

## Psychological meanings of femininity integration through experiential psychotherapeutic approach

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**Zusammenfassung:** Die Unvergleichlichkeit Sex-Rolle Identität im späteren Leben können die Entstehung von überschüssigem in einem der Pole der Männlichkeit und Weiblichkeit-unrechtmäßigen und neurotischen Übernahme von Rollen führen. Psychotherapeutische erfahrungreiche Ansatz, durch die Konzentration auf die Ausnutzung der inneren Welt des Menschen und ihr Bewusstsein entsperren und Neudefinition Verfügbarkeit, einen Rahmen für die Integration von Weiblichkeit, um emotionale Gleichgewicht wiederzufinden.

**Stichwort:** Sex-Rolle Identität, Weiblichkeit, erfahrungreiche Psychotherapie

Anxious-depressive type disorders are the main effects of non-integration of sex-role identity in adult life amid the generation of excess in one of the masculinity-femininity poles or person assuming inadequate and neurotic roles.

Sex-role identity is significantly influenced by self-identity. It may be appropriate or inappropriate, feminine identity is developing faster than male identity. In contemporary society, girls more than boys, feel the identity crisis by the conflict of roles, linked to the "feminine mystique" and "learning certain roles that are specific to boys". Iolanda Mitrofan and Cristian Ciupercă, 2002, present their study results showing that women exhibit a greater degree of anxiety in acquiring self-identity. They also argue that developing a self positive image is of great importance for the mental health of both sexes, being a factual basis for the psychological comfort in sex-role performance. Differences in sex-role derive in part from biological differences, but they are significantly shaped also by the particular psychosocial development of each person. Psychosexual identity develops discretely, highly influenced by parental models. In the early stages, the psychosexual identity is diffusely integrated into the family sub-identity. Manifestation of masculinity and femininity is determined by sex roles and cultural differences in perceiving male and female roles. Beyond the bio-psychological factor, "social prescriptions" are the main elements supporting and guiding the differences in male and female role models to their specific behaviour ("the way a woman/man should look and behave").

Recently, there is a general tendency of levelling and cancellation the behavioural differences between the sexes, thus generating ambiguity and discomfort in taking the socially-expected sex-role.

Another tendency is that most of the young people identify themselves with the male role (Krantz, R., 1968, apud Mitrofan, I., Ciupercă, C., 2002, pg.129), while the female role is becoming increasingly obscure and devalued. The process of transformation of male and female roles is due to changes in social perspective and to either permissiveness or restrictions imposed by family, religion and group morality.

In terms of sex-role identity formation of girls, Iolanda Mitrofan demonstrates the existence of three types of "identity initiations" and highlights the role of the three significant relationships in shaping women's gender identity. Thus, father-daughter relationship is extremely important in shaping gender identity, particularly in the early stage of development of the girl. It leads to the configuration of femininity and it is very important for accepting her self-image in sex-role, for psychological comfort as a woman, for the level of basic safety and self-trust. The second initiation for girls is mother-daughter relationship, leading to identification with the same-sex parent and foreshadowing the appropriate sex roles identity. This opening is the prototype of future parental roles assumed in the scenario of life. The third initiation is carried out in the couple relationship. (Mitrofan, I., 2005, apud Anghel, E., 2009, pg.54)

When anxious-depressive disorder symptoms get installed in adulthood amid the non-integration of sex-role identity, integrating that person into a therapeutic programme becomes compulsory. The main objective of this programme should be remitting the anxious-depressive symptoms by redefinition of their own life script. By focusing on exploring the inner world of a person, and releasing his/her own availability towards redefinition of awareness, experiential psychotherapeutic approach provided a framework for the integration of femininity (for adult women) in order to regain emotional balance.

The need to explore and better understand not only the symptom, but the person experimenting that symptom, leads the researches to an integrative manner of experimenting emotional stress caused by not integrating sex-role identity of adult women.

The processes of integration and individualization in psychotherapeutic approaches are supported in numerous studies, the hermeneutic comprehension becoming (after Vogel, 2008) the focus of integrative psychotherapeutic labor. Vogel said that disorder-specific items, depending on individual needs, are integrated step by step in the process of adaptation. Thus we can not say exactly when a particular intervention must be made, these issues being individually settled. Jung (1924, quoted in Vogel, R., 2008) argues that "an efficient therapy of neurosis is always individual, the stubborn use of a particular theory or method being completely wrong. " Perhaps in the case of complex disorders, integrative therapy is the therapy of the future (Reddemann, 2004 as cited in Vogel,R.,2008), and to analyze therapeutic specificity for each disorder, the trend in fashion today, is going to be abandoned (Grawe, 2004 as cited in Vogel,R., 2008).

Integrative psychotherapeutic approach, experiential type, improves the final results of psychotherapy since it addresses the three fundamental sides: cognitive, affective and behavioral in their unity and uniqueness. Thus, the person is assisted in order to be connected to his/her inner resources and to help gaining awareness that everything he learned in therapy is only the support on which to build for identifying other solutions.

