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Catatymno-Imaginative Psychotherapy In The Treatment Of Patients With Anxiety-Phobic Disorders

Yusupova Guzel

Magister Psychology, Faculty of Psychology, Bashkir State University verymatur@gmail.com

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Abstract

Modern conditions are not sufficient for a psychotherapist to study and apply only one modality in practice. Requires a level of professional competence that allows to use the psychotherapeutic potential of various psychotherapeutic modalities, in combining them in their work. In this case, the multimodal (integrative) approach of using the method of catatymno-imaginative symbolic drama allows fully implementing the principle of an individual approach to each patient, providing the opportunity to take into account not only the nature of his mental disorders, but also personal characteristics such as the level of intelligence, emotional state, and also behavior. This research aims to reveal the peculiarities of organizing and implementing psychotherapy using the catatym-imaginative drama symbol method involving 14 outpatients in various departments of the State Budget Agency who have been diagnosed with anxiety based on ICD-10. The testing method used in this research was the Sheehan Anxiety Scale and anxiety assessment techniques based on the Spielberger-Khanin theory. The measurements were carried out at the initial session of the meeting and the final session (8th meeting). The method used is combined with body-oriented psychotherapy. The results of this study showed that respondents with anxiety-phobic disorders had a positive correlation, and this relationship was more pronounced before training. Pearson correlation coefficient (r) was 0.87 (before training) and 0.79 (after training). It can be concluded that in the treatment of patients with anxiety-phobic disorders, the method of catatim-imaginative therapy significantly reduces the negative symptoms.

Keywords: Catatymno-Imaginative, Anxiety, Phobic

Introduction

The prevalence of anxiety disorders among the current population is relatively wide, patients with anxiety-phobic disorders also experience a decrease in quality of life. This is also because when an anxiety-phobia disorder appears, the emotional regulation areas in the prefrontal cortex such as the subgenual anterior cingulate cortex and orbitofrontal cortex are disturbed (Faria, Fredrikson, and Furmark, 2020). The The term phobia is used in the psychiatric field to refer to a series of anxiety disorders, but is now also commonly used to identify social tensions (Buts, 2020).

Phobias are a common type of anxiety disorder. The word "phobia" comes from the Greek term "phobia", a phobia of feelings of fear or anxiety that a person experiences irrationally (Atkinson, 2005). This excessive irrational fear or anxiety ultimately becomes a disorder that can disrupt the life of someone who suffers from it. According to PPDGJ III (1993) Phobic anxiety is an anxiety disorder that is triggered predominantly by the presence of a clear object from outside the self which is actually a harmless threat. Based on the ICD-10 phobias divided into: grouping, are Agorapophia, Social Phobia, and Specific Phobia.

Anxiety-phobic disorders often coexist with depressive disorders. A person who experiences a phobia temporarily triggers emotional exhaustion so that the sufferer ultimately feels hopeless and experiences depression. The presence of a depressive disorder can trigger phobic disorders to become more severe, especially agoraphobia.

Reality shows the need to use modern psychotherapeutic methods to solve problems in the context of the technologization of all areas of social life that are difficult to solve only with traditional methods. Considering the increasing number of patients with anxietyphobic disorders, there is a need for effective and timely psychotherapeutic assistance based known, reasonable, short-term on and comfortable psychotherapeutic methods for patients. It is not enough for a psychotherapist to study and apply in practice only one of the modalities, he needs a level of professional competence that makes it possible to discover and use the psychotherapeutic potential of different psychotherapeutic modalities, to be able to combine them in his work.

Currently, the need for clinical psychologists, psychotherapists, psychiatrists and for evidence-based research on the use of various psychotherapy modalities in the treatment of anxiety-phobic disorders is urgently needed in the establishment of treatment protocols in psychotherapy, centers psychiatric departments, and hospitals. The use of psychotherapy methods interrelated and techniques with the aim of providing a more intensive impact on the three components of the psyche-cognitive, emotional and behavioral for the reconstruction of the entire personality system. connection; the need to use modern organizational forms of interaction between psychotherapists and patients for effective treatment of patients with anxiety-phobic disorders in outpatient and inpatient settings.

