

## **"Identity and Responsibility: The Positive Psychotherapist in the intercultural society of the 21st century"**

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Dear Colleagues and Friends,

this conference inspired me to ask myself:

Who am I, and what is my duty as a Positive Psychotherapist today and tomorrow?

What may become the role, tasks and objectives of this method and the positive therapists in presence and future?

Along the structure of the method I want to reflect these questions.

Positive Psychotherapy after Nossrat Peseschkian (1977) is well known for its so called

- positive view - widening psychopathology adding the function of the symptom,
- the transcultural approach – looking at disorders and conflicts ,
- the balance model - introducing a salutogenetic approach
- three stadiums of human interactions – widening dualistic opposites to differentiation,
- the differentiation analysis of capacities as resources and conflict contents,
- a psychodynamic conflict model for the patient to understand the own background, reaction type and conflict reactions,
- four model dimensions of the past and the relation model in presence and responsibility for the future,
- a semi structured first interview to give therapeutic ideas and tools to the patient, and a
- five step approach for structuring consultations, self help and therapy.

The influence on the therapist of these steps and the method as a whole, and the resulting identity feeling need to be discussed again today in the light of a variety of other modalities. This lecture wants to start such a discussion. It is based on the therapists view and identity feeling, concerning the methods influence on therapist and therapy:

As a Psychotherapist trained in PPT I will have in mind the **positive** and the **transcultural view**, that means the *unique individuality* and *resources* of my patients within their specific *social and cultural environment*. A specific characteristic of PPT is to see the capacities also in conflicts and symptoms. To see the patient and their families in their uniqueness, their capacities and within their cultural environment means for me as a positive psychotherapist to forget psychopathology and to be interested in my clients world first, it opens the door to the patients own inner understanding model.

As a Positive Psychotherapist I will be balance and moderation orientated, using the **Balance Model**. It is one of the most popular approaches of Peseschkians Positive Psychotherapy, used for a diagnostic frame of symptoms, of resources and conflict reactions. It is used then for self help and by focussing on strong areas and areas of development for therapy planning. The historical background of the balance model is to find in four areas of C. G. Jung, aspects of Alfred Adler, in classic anthropological ideas and in the literature of the faith of the founder of PPT. The identity of the method and motivation of its therapists are linked to his idea of balancing a dysbalance, initiating a development of not yet developed areas and resources.

As a Positive Psychotherapist I have in mind the main source of development and being of humans, that means relation and interaction: The **“three stadiums of interaction”**, developed

by Peseschkian, widen the classic psychodynamic dualism of dependency vs. autonomy to **attachment, differentiation and detachment** – as a positive psychotherapist I will widen the either – or question to “what is the common, what is different, what is the content and which the capacity in between these polarities?” Thinking in three phases of the interaction process between human beings and the interaction analysis have a strong influence on structuring therapy relations and self help of the clients: A positive psychotherapist will see the first moment of an encounter and of each further session as the first phase of interaction - **attachment**, that means to see the common, the aspect of bounding and the individuality. **Differentiation** means to come from emotions and affects to terms of capacities, to contents and resources. **Detachment** defined by Peseschkian means to take along a new knowledge for to have broader attachment possibilities in new encounters – detachment does mean then “see you later, and in the meantime I will see others in a new way”. The three stadiums of interaction are based on the founders view, coming from a relation and family orientated oriental society. Also the academic teachers of Nossrat Peseschkian like von Gebattel and Viktor Frankl influenced with their discussions about the doctor – patient relation the three stadiums of interaction construction, and Peseschkian changed it to a development psychology orientated process description of human interaction.

As a Positive Psychotherapist I will surely be influenced by translating emotions, conflicts, resources, interaction processes into the **Basic and Actual Capacities of Differentiation Analysis**. This was the first name for Peseschkians method until 1974. 1977, after a talk with his lecturer of Fischer Verlag, Mr. Köhler, he changed it to **Positive Psychotherapy**. What does this change mean for the positive psychotherapist today? Not longer only differentiating contents widens the former psychodynamic treatment – finally for us as therapists it means seeing the client and his family with their uniqueness as a whole in a cultural environment. The mentioned constructions of PPT that had been added, like the balance model, interaction stadiums, model dimensions, or five step treatment, as a manual gave more trust and safety in a treatment frame for the client, and also for the therapist, to know where they stay, and how self help can be induced.

