

North West Regional Psychotherapy Association

NWRPA Friday Evening Seminars

Psychosis and 'Strictly Bipolar'

Andrew Shepherd

Friday 8 May 2015, 6.30pm-8.30pm.

Cost £7.50 or free to members. This includes light refreshments.

Andrew Shepherd is a Doctoral Research Fellow working in the University of Manchester and Greater Manchester West Mental Health NHS Foundation Trust. Clinically he works as an higher trainee in Forensic Psychiatry and alongside his research conducts a weekly clinic within a women's prison.

Venue: The Manchester Institute for Psychotherapy 454 Barlow Moor Road, Chorlton, Manchester M21 0BQ.

Information about the Association is also available on our website at: www.nwrpa.org.uk

Working with Clients with Long-term Depression: Adapting Psychodynamic Counselling Frank Kelley

Friday 10 April 2015

I trained as psychodynamic counsellor in the 1990's with the Westminster Pastoral Foundation North (now Leeds Counselling) and have worked at Macartney House, an NHS Psychotherapy Service since then. By choice and circumstance I have worked with many clients who live with long term depression. My training helped foster an adaptive approach and, over the years, I have changed my way of working in response to this client group.

There have been consistent themes in this work and I had some difficulty in finding overall concepts that connect these themes. Belatedly I realised that an obvious starting point for a psychodynamic conceptualisation of depression was the Freudian idea of a harsh superego. In *Mourning and Melancholia* Freud talks about ". . a lowering of the self regarding feelings to a degree that finds utterance in self-reproaches and self-revilings, and culminates in a delusional expectation of punishment."

While sitting with my clients I have often had an image of an internal running commentary and used this as a metaphor in my work. In health our superego comments on what is right and wrong and provides praise if we are living up to our ideals and guilt inducing criticism if we are not. Our superego is part of ourselves and our lives. It is often in the background while we unselfconsciously get on with our everyday lives. To use Freud's structural model we can say that the ego, our sense of realism, can balance the demands of both the superego and the Id, our instinctual drives.

The harsh superego is similar but different. It is it is critical, negative and relentless. Harsh superegos are like dictators or deaf critics; no other views are permitted. My clients will point our that they have a sensible part of themselves, like Freud's ego, but this has very little say in way they do. The commentary of the harsh superego is a running commentary, it rarely switches off. It only has contempt for our failings. It can vary in intensity from nagging to a relentless torrent of abuse. It has such a relentless nature my clients can believe it will never change.

Clients will say they get very little relief from this harsh running commentary. It can be blotted out by the distraction of compulsive activity, sleep, or drinks and drugs. However this rebounds. The depression and stress induced by this harsh frame of mind, often compounded by drinking and drug taking, lead to an agitated exhaustion where we are even more prey to this internal harshness. While my clients know that their harsh superego is part of themselves, they experience it as something separate and beyond their control.

I often use this metaphor of a running commentary with my clients. Whatever they are experiencing, memories of the past, important events in their life, the tasks of everyday life, they have a continuous

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Working with Clients with Long-term Depression

negative, critical and judgemental internal commentary. It is not surprising that living with a harsh superego leaves my clients depressed. I think that this is what Freud means as the self-reproaches and self-revilings of melancholia. There is little balance or perspective to this harshness. They only have fleeting spaces in their minds for any pleasurable thoughts, experiences or memories.

This internally directed critical commentary can also turn outwards. A client will judge themselves harshly and anticipate the same criticism from other people. My clients will berate themselves for being depressed and panicking and believe other people will share their contempt for these weaknesses. The relentlessness and lack of perspective of the harsh superego means that my clients overlook that others might be sympathetic or might be thinking about other things that have no connection to them.

Exploring these issues has generally been helpful to my clients and can mitigate the harshness of their superego. However I found some limitations in my work. One is that this harshness means they can never live up to what they expect from themselves or from other people. This chronic frustration is turned inwards as despair, a sense that there is no point in anything. This reverses the healthy function of frustration which tells us we are dissatisfied with ourselves and our lives and need to do something. Hence it can help to use counselling to restore this motivating function of frustration.

I have also become concerned about what I think of as unheard empathy and cruel empathy. My clients have so much going on in their heads that sometimes my, and their own, interpretations and empathy do not get noticed. Hence I now often accompany any spoken remark with congruent facial expressions and body postures and this seems to be better noticed than speech alone.

Being a counsellor I would never underestimate the therapeutic usefulness of empathy. Generally my clients value the non-judgemental nature of counselling. However they often have a concealed fear that I am concealing harsh and contemptuous thoughts about them. They is part of the constant anxiety that others will see inside them in a contemptuous way. Empathic remarks can become a sign of this feared other looking within. In this way well intended empathy can be experienced as cruel. If this is the case I use a variety of ways of indicating that I am not looking in. I might say I had this thought or some therapists might say. Rather more shamefully and theatrically I use the Colombo technique and feign a lack of understanding. My clients are generally quite helpful and will come to my aid by explaining themselves.

There is also what I think of as the search for lost objects. I imagine a really severe harsh superego as one of those huge, long heavy American freight trains. When they are going past nothing can stand in their way. Hence anything good in the client's self or life can get remorselessly crushed. My cliemts can say something postive, like I was thinking of doing voluntary work, and a split second later complain that this is a hopeless wish because nobody understands mental illness, that they will lose benefits, or I will take it as sign they are cured and discharge them. The positive idea has quickly disappeared. Hence it requires work for both my client and I to keep hold of anything positive.

If I may give an example. A client came into a session aggrieved at the way a relative had wound him up in an argument about politics. I said that his relative was clever. He then realised that his relative did this deliberately to distract him from the very depressive ruminations (self-reproaches and self-revilings) that brought him to counselling. We identified this as a helpful distraction and the next week he came to his session and talked about other ways he had found of distracting himself, for example looking at family photographs.

With this purposeful searching for and holding on to good objects clients have had positive thoughts about themselves and others and found solutions to their difficulties. In a classically psychodynamic style this provides a balance to the harshness of the superego.

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