Unfortunately clinical practice shows that the majority of treatment of anxiety-phobic disorder patients is carried out through cognitive-behavioral psychotherapy techniques and methods. Meanwhile, the psychotherapy process of modern psychotherapy demands a professional component of the activity of the future specialist, who must be able to use various psychotherapeutic modalities in order to be ready to integrate them into his work for more effective treatment of this group of disorders. To date, clinical recommendations have been developed that reflect the basic principles of diagnosis and an evidence-based approach to the treatment of patients with neurotic level anxiety disorders (Karavaeva, et all; 2016).

One method that has developed in the last few decades is the use of the catatim-imaginative drama symbol method. Imaginative therapy is basically a series of exercises for relaxation, healing communication with one's own body, and imaginative exercises, which are based on figurative memories and ideas (Loesch, 2008). Researchers pay attention to the main standard motifs of the experience of the image catatim themes in the form of: grasslands, rivers, mountains, houses, forest edge (Finkel, 2015). The use of symbol drama in psychotherapy in this study combines standard katatim with body-oriented psychotherapy from Shubina (2007); Yudina (2013); dan Baskakov (2016); . This study aims to prove and evaluate theoretically the effectiveness of catatimimaginative therapy (symboldrama) in the treatment of patients with anxiety-phobic disorders.

The hypothesis in this study is that the imaginative catatim therapy method (symboldrama) can significantly reduce the negative symptoms of patients with anxietyphobic disorders. Through this research, researchers want to see whether the inclusion of body-oriented catatim-imaginative (symbol drama) therapy methods in the treatment of patients with anxiety-phobic disorders using catatim-imaginative therapy methods can reduce their negative symptoms significantly.

Research Methods

The method in this research is a case study method which involves theoretical methods (psychological analysis, special literature on research problems), empirical methods (study of psychotherapist experience, clinical case analysis, experiments), mathematical statistical methods (correlation analysis). Psychodiagnostic tools supporting this research include the Sheehan Anxiety Scale (SPRAS, David V. Sheehan, 1983), and the anxiety assessment scale from CD Spielberger (1964) which has been adapted by YL Khanin (2002) in Russian. The research subjects were patients suffering from anxiety-phobic disorders who underwent treatment in various departments of the State Budgetary Institution "Republican Center for Clinical Psychotherapy MH RB" with a diagnosis of anxiety disorders (according to ICD-10: F 40.0, F 40.01, F 40.1). The number of subjects in this study was 14 people. In this research there were three stages, namely, initial measurements; treatment; and post-treatment measurements.

This research was carried out by providing psychotherapy through the symbol drama method with elements of body-oriented therapy. This psychotherapy activity is carried out through 8 meeting sessions which are held twice every week. Measurements were carried out by conducting a pre-test and post-test. The pre-test was carried out at the first meeting before the therapy session took place and the post-test was carried out at the end of the meeting, namely after all psychotherapy process activities had ended.

Result and Discussion Result

According to the results of ascertainment experiments, including psychological tests before training, it was revealed that there were obvious pathological symptoms with high scores on the Sheehan scale. Clinically expressed anxiety (30-79 points) was observed in 9 patients of the group, the remaining 5 patients were diagnosed with severe anxiety disorders (80 points and higher).

The analysis of individual test materials showed that before the training the most pronounced complaints of the patients were the following symptoms (3-4 points on the Sheehan scale): sudden anxiety attacks occurring immediately before and when getting into a frightening situation, avoidance of frightening situations,

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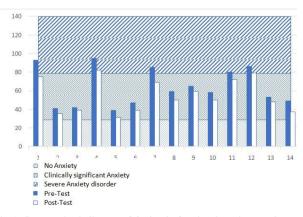
tension and inability to relax, anxiety and restlessness.

