

THE TECHNIQUE OF PSYCHOTHERAPY

THE
"SPONTANEOUS"



CURE

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Extratherapeutic (non-specific) Healing Aids:

I. The "Spontaneous" Cure

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Psychotherapy attempts to alleviate emotional suffering and to enhance personality adjustment through planned psychological interventions. It is by no means the only medium through which such benefits may be achieved. Indeed, operative constantly on the individual are a variety of forces that serve to ameliorate neurotic symptoms and, even, under fortunate circumstances, to sponsor personality growth. These forces work so subtly that they are usually overlooked. They are an inherent and inevitable part of the living experience. Because they exert their effect during psychotherapy, as well as outside of it, it is difficult to know the proportion of benefit the individual has derived from these congenial non-specific agents and how much that person has gained from the specific psychotherapeutic maneuvers themselves. More importantly, if we are able to define the forces that nurture emotional health apart from psychotherapy, we may be able to incorporate these into our therapeutic program, or at least prevent ourselves from inhibiting them. Among the coincidental factors associated with psychological change are (1) "spontaneous" remissions or cures, and (2) influences that automatically issue out of any "helping" situation. The first of these will be considered in this chapter, the second in Chapter 4.

Spontaneous cures probably occur more frequently than we are wont to admit, for both physical and emotional difficulties are associated with periods of exacerbation and periods of remission and, often, without apparent cause, vanish of their own accord (Stevenson, 1961). Even the most pernicious forms of psychoses show a tendency toward spontaneous remission, and any institutional psychiatrist, even before the era of psychotropic drugs, is acquainted with the patient who, having spent years in the hinterlands of a chronic mental ward, suddenly returns to the world of reality and expresses eagerness to take up his place as a member of society (Wolberg, 1944).

The circumstances surrounding such a "spontaneous cure" are so nebulous that it is customary to look on the phenomenon, when it occurs, as a sort of fortuitous development. Were we, however, able to peer into the complex mechanisms of the psyche, we might be able to discern definite laws of cause and

effect relating to the spontaneous recovery.

It is unfortunate that so much emphasis has been placed on the evil consequences of illness that we are prone to concern ourselves chiefly with destructive pathologic effects and forget that constructive regenerative influences may be coincidentally present. It is as if in an infection, we were to concentrate on morbid elements of the disease without considering such protective manifestations as the antibody defenses and the activities of the reticuloendothelial system. Any somatic disease whips into action reparative mechanisms in the direction of health. Cases of unquestionable cancer that spontaneously resolved themselves without benefit of any treatment have been authenticated (Medical Tribune, 1963). This indicates that the individual has internal healing forces that are capable of altering an even presumably fatal illness. A mental or emotional disorder, too, will set into action defensive devices to restore the individual to homeostatic equilibrium; indeed, a study of the symptoms of emotional illness, whether the difficulty be a mild behavior problem or a pernicious form of schizophrenia, will always demonstrate a fusion of dynamisms representative both of the conflict and of the defenses the organism elaborates in an attempt at cure.

The exact mechanisms involved in spontaneous remissions or cures are not exactly known, but a number of operative factors, singly or in combination, suggest themselves.

First, life circumstances may change and open up opportunities for gratification of important but vitiated needs, normal and neurotic. Thus a man with a passive personality organization may, in fighting against passive impulses, elevate himself to a high political post that enables him to exercise secret cravings for power. The expression of these may neutralize inner fears of weakness and lead to feelings of well-being. A masochistic individual may appease a strong sense of guilt through the incidence of a physical illness, an accident, or a catastrophic life happening. A man with strong dependency strivings may flounder around helplessly until he chances onto a stronger individual, an alliance with whom infuses him with strength and vitality. A woman with schizoid tendencies may be afforded, through advantageous circumstances, an acceptable opportunity to detach herself in her interpersonal relationships. A shift in the current situation may, therefore, work in the interest of promoting psychic stability.

Second, provocative stress sources may disappear as a result of the removal of the initiating environmental irritant, or because individuals extricate themselves from it. A child, selected by a classroom bully as a focus for sadistic attacks will, in all probability, lose tensions and fear with the forceful removal from the class of the disturbed assailant. A young dependent adult overprotected by a neurotic parent may decide to move away from home and be rewarded with an expanding sense of independence. A man, promoted into a highly competitive position that sponsors fears of failure, may, by returning to his previous, more mediocre job, overcome his anxiety and depression. A leave of absence or a vacation may, in a similar manner, remove a person from a disturbing life situation, helping in self stabilization.

Third, crumbling or shattered defenses, whose failure promotes adaptive collapse, may be restored to their original strength, or be reinforced by new, more adequate, and less disabling defenses. The return of a sense of mastery in the course of buttressing failing defenses, will help to restore the individual to functional equilibrium. One way this is accomplished is by consolidating the mechanism of repression, sealing off disturbing conflicts that have managed to get out of control. For instance, a detached individual who has remained celibate all his life due to deep fears of sexuality, falls in love with a young woman. Her demands for reciprocal affection excite sexual fantasies and impulses that frighten him. Anxiety and psychosomatic symptoms precipitately develop. The man then discovers that he is completely impotent and that his interest in the young woman abates and dies. Restored repression of his sexual desires, with a return to isolation from women, brings about a recovery from symptoms. Sometimes, however, the defenses of the individual undergo modification in the direction of greater adaptability to inner demands and external pressures. More constructive ways of dealing with current difficulties may be evolved. The means by which this is accomplished will vary with the circumstances and with the opportunities at one's disposal. Not only may the old neurotic balances of power be restored, but surprisingly, without design, enduring personality changes may develop.

No matter how victimized by past unfortunate conditionings, each individual is always capable of some determinate learning under propitious circumstances. The expectation of failure, the misinterpretations of the reality situation, the transