projection of the therapist onto the patient.  I consider transference in long term to help the patient in shaping their projections into something better, which will ultimately help them. What causes the traumatic experience to continuously live, Is the existence of the caregiver as the inner parent of the patient self. In the case of a traumatic event the patient could project onto the therapist, understanding his traumatic experience from outside. In my opinion, while continuously growing simultaneously (the projection, the self) the projected caregiver could assimilate different behaviours and attributes of the therapist, as supportive, emotionally mature. Defence systems could be vertically as splitting or horizontally as repression. In both cases, what cures the pathology is the recall of memories and understanding of them. Especially in these moments’ countertransference can have threating consequences on the patient. What makes the event to become traumatic, is the defence system which is unable to “digerate” it. In these cases, the splitting or repression occurs. Splitting represents the dissociation of identity parts into lonely, and not understood parts at a conscious level. Repression represents the mechanism of hiding in the back of the mind the unwanted memory. As mentioned above for both the cure is the recall of memories.  In my opinion, psychotherapy and the therapist create a safe environment controlled by the pace of the patient but stimulated by the environment created by the therapist. The environment creates a similar effect to echoes, the person can illustrate and see their selves, without existing interference from external environmental cues, and the therapist offers a neutral help, leaving the patient to gravitate inside the environment. |
| Debate 3: Cognitive Behavioural Therapy  Cognitive Behavioural Theraphy is a form of mental treatment that focuses on trying to make the patient understand what thoughts or behaviours trigger certain intrinsic instability and try to implement different coping methods for them.  In CBT thoughts are identified, understood, and replaced with more helping thoughts.  The help can range from structured low intensity to high intensity week sessions or even throughout self- help materials.  I consider CBT to be helpful in treating directed and already understood mental issues or problems. The steps of CBT are identifying negative thoughts which can help the patient improve his introspection and understand how his self work. This is the first step of the therapeutic process. In comparation to psychoanalysis the level of understanding and exploring the mind reaches a deeper level.  The next step is implementing and enforcing coping styles to help negative and trigger thoughts to have positive outcomes.  In my opinion CBT can have effect on present mental issues, as example if a person suffers from aerophobia, and CBT will be able to solve the issue, in the future the patient may face a different phobia and the specified implemented coping styles will not function. This could be a result of an underlying issue taking different forms in present. CBT does not emphasize on the past of the person, that may be the root and the solving key of his problems. Although several studies confirm improvements and validity in treating anxiety, depression or even eating disorders, a suppression of the effects for a short time may not help in long term the patient. |
| Debate 4:  Humanistic approach, emphasise the importance of subjective experience. Human being is self-determining, but we are activated by our own development.  As active agents we are all unique. This is optimal as a person psychology. Not everyone will manage these and will stop a person from getting is full projection. Subjective experience can only be understood by considering a person individually and not considering a stereotypical pattern where solutions are already created. Even if a lot of concepts are considered abstractable in humanistic approach, they can’t invalidate it.  Humanistic psychology is sure and has cultural biases. With client psychology, is a modern form psychotherapy, refers as clients rather than patients. Therapy increases self-worth, increase the level of self-congruence and hep the person become fully working.  Roger was the first person into client naming approach, used in health social work. In the 1940 all based therapy to express feelings children’s, addiction, mental health and brain injuries were using a humanistic approach.  Even if most studies are qualitative and it is not a scientific method to make predictions, human behaviour can’t be understood quantitively. Humanistic approach puts empathy on self-consciousness and in case of schizophrenia where consciousness is lost could represents a limitation. The behaviour approach generalises human behaviour and problems or solutions are being made following a certain pattern. People can’t be studied as animals, or as nature, and to be represented as pattern, human consciousness is a term not yet understood, which invalidates putting it into categories. The information of a person is hidden from the clear eye, and it is inside his mind, even if problems express same is because there is a limitation of expression of behaviour clear to human eye. The underlying problems are completely different, and in some cases two different underlying problems could express at a conscious levels same in behaviour but the solution would be different. |