**Primary and Secondary Actual Capacities** describe the contents of **Basic Conflicts** of the past between needs (Primary Capacities) and social norms (Secondary Capacities), and between these capacities subconsciously in the **Inner Conflict**, that causes symptoms as answers on the ambivalence, when inner values or virtues clash together. Positive therapists will see emotions, affects, psychosomatic symptoms, fear or depression in their function as a compromise and at the same time as resources, as a language to understand.

The four **Model Dimensions** widen the psychodynamic self and object theories to a relational model with yourself, the close ones, the family and group, and with culture, mankind and spirituality. These means for me as positive psychotherapist to see the individual in an emotional and responsibility relation today with oneself, as a couple and a family, and as a spiritual relation of the patient and family based on a biographic history. The therapy of the individual will be seen as **Sociodynamic** and **Sociogenesis**, widening the individual psychodynamic and psychogenesis. Positive Psychotherapists see themselves usually responsible not only for the client, but also for the “side effects” or the possibilities within their families and environment. It might sound strange first, but Peseschkian saw the client as the therapist in his own family with the help of the therapist – this made very clear, that all our therapeutic treatment has an effect on others, and underlines our responsibility for individuals, their families and the society.

**The First Interview** and the **Questionnaire WIPPF**, published 1989 by N. Peseschkian and H. Deidenbach, offered a systematic approach to be worked out by therapist and client face to face and interactively. The First Interview after Peseschkian, systematically coordinated by Hamid Peseschkian and Hans Deidenbach, offers instruments to both to create a deeper and clear understanding of oneself, the social environment and the symptoms. On this basis the process orientation of the **Five Step structure for therapy** is unique within psychodynamic and humanistic psychotherapy modalities. It characterizes the important steps: observation, differentiation analysis, resource differentiation, working out conflicts and future changes, involving the self help of patient and family. The identity of the professional positive psychotherapist will be guided to be a mentor for the patient, to cooperate on a human equal level with each other. This was also one of the early ideas of Peseschkian: To offer a language to the client, that every person could understand, independent of the social level, education or age. This forms also the approach, behaviour and identity of positive psychotherapists practicing it with clients of all backgrounds.

Finally a transcultural positive psychotherapist will be in a longer tradition line with C. G. Jung, using **stories, proverbs, fairy tales, examples of other cultures**, or the **language pictures** of the client. Peseschkian enriched the narrative therapeutic approach in a way that resistance or classical defence mechanisms are nearly not longer needed to understand or work out in therapy, because they seem to flow away using the narrative approach. Positive psychotherapists identity in relation to the rich cultural experience usually leads to a responsibility feeling towards the own culture and the world.

Surely the practical therapy with patients has had the main influence on the international PPT development. The scientific view, concerning the basic active factors of psychotherapy (since Grawe 1994 ff.) underlined what therapist until then experienced using the method. In a field study about its effectiveness in 1997 long term results of this short term method with up to 30 sessions could be proved and gave motivation to develop the method further in many different centers. Questionnaires had been translated into different languages, and many aspects of the method had been under research. Today university colleagues and empiric exchange need to prove the application of the method in different cultures. The influence on the positive therapists by presenting such research and empirical results on the various conferences like this one was always encouraging colleagues to widen the therapeutic instrumentarium – positive psychotherapists seem to have a tradition to ask first the client and afterwards the actual scientific paradigm, because the method was born from long psychiatric and psychotherapeutic practical experience. So the identity of positive psychotherapists until now is strongly influenced by applied science – very similar to the competences and professionalism European Association for Psychotherapy EAP describes, and also close to the evidence based factors of psychotherapy described by Grawe (1994) or Shedler (2010).

A small study with trainees in psychotherapy from Bulgaria (Remmers 1994) showed, that for the female therapists the systematic manual of PPT was more important, for the male therapists the interaction with their clients using PPT became more ease.

Nossrat Peseschkians view of mankind, transcultural and spiritual approach affected the method and the identity of the trainings, the trainers and the students. Time and time again we have to reflect ourselves in our identity as therapists, the model of Positive Psychotherapy offers tools for a systematic self reflection of our identity and profession.

So finally when I will answer the question “Who am I, and what is my duty as a Positive Psychotherapist today and tomorrow?” - I see myself as a learning human being in interaction

with my patients, an my duty as a Positive Psychotherapist today is to prepare myself and my clients for the world of tomorrow by using a humanistic resource orientated approach to solve the conflicts we have and will have.