The results of interviewing patients showed the expression of high personal anxiety. We took into account that patients with a high level of personality anxiety have a tendency to perceive a threat in a wide range of situations, and each of these situations will have a stressful effect on the patient and cause him to express anxiety.

Thus, the observed dynamics of the results allows us to conclude about the effectiveness of the catatim-imaginative method of symboldrama in the treatment of patients with anxiety-phobic disorders. After training with the use of symboldrama there was a decrease in the severity of symptoms of anxiety disorders, including somatic and vegetative manifestations of anxiety in the studied group of respondents.

Discussion

The values of D. Sheehan's anxiety selfassessment scale in patients before and after the training, i.e., within the framework of the test and control stages of the experiment, are presented in Figure 1 (on the ordinate axis scale scores; on the abscissa axis - individual results for each patient).



After the psychotherapeutic training with the use of symboldrama, there was a decrease in the indicators of anxiety level. Thus, after the training only one patient was found to have a severe anxiety disorder (82 points on the Sheehan scale and the author's name for the index), but at the same time there was a decrease in anxiety level indicators in all other respondents, which means that there were some positive changes in their condition.

The average values of anxiety indicators on the Sheehan self-assessment scale in the group of patients before the training amounted to 63.7 points, after the training - 54.6 points.

Another diagnostic method that we used in our work was the Spielberger-Hanin anxiety assessment questionnaire, which determines the level of situational anxiety and personality anxiety. The results of the survey showed in the majority of patients the expression of high reactive (situational) anxiety. The high level of this index indicates the presence of a high degree of exposure to any uncertain situation as stressful for patients. We took into account that situational anxiety is characterized by instability in time and depends on the strength of the impact of the stressful situation.

Indicators of reactive anxiety in patients after training improved, which is especially noticeable in patients with high anxiety. A high level of situational anxiety before the training was observed in 10 patients, and after the training - in 4 patients (Fig. 2).

Fig. 1. Comparative indicators of the level of anxiety in patients at the test and control stages of the experiment

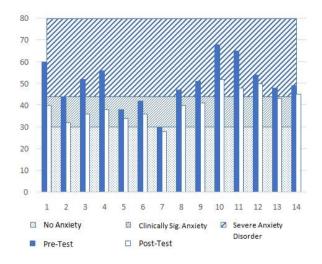


Fig. 2. Values of situational anxiety indices at the initial and control stages of the experiment

Decrease of anxiety indicators from a higher level to a lower level was observed in 6 patients, decrease of indicators in the range of one level - in 5 patients. High level of personal anxiety within the framework of the ascertaining stage of the experiment was observed in 13 patients. Within the framework of the control stage of the experiment, anxiety indicators decreased insignificantly (Fig. 3). We believe that insignificant changes are associated with the specificity of personality anxiety, which is characterized by persistent manifestation.

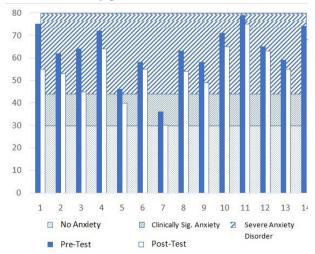


Fig. 3. Values of personality anxiety indicators on the establishing and control stages of the experiment

It is interesting to note that the indicators of personal and situational anxiety in the group of respondents with anxiety-phobic disorders have a positive correlation relationship, and this relationship is more pronounced before the training. The Pearson correlation coefficient (r) was 0.87 between the indicators of personality and situational anxiety identified before the training. After the training, the correlation coefficient was slightly lower and amounted to 0.79. As we can see, the directional correlation is positive and the strength of the correlation, according to the Cheddock scale, is high (from 0.7 to 0.9).

