



## **SHORT INTEGRATIVE PSYCHOTHERAPEUTIC INTERVENTION ON SEPARATION: A CASE STUDY**

**Tudor-Ștefan Rotaru •**

*«Gr. T. Popa» University of Medicine and Pharmacy, Romania*

**Iuliana Petrov**

*Alexandru Ioan Cuza University, Romania*

### *Abstract*

*This case study presents a psychotherapeutic intervention on bereavement after separation. The client's main complaints refer to the inability to continue her life after separating from her partner. The client shows no emotional expression of feelings. The systemic conceptualization reveals a borders' pathology and client's parentification. Andreea presents an ambivalence regarding her feelings towards Paul. A year and a half after therapy's completion, the patient's condition has improved considerably.*

Keywords: clinical case study; bereavement; systemic psychotherapy; parentification; ambivalence

### **Introduction**

The purpose of this case study is to describe the therapeutic interventions included in four therapy sessions that stimulated change in a young female who had difficulties in moving on from the separation of her partner. The case also draws attention to the excessive involvement of the client in her family's difficulties. The presented case is successful due to client's motivation to participate in therapy.

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Correspondence concerning this paper should be addressed to:

• PhD., Lect., Gr. T. Popa University of Medicine and Pharmacy, Iași, Romania. E-mail: [tudor.rotaru@umfiasi.ro](mailto:tudor.rotaru@umfiasi.ro)

### **Main complaints**

Andreea M. (31 years), came into therapy because she was unable to overcome a separation that had affected her very much. *"I'm afraid I will not be able to have another relationship,"* she said. Andreea seemed surprised by what had happened: *"There had been relationships, but I had never suffered so much..."* and tended to generalize: *"I feel there is something wrong with my manner of interaction; I have no luck with men."* For Andreea, the loss was huge, *"I thought he was the man to have kids with."* After eight months since the breakup and a recent meeting full of blaming, Andreea was still suffering. At work she sometimes closed herself in the bathroom and cried. She was scared that too much time had passed since this separation and that she could not return to her usual life. She had difficulties sleeping. Considering the family history of psychiatric disorders, Andreea was afraid of her mental condition, so she decided to consult a specialist. In therapy sessions she is polite, quiet and she tries not to cry, because she finds it unacceptable to be seen crying.

### **Personal and social history of the client**

Andreea is the research and development manager in a multinational manufacturing company. She is a PhD student in a technical field. She had been in a relationship with Paul (a 31-year-old oncologist) for two years. *"He looked like my father,"* she said about her ex-partner. *"I think I loved him very much,"* she added, and *"He was very proud of me."* Indeed, it was a stable relationship, since all other relationships of Andreea lasted no more than four months. *"I felt peaceful, fulfilled, balanced,"* added Andreea. Eight months after the separation, when she realized that she could not get over this loss, Andreea wrote to Paul, expressing that she still felt something for him. The two met and, consequently they started to blame each other. Andreea concluded : *"he mocked me."*

Andreea stated she was always *"cautious in expressing my feelings."* His mother *"treated me like a daughter,"* she explained. In her history as a child, she was a great swimmer, but her brothers had always mocked her that she was ugly. At her previous job, Andreea said she had learned to reject her femininity, partly because of the managing position she had, and partly because she had always felt harassed by men with high positions in the company. In her current job, she is popular and beloved among subordinates. She leads a team of several people.

Andreea has a family with significant psychiatric history. She is the eldest in a family with three children. Andreea's parents had been divorced since she

was eight. After the divorce, she received psychiatric treatment for what, in hindsight, seems to be described as an infant depression. Her mother, 52, had a period of psychiatric hospitalization, suffering from severe depressive episodes. Her middle brother, Dan, is 28 years old and was hospitalized several times due to suicidal attempts and depression. He has not finished college, and he is not working. He gets money on a regular basis from his elder sister (the client in therapy). The younger brother, Dorin, 26, works in London in the same place as his father. The two have a close relationship, which had rekindled after Dorin reached adulthood.

### **Elements of clinical evaluation**

#### *Observations and interview*

From a psychological point of view, Andreea presents an ambivalence concerning her feelings towards Paul. In certain situations, she stated: „*I think I loved him very much*”, „*I never suffered that much in the past relationships*”, while in other contexts, she stated „*I was thinking whether to reconcile with him or not*”, „*I realized that I was not actually happy with him*”. Eight months after the end of this relationship, Andreea still seeks Paul, highlighting her ambivalence. Furthermore, the client had shown specific symptoms of depressive disorder: „*I have problems sleeping*”, she closed herself in the bathroom and cried, her family history of depression being a predisposing factor. Also, her refuge is at work: „*I feel good when I work*”, „*I have no time for relationships*”. She received a great deal of appreciation from her former partner concerning this professional position.

