

# LA PSICOTERAPIA RELACIONAL INTEGRATIVA EN EL CAMPO DE LA DISCAPACIDAD INTELECTUAL

## INTEGRATIVE RELATIONAL PSYCHOTHERAPY IN THE FIELD OF INTELLECTUAL DISABILITY

### Integrative Psychotherapy in Social Intervention Domain: concepts and methods of intervention

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### Extended Summary

Integrative Relational Psychotherapy (originated by Richard G. Erskine) is one of the most recent humanistic psychotherapeutic schools and reflects in its central premise that contact is the primary motivating experience of human behavior. Its theoretical framework offers remarkable tools to establish quality contact in professional relationships with different populations (children, adolescents, families, gender violence victims, the elderly, people with disabilities, people with addictions, etc.) within the social field. The group of professionals referred to in this article includes psychologists, social educators, social workers, and family workers, among others.

The fundamental quality provided by the concepts of internal contact (self-awareness) and external contact (awareness of the other person) as well as that of relationship (the reparative space for learning healthier interactions and increasing the level of self-knowledge) will define each interaction:

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“Relationship is built on interpersonal contact. But true interpersonal contact is possible only if one is in contact with oneself” (Erskine et al., 1999/2012, p.226).

Relational aspects include characteristics such as:

1. The quality of the professional-user interaction.
2. The establishment of full contact
3. The pacing of the intervention
4. The affective resonance
5. The attention to relational needs

The helping professional will work from a position of equality, respect and normalization, based on the philosophical principles of Integrative Psychotherapy (Erskine, 2015/2016), focusing on growth rather than change, and will take responsibility for his or her intervention, including any mistakes he or she might make (Guistolise, 1997).

One of the biggest challenges in the social field is the time available to invest in the “cases”, but both contact and relationship require time to consolidate. Hence the relevance of the quality contact that the professional needs to establish as soon as possible. The better the level of internal contact accomplished (awareness of cognition, physiology and affect), the better the interpersonal quality offered. The professional will invite the user to establish a reparative relationship, as well as to improve their level of self-knowledge. In areas such as drug addiction and gender-based violence, the person may lack awareness or be in denial of the seriousness of the situation, which sometimes leads to minimizing the need for help and even the urgency of that help

Contact, connection, and relationship will reflect relational dynamics. We grow and mature in relationships. Through them, we learn about ourselves. A contactful relationship, where an optimal level of connection is established, is the one that will satisfy relational needs (Erskine et al., 1999/2012).

Each client requires rhythmic attunement by the professional; sometimes, even with the best of intentions, the professional may provide than that person could digest at any given time. Subtle balance involves a constant readjustment of the level of attention, dedication, and depth to prevent a juxtaposition reaction (Erskine et al., 1999/2012). The helping relationship challenges much that has been experienced in the past. This contrast between the contact available with the professional and the lack of contact in previous relationships is often more than the users can bear. Therefore, they protect themselves from experiencing contact to avoid emotional memories or current longing for meaningful relationships. The emotions and behaviors displayed are an attempt to deny the acknowledgment of emotional memories or to avoid the perception of deprivation. Often the juxtaposition is shown by rejecting the professional after an emotionally close interaction.

Lacking satisfaction of relational needs throughout the life span is a common and generalized aspect of the users who request the different care services. The past relational wounds are acted out in the current helping relationship. In fact, even

behaviors related to younger ages may be identified. Although the level of social intervention does not allow in-depth therapy, keeping the concept of developmental image (picturing in the mind the age to which those emotional and behavioral expressions would correspond) (Erskine, 2019) can direct the intervention guidelines.

In such a case, from an Integrative Psychotherapy perspective we would be speaking of *developmental attunement* – when the professional can perceive and adapt to the developmental age of the person with whom the intervention is carried out– and *attunement to relational needs* – when the professional identifies which needs have not been met, which needs are emerging in the relationship and how to respond to them.

Attunement, along with involvement and inquiry, comprises the relational methods of Integrative Psychotherapy (Erskine et al., 1999/2012). These methods, one of the hallmarks of this model and one of its most significant contributions, are designed to implement the repairing relationship. They represent a combination of art and science, human and technical aspects; they reflect the professional’s attitude and aptitude when promoting well-being.