To confirm the hypothesis of the study, we developed and conducted psychotherapeutic training based on the catatim-imaginative method of Symboldrama with the inclusion of body-oriented therapy techniques in the complex of psychotherapeutic activities. We were convinced that the format of the training allows us to effectively combine elements and of different methods techniques of psychotherapy. The developed training was aimed at solving the following tasks: research of psychological problems of patients with anxiety-phobic disorders; reduction of anxiety level; correction of maladaptive personal attitudes; emotional support; development of skills of adequate behavioral and emotional response.

The following motifs of the basic stage of symboldrama were used during the training: flower, meadow, stream, tree. Symboldrama sessions and selected auxiliary body-oriented exercises are presented in next table.

Topics and content of psychotherapeutic training sessions

r		1	
No. of	Motive		Additional
sessions		Content	exercises
of work			
1	Flower.	Symbol drama session.	Games for
			acquaintance.
			Preliminary
			conversation.
			Familiarization
			with the
			method. Rules
			for working in
			a group. Work
			with the
			Relaxation
		Discussion	exercise
2		of drawings.	"Growing",
			"Stretched and
3	Meadow.	Symbo ldrama session. Discussion	Preliminary
			conversation.
			Work with the
			motif
			Technique of
		of	stepwise
	Stream.	drawings. Symbol	relaxation Preliminary
			conversation.
5		drama	Work with the
		session.	motif.
		Discussion	Group
6		of	exercise
		drawings.	"Taking off
7	Tree.		Preliminary
		Symboldra	conversation.
		ma session.	Work with the
			motif.
8		Discussion	Grounding
		of	exercise.
		drawings.	

Each symbol ldrama session was conducted in four stages:

- 1) preliminary talk;
- 2) relaxation exercises;
- 3) presentation of images;
- 4) discussion of the images.

At the end of each symboldrama session, patients were offered to do their homework -

to draw a picture of an image experienced by the patient. Discussion of the drawing took place at the beginning of the next session in accordance with the six-step technique of working with the drawing, described in detail by Y.L. Obukhov.

We took into account that patients suffering anxiety-phobic disorders from are recommended to use relaxation techniques to reduce the level of anxiety and intensity of phobic experiences, as well as to control breathing and muscle tension. In addition, "deeper relaxation deepens the experience of images, in terms of their greater color saturation and plasticity". In this connection, the second stage of work with the motive included various breathing and relaxation exercises (a technique close to the first two stages of autogenic training according to J.H. Schultz).

We expanded the content of psychotherapeutic training with the following techniques: the techniques of body-oriented psychotherapy (relaxation exercises "Growing", "Stretch-break", the technique of step relaxation, group exercise "I take off your fatigue", exercise "Earthing");

Gestalt therapy techniques ("Hot Chair"); interactive techniques (familiarization games "Snowball", "Adjective for the first letter of the name"); communicative techniques ("Open Microphone"); reflexion techniques (keeping a diary of observations).

Despite the fact that relaxation is not an obligatory part of psychotherapy according to the Symboldrama method, we included in every second session (after discussing the drawings) exercises that were aimed at relieving anxiety, releasing muscle tensions ("clamps"), and improving the psychological well-being of patients through awareness of body language. The therapeutic exercises were borrowed from body-oriented psychotherapy.

We noticed that the group form of work (compared to individual work) has a number of advantages: 1) the opportunity to identify with other training participants and receive feedback and support from the organization from them; 2) "a group experience of counteracting alienation that helps identify interpersonal problems: the person discovers that other people are experiencing similar feelings."

Thus, the experience of conducting training using the symboldrama method with elements of body-oriented therapy made it possible to determine that emotional involvement in group work effectively removes psychological and communication barriers, reduces the level of and anxiety the relevance of phobic experiences, and makes it possible to intensify the communicative activity of patients. The interactive format of the training made it possible to develop new constructive behavior patients, create conditions in for the manifestation of independence, provide the opportunity to speak freely, to be heard and understood by people with similar problems.

In other words, the positive emotional experience of group interaction made it possible to solve such specific problems of patients with anxiety-phobic disorders as weakening of social contacts, social phobias, problems in adaptation and communication.