The relationship with her family outlines Andreea's parentification due to the psychiatric history in her family. Furthermore, the heroine behavior of the client may have its roots in her maternal instinct: „*I was at the age when I wanted a family*.” That was rejected brutally by her former partner: „*Would you want to make me a bastard? ... I think you should take a lover*.” The lack of a paternal figure determined her to unconsciously choose Paul, because „*He looked like my father*”.

#### *DSM-IV diagnosis*

1. *Axis I (clinical disorders)*: Andreea presents the signs of subclinical depression, stating that she feels depressed and sad, but she doesn't have the criteria of a major depressive episode coded as such.

2. *Axis II (personality disorders)*: there are no significant elements of a personality disorder.
3. *Axis III (general medical conditions)*: no significant elements.
4. *Axis IV (psychosocial and environmental factors contributing to the disorder)*: relational problems, familial stress, unclear borders in her family.
5. *Axis V (Global Assessment of Functioning)*: 70.

### **Case conceptualization**

We conceptualized Andreea's difficulties through ambivalence as well as a lack of emotional management. Firstly, Andreea had not been used to managing her emotional self. She did not recognize and did not express her feelings, refusing their presence in certain situations. Therefore, it was difficult to process the loss. Andreea did not accept that she still loved him and did not agree with the part which would always seek him and be with him again. If the ambivalence is not solved, bereavement cannot be processed.

Furthermore, the difficulties regarding her mother and brother were approached from the perspective of systemic family therapy (Konya & Konya, 2012). In this regard, the objectives targeted the delimitation of the family's borders, changing the pattern of beliefs and interactions between family members. The absence of Andreea's father determined her to take over roles and responsibilities that were not characteristic of her age: "*I took the place of my mother and she took the place of my father.*" It is a relationship of co-dependency, Andreea is financially sustaining her middle brother, going to the extreme point where she planned her childbirth depending on him: "*If the situation with my brother improves, I want to have a baby ...*". The family borders are unclear, characterized by the vague definition of the functions and the roles of members, minimal privacy and the interaction between members is excessive. It is not clear who has the responsibility and authority, the relationships between members being overlapped (Mitrofan & Vasile, 2001). According to the systemic family principles, the therapist explained to Andreea that the notion of *borders*, and also the fact that the co-dependence between her and his family will pathologize their relationship and will affect, in particular, the independent development of her brother.

### **Therapy's objectives**

The therapy's objectives are: drawing clear borders in the client's family the acceptance of the separation. In behavioral terms, this can be implemented when Andreea talks about her expectations about a new relationship.

### **Steps in therapy**

#### *First session ( 6th of April, 2012)*

The first session started with an self-description of the client. She said many people considered her "*The Iron Lady*". Andreea lived in Iaşi for five years, and she mentioned that the relationship with Paul meant a lot to her. Due to the fact that the client was about to reject an important emotional element, the therapist asked her to say what she loved or still does about Paul. At that moment Andreea tried not to cry. Paul was, during their relationship, careful, thoughtful, intelligent, beautiful, a good cook, professional at work, having similar values to Andreea. "*I was at the age when I wanted a family,*" says Andreea, trying not to cry. The client also told the therapist about her former workplace where her male colleagues harassed her. As a theme for the next meeting, Andreea had to write two lists: one of the things she loved about Paul, and the other one concerning things that he disliked about him.

#### *The 2nd session (12th of April, 2012)*

Andreea came into therapy having her homework done. Among the reasons she loved Paul, she mentioned that he made her feel proud of her (from a professional perspective he praised her all the time), he was playful and spontaneous sometimes, he cooked exotic dishes, they slept in each other's arms, Paul was handsome and was a good sexual partner. Among the issues that she hated about him, Andreea noted that he did not keep his word, he put himself in a good light, he probably cheated on her, he accused her unfairly, Paul did not respect her parents, showing disgust towards them, he was insensitive and direct (he said "*your brother has no chance*") and was very materialistic. Andreea mentioned briefly the things he told her when he was angry, but noted that between Paul and her brother, Dan, there was a good relationship. Andreea made generalizations: "*Women have more character, men are slippery.*" Asked if all men were like that, she agreed with these affirmations, showing signs of dysfunctional generalizations.

*The 3rd session ( 20th of April, 2012)*

In the third session, Andreea was more optimistic, stating that „*I think about him, but it does not hurt so much anymore ... I have only one regret, that we broke up in an inappopriate manner.*” Andreea said that she had learned not to have confidence in people anymore. Simultaneously, her speech moved from the relationship with Paul towards the relationships with her family. She took over the responsibility to solve the situation with Dan, one way or another. Her brother was depressed and did not want to finish his studies. He was practically supported financially by his sister. As a real parentified child, Andreea stated: "*If the situation with my brother improves, I will have a baby ...*". She admitted that she had taken responsibilities that normally did not fit her age: "*I took the place of my mother, and my mother took the place of my father.*" Andreea offered insights concerning the relationship of codependency between her brother and her mother. Given the fact that it was not possible for Dan to come to the therapy sessions, the therapist explained the concept of *borders* to the client. Andreea had found that no one is malicious, but that every family needed to draw clear boundaries around it. If there were no strict boundaries, none of them wouldn't know what to expect, and the relationship would become pathologic. It was pointed out that, in this case, it was not the members of Andreea's family that had a pathology, but the relationship itself was ill. It was determined that Andreea would stop to support her brother financially, so that he could develop independently.