The three methods (inquiry, attunement, and involvement) are all inter-related and are conceptualized as the central core for therapeutic intervention. In the social field, their application provides a general understanding when establishing the healing relationship that contributes to the user’s growth and transformation in areas as diverse as relational, work, social, family, personal, play, and health.

The quality of the co-created relationship is enhanced by a carefully crafted inquiry (“I would like to get to know you and understand more about you while you discover yourself”), attunement (“I respect your own rhythm and go with you at your own pace”) and involvement (“You are important and I care about you; I will show you that”).

The following are the basic characteristics of the Integrative Psychotherapy approach from the 3 fundamental pillars:

### **Professional**

- Assumes no knowledge of the user’s internal experience
- Creates a safe space
- Establishes an environment of trust
- Masters intervention tools (methods)
- Takes responsibility for therapeutic errors
- Maintains a high level of contact (internal and external)
- Is considered as a “stronger and wiser” adult figure
- Knows his/her strengths and weaknesses
- Prioritizes the relationship as an essential element of the healing process
- Adopts a position of equality towards the client
- Diagnoses based on relational disruptions, not pathologies.
- Works with developmental images

### **User**

Establishes a unique intersubjective process with the professional.

Presents relational difficulties usually originating in earlier developmental stages.

Needs interventions in all domains (affective, cognitive, behavioral and physiological).

Displays behaviors (sometimes considered as “inappropriate” or “immature”) that made sense at a given time

Shows ways of acting, thinking and feeling that would correspond to previous developmental stages

Puts into action relational patterns learned from childhood significant figures

Expresses deficiencies regarding the satisfaction of relational needs

Reveals unconscious difficulties of internal contact and external contact

Maintains his/her own rhythm in communication, from his/her cognitive and affective style

Longs for relationship, although he/she fears it, due to previous failed experiences

### **Reparative relationship**

Co-created relationship between professional and client

Essential element for repair to occur

Safe area where the user puts into practice new relational patterns (behaviors, fantasies, physiological reactions, etc.)

Scope of action that facilitates the awareness of aspects previously unknown to the user

Environment where the user’s well-being and growth are prioritized

More relevant aspect in the healing process than the content being worked on

Without underestimating any of the issues that are worked on in the helping intervention, or the relevance of aspects that determine the problem presented, from the Integrative Psychotherapy approach, the essence of keeping the relationship as a central element becomes evident. Without relational work, repair cannot take place.

The Reparative Relationship is a SPACE where:

1. not only questions are asked, but also inquiries: the exploration is done through questions, affirmations, reflections, verbal highlights... all of them focused on getting to know the user, but above all on getting to know him/herself better and better.
2. there is not criticism or judgment, but acceptance: this avoids self-criticism, which is so common and so frequent among people in need of assistance. The experience of being accepted encourages emotional openness and decreases the fear of being vulnerable before the professional.
3. exploration is in the service of the person, who becomes the important focus of the process. The professional leads and guides from his/her ex-

perience and level of competence, but it is always the user who decides which direction to take.

4. the individual feels unique: he/she knows that the intervention is designed with respect for their uniqueness. This individual feels and perceives an exclusive treatment by the professional.

The Integrative Psychotherapy model of social intervention can be implemented in any service (group homes, foster homes, nursing homes, treatment centers, educational resources, etc.) where personal interaction is part of the daily professional task. The main focus of attention is on interaction, on the “who and how” of the person with whom the professional interacts, what are their needs, how they react, what they express, etc.

Disruptive external behavior that may appear is considered the expression of an internal conflict that must be understood because that internal conflict can explain such behavior and make sense of it. “There are no people without context” (Sánchez et al, 2018).

Intimacy in professional-user relationship generates emotional proximity. It is defined as the act of accepting and sharing feelings and making available the empathic ability that will facilitate the emotional expression without fear of rejection or criticism.

This approach allows professionals to accept how the other person affects them and excludes the position of “I am better than you”, “I know more than you” ... which in turn avoids the need for the person’s psychological self-protection. It involves an exquisite treatment in the relationship established by the professional and a sincere and deep recognition towards the person who requires help.