Group psychotherapeutic sessions, discussion of drawings based on worked-out motives resulted in positive changes in cognitive, emotional and behavioral aspects. Group classes using the method of catathymicimaginative therapy (symboldrama) with elements of body-oriented therapy allowed patients to rethink existing behavioral stereotypes, form new behavior patterns, and show activity and independence. The mental state of the patients improved after the training, which was manifested in a decrease in the level of reactive and personal anxiety, a decrease in the severity and disappearance of anxiety symptoms in general. Thus, the positive dynamics of the results of the survey of patients before and after the training confirmed the hypothesis we put forward, the effectiveness and practical significance of the study.

Conclusion

1. During the study, it was found that in modern conditions it is not enough for a psychotherapist to be able to apply any one modality in practice; he needs a high level of competence, which makes it possible to discover and use the psychotherapeutic potential of various modalities of psychotherapy, and be able to combine them in his work.

The importance of an integrative approach in psychotherapy has been established, which makes it possible to combine previously separate techniques, methods and techniques of psychotherapy into holistic psychotherapeutic approaches to the treatment of anxiety disorders.

In solving the first objective of the study, various psychotherapeutic approaches to the treatment of anxiety-phobic disorders were identified, all of them were developed in the logic of the integrative approach.

It has been established that in modern psychotherapy for anxiety-phobic disorders, methods of emotional-imaginative therapy, gestalt therapy, art therapy, auto-training techniques, relaxation techniques, hypnotic techniques, and neuro-linguistic programming techniques are effectively used. It was revealed that a reasonable combination and use of psychotherapeutic methods and techniques has a more intense effect on three components of

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the psyche - cognitive, emotional and behavioral.

2. As a result of the study, the essence and features of the use of the catathymicimaginative method (symboldrama) in the treatment of anxiety-phobic disorders were revealed. We came to the conclusion that the integrative approach to the use of the catathymic-imaginative method of symboldrama allows us to most fully implement the principle of an individual approach to each patient, making it possible to take into account not only the nature of the mental disorder, but also such personal characteristics of the patient as the level of intelligence, emotional state, and behavior.

The study revealed that the symboldrama method is successfully combined with methods of body-oriented psychotherapy.

3. A psychotherapeutic training program has been developed using the symboldrama method for patients with anxiety-phobic disorders. The following motifs of the main stage of symbol drama were used: flower, meadow, stream, tree. The content of the training was filled with techniques of bodyoriented psychotherapy (relaxation exercises, stepwise relaxation technique); Gestalt therapy techniques; interactive techniques (getting to know each other); reflection techniques (keeping an observation diary); communication techniques. We are convinced that the interactive training format allows you to effectively combine elements and techniques of different methods of psychotherapy.

The training program and materials have practical value and can be used by psychotherapists and clinical psychologists who implement in their practice the catathymicimaginative method in the treatment and psychological support of patients with anxietyphobic disorder in outpatient and inpatient settings.

4. The effectiveness of the catathymicimaginative method of symboldrama in the treatment of patients with anxiety-phobic disorder has been tested. Analysis of clinical cases made it possible to provide primary evidence of the effectiveness of the catathymicimaginative symboldrama method in the treatment of patients with anxiety-phobic disorder, as well as to describe the dynamics of the patients' condition and recovery.

It has been established that indicators of personal and situational anxiety according to Spielberger have a positive correlation. Thus, the results of the study allow us to draw a conclusion about the validity of the proposed research hypothesis.

This study does not claim to be a complete solution to the problem, since it is impossible to fully create ideal conditions for the purity of the "experiment": ensure that the patient reaches the "upper limit", exclude resistance and drug treatment, and detect "secondary benefits". The result of this work is delayed in nature, since processes are launched in the unconscious that can be "unpacked" within six months.

This study showed that anxiety disorders are characterized by comorbidity with mental disorders. It seems to us important to continue the search for such forms of interaction with patients that would give the best results in the treatment of anxiety-phobic and concomitant comorbid disorders.

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