Furthermore, the empty chair technique was enacted. The therapist explained that it was better for her if she cried, because it would help her integrate her repressed emotions in order for them to have therapeutic value. Surprisingly, Andreea participated in the exercise with much enthusiasm. She argued persuasively for the part of her that loved Paul and also for the part of her that hated him. Andreea had been advised to say what she felt both to Paul and also to the other side of the ambivalence (eg: "*Tell to «the other Andreea» how you feel. Tell her everything!*"). The information mentioned by the client in the previous session was also used. As homework for the next meeting, it was decided, by mutual agreement, that Andreea should bring a photo and write "*Our Story*", her's and Paul's, respecting both good parts and bad parts.

*The 4th session ( 27th of April, 2012)*

In the last session, Andreea came to the therapy session very enthusiastic: „*I feel unexpectedly well*”, "*I'm looking for an apartment,*" she said. Then she

detailed how she threatened her brother that she would no longer support him with money if he did not get a job. The brother also threatened her (perhaps in a purely demonstrative manner) with suicide. Furthermore, Andreea made generalizations such as: "*All men use women*", but, when she was asked if she wanted to work on this aspect in therapy, she declined. In this last meeting, the client read a text, which was not very long, about the story between Andreea and Paul. The therapist felt the emotional moments in the client's voice. Then, saying she was ready, she tore the photograph she had brought and burned it. The unburnt ashes were put in a bag, and she was advised to bury them in the ground as soon as possible.

### **Clients' post therapy evolution and follow up**

Fourteen months since the last session, the patient was contacted by phone. She stated she was feeling very good. In hindsight, on a scale of 1 to 10 where 1 is the state of which she came into therapy and 10 the final resolution of the difficulty brought into therapy, Andreea said that the four therapy sessions had helped her around level 8. At present, Andreea is enrolled in the second year of her doctoral studies and is still working in the same place. She bought an apartment, and two months after the end of therapy she began a relationship with a man for half a year, breaking up at the end of 2012. Today, she does not have a relationship, stating she does not feel the need to have one. At the same time, she does not believe she has the resources of time and energy necessary for a relationship. "*It would not be fair to the other person*", she says. "*I'm very calm and okay*".

Her brother, Dan, still receives money from his elder sister. Theoretically, he should have finished college, but her mother and sister are not convinced he's telling the truth about his academic evolution. However, for almost a year, he has been living alone, to the satisfaction of his elder sister.

Paul and Andreea have not kept in touch. Looking back, her only regret is that they broke up inappropriately. She would not return to him if she had this opportunity. "*I realized that I was not actually happy with him; I was just happy to be with someone*". Indeed, after the fourth session, Andreea buried the pieces of the burnt photo. Also, Andreea says this decision has greatly helped her to take care of herself more and to financially assist the family in reasonable limits.

### **Conclusions**

Andrea M.'s case is punctual, and refers to bereavement in general, the relationship with the loved and lost object. By conceptualizing ambivalence, facilitating emotion recognition and emotion labeling, the client socialized the parts of her that conflicted with each other. The familial factors have parentified Andreea's role, especially towards her middle brother, Dan. The transfer from the father is possible to have complicated her feelings towards Paul. Through the empty chair technique, the ritual of burning but also by facilitating the expression of emotions, the client overcame the emotional blockage that had already lasted eight months. Her high involvement in therapy, her intelligence, flexibility and compliance have facilitated the therapeutic change. It is possible that in the therapeutic relationship with a male therapist, Andreea unconsciously re-validated her self-image as a woman, especially in the context of non-adaptive generalizations about men.

#### *Limits*

The main limitation is that the illustrative and exploratory value of this case study does not allow for generalizations, like in the case of quantitative systematic research. The purpose is to deductively reflect over the various explicative models used in conceptualizing this case, so they serve as a source for new hypothesis and alternative conceptualizations, to offer insights on the efficiency or inefficiency of certain techniques and to draw from some of the fine and idiosyncratic nuances that are particular to psychotherapy (Sava, 2003). Alternative conceptualizations, better explanations and intervention ideas can be proposed on this case and can be used in similar situations in psychotherapy.

Systematic future research can separate the various pairs of conceptualization-intervention with the purpose of testing the efficiency and reliability of the therapeutic process. Moreover, controlled clinical trials can test not only the isolated efficiency of an intervention, like motivational or solution centered. They can also study the added effect that another conceptualization, like the psychoanalytic one as well as the associated intervention; these can be brought in for the benefit of the client.

#### **Ethical aspects**

All names used in this study are fictitious. Some information has been slightly modified to make it impossible to identify the real people from this real case.



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