The therapeutic relationship built into the integrative psychotherapeutic approach is a creative, experiential empathy, both nutritional/emotional releasing and transformative in cognitive and behavioral plan. Methods and techniques are not intended to provide to impose corrections, but to determine the creation of psychological mechanisms by which the person to obtain such purchases on their own, unifying inside with the outside borders of the self. For the integrative- experiential approach, building a therapeutic relationship is the most important aspect of its individualization. A genuine and profitable therapeutic relationship requires the integration of a special attitude towards the person who is assisted in its efforts to build personal development and training of the therapist.

Integrative intervention, experiential type, helps the client focusing on her inner life and interpreting her own existence. Thus, she learns to "read" herself, to accept emotions, to restore the balance between femininity and masculinity poorly integrated previously in situations that lead to such dysfunction. She realizes this way that the neurotic blockers and the self-destructive part of the self make her existence difficult. Working with the self, she learns to trust herself in her uniqueness, in her sex-role identity recovered in therapy, thus becoming able to trust in others.

Responsabilizarea persoanei pentru propriul demers terapeutic are un dublu rol: pe de o parte o scoate din rolul de victimă și pe de altă parte o face conștientă de faptul că ea este singura în măsură să-și resemnifice scenariul de viață.

Changing perspective within experiential psychotherapeutic approach enables the patient to unlock and self-educate in her efforts to search for solutions to the present crisis. Determining a person to become responsible for his/her own therapeutic approach has a dual role: on the one hand it gets him/her out of the role of victim, and on the other hand it makes him/her aware of the fact that he/she is the only one able to re-signify his/her own life scenario.

To help naturally introduce a certain assisted person into the experiential way of working with himself/herself, therapist's role in the first session of the therapeutic approach is not to evaluate his/her situation (the focus being for the patient to de-focus his/her symptoms), but to assist the patient into obtaining new perspectives on the problem. Therapist's role is to catch the "thread" and to assist the patient running it "on other routes". Theoretical and methodological premise that this approach was based on refers to the principle of recovery (of recycling and re-conversion) by re-polarization (explained and practiced in unification therapy by Iolanda Mitrofan):

- each part that is being "buried", rejected, blocked in our unconscious, each "vulnerability" represents the real resource of a person, his/her psychological reservoir, thus accepting and becoming aware of this reservoir we can "make it work" in our favor or others;
- the existence of the person and the manner in which people live and adapt to others and to the world, determine tensions and negative emotions that stimulate processing, comprehension and decoding errors (this being the opposite of a basic principle of cognitive therapy);
- mental development in children shows that emotional stability and safety makes them happy and healthy, not rational thought, and these are the elements that make their mind function properly as they grow;
- their strengths of being rational grows infinitely better in children without unnecessary neurotic consumption when the emotional balance is ensured, being loved and valued unconditionally. Spiritualized creative intelligence, depends on emotional stability, and creates response strategies the pass into the adult stage;
- lack of "emotional food" can be recovered as an adult, and the treatment is a highly significant variable in this respect. Otherwise, there is a risk of failure and possible cognitive re-structuring or behavioral re-conditioning if they do not take account of the causes and meanings of symptoms in a person's life;
- mental development processuality is a synergetic and unifying reality, reflecting dysfunctions and involving disturbances in all other simultaneously. Motivational and emotional functions are paramount as they ensure the "stock" or the available energy for channeling it to specific purposes that lead to informational re-polarization. It is true that if you think wrong you could suffer, but if you suffer, you definitely can not think properly, so you can not change your mind by simply having that in mind;
- tensions generated during the life experiences such as deprivation, de-motivation, frustration or threaten are in favor of "crisis installing" and the person enters into a state of dissatisfaction, criticism, cynicism, hostility, anxiety, withdrawal, abandonment, suffering, disappointment, psycho-somatic disease;
- self-creative transformation can be blocked by two synchronous cases: either excessive or lean energy manifested at the emotional, motivational and volitional level, on the one hand and qualitative changes of knowledge, on the other hand.

Thus, the patient is assisted to look at the symptoms and work on them from a transforming perspective, understanding that each behavior is bi-polar and what she experiences now as vulnerability includes the opposite results she can reach to.

While preserving the methodological landmarks, the psychotherapeutic approach enters within the patient's internal map adapting creatively to his/her nature. In order to achieve certain objectives built by the therapeutic relationship, psychotherapeutic experiential approach is based on:

- Rogers' techniques: reflective listening (active), amplification, opening techniques, dialogue focus on present;
- gestalt techniques: affective and relational awareness, awareness to support imaginative and cognitive restructuring;

- relaxation techniques based on physical awareness and relaxation of muscle tension;
- nonverbal creative techniques from the therapy of unification;
- creative thinking from the therapy of unification.

The psychological meanings of femininity integration during the experiential, integrative and individualized psychotherapy approach concern: the redefinition of life scenario; emotional release, while earning time for herself (psychotherapy session is signified as “self-earned time”); re-valued relationships with life partners; decoding role traps; flexibility, recognition, identification and release of inner-power; patterning, stereotyping and neurotic behavior; identifying the effects of her self anxious-depressive behavior and lack of sex-role identity on the balance of the couple, on their children's personality development, on the choice of personal and professional partnership.

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