| Debate 5: Transpersonal Therapy  Transpersonal psychology relates to a deeper understanding and beyond of actual limitations of human sphere. This emphasizes individuation, collective unconscious, or peak experiences. Collective unconscious represents that unconscious mind share on some level same information, expressed throughout art, dreams. Peak experiences represent elevate mystic experiences that generate a different understanding of reality.  In considering collective unconscious, a study by Anthropologist Jeremy Narby showed that the currently using anaesthesia for surgeries was taken from Amazonian people which found the mixture in sleep, while nature talking to them.  Transpersonal psychology emphasizes four alchemical stages for the patient, mortification, albedo, citrinas, rubedo. Mortification represents the conflict depressive phases of the patient when first interacting with therapy. Albedo represents stage of where the patient can rise above and see his problems. Citrinas represents the calling on our willingness to surrender. Rebedo represents the rebirth of life. I can find similar correlations with the Osiris story, where Osiris is killed by his Set, and cut into pieces, and Nepthys recollected all her pieces gave her life, and then Osiris ascended into the underworld to be the lord of that domain. The killing by Set could represent the conflict that humans have in their selves, the pieces are the resulting subpersonalities or alters which are caused in a trauma. As Osiris rise in the sky, the patient killed rise in the sky where he could see his problems. When coming back, the patient would recollect all his pieces and will be able to lord in the earth domain. I consider the alchemical approach to be related to our sub-altering as defence mechanism. The person when manages to unify himself the two-brain hemisphere will be interrelated and the information will flow synchronous. What stops as human being as evolving, is the identity that is lost throughout sub altering, and the conflict that exist between them, but most important now knowing of their existence. I consider the second alchemical part to represent the phase, when the person finds the existence of his sub-alters and start educating them and integrating them into a unity, which when descending into the “underworld” will be able to be unstoppable. |
| Debate 6: Narrative Therapy  Narrative therapy is a psychological approach in which the client tells his life stories towards a positive outcome. Narrative therapy approaches a non-blaming, and non-pathologizing view towards the client. In this case blaming and considering a pathology in examining a person can become difficult for some patients. It can be difficult to overcome a blame, because in some cases the blaming of the self is what causes the pathology of the patient. As well non pathologizing a client represents excluding causes or courses of a disorder and can be a limitation in forming a path to understanding the client.  Narrative therapy consists of linear phases, as constructing the story, externalizing the self from it, and decomposing into smaller easier to understand stories.  I consider the narrative part to be positive in considering a free association of the mind and examining it. Here the therapist can create an idea of the association of unconscious with the perceived reality.  From narrative to externalization, the client can have different outcomes of the story, and the therapist can recognize what causes a slightly distorted perception of the story. As example, in recalling childhood memories, they can be confused by present feelings.  When exposing a story, the client has the possibility to understand it in a different way without his feeling interfering at a conscious level.  Decomposing represents the phase, in which the client breaks the story into smaller parts of it for a easier understanding.  Considering that the cure to amnesia and nevrosis is the recalling of the memories, narrative therapy facilitates this act by freeing the person of the memory and also by letting it analyse in therapy clearer than alone in the mind.  dasd  d |
| Debate 7: Systemic Therapy  Systemic therapy is a form of psychotherapy that focuses on understanding how the relations, background, and daily choices of a person are connected to his everyday issues.  Systematic therapy can be applied in an individual, family, or group form. Systemic therapy sustains the idea of how parts of one system affects the other and results in a disequilibrium in the whole system. Systemic therapy focuses on how patterns learned in early ages, limit current behaviours.  The therapy focuses on understanding the problem from different angles, and this method can help the patient unveils his root problem easier. It is like looking at a broken soccer ball, the ball won’t work, but finding its problem it would necessitate to look at all angles of the ball to find where it gets broken. The main problem of an instituted behaviour in early ages, is that one current behaviour won’t be enough to make the patient recall the event that provoked it. For one changing a behaviour enforced in childhood, firstly must know what, when and how it happened. Systemic therapy gives importance to spanning events in place and time. On one hand this can be helpful in couple or family therapies to understand the behaviours interrelated between each person. On the other hand, recalling, giving name and space to memories is the first step of being a united person. Let’s presume human conscious is a machine which recalls all the memories of the person and transpose in the present moment. As example, if the machine can recall the parental voice telling the child that eating too much chocolate would have negative consequences, the present human behaviour might have a missing component in understanding the act of his consequences.  Fixations as drug abuse, eating disorders or even trying to stop an unhealthy behaviour as smoking, could be related to a missing puzzle piece into the mind. In recalling and spanning memories in time and space, the bibliographic memory is not only systemized but also confused memories have the help of the different views of relationship members to re initialize them. It exists the possibility that certain behaviours were not thought as a certain time in life as the “chocolate eating”, when getting a fully composed bibliographic memory certain missing puzzle pieces can be implemented as different behaviours.  In conclusion, I consider that Systemic therapy helps the patient by firstly understanding his problem from different views, which could be family or partner, but also to the memory Is given a fixed time in space for being able to recall it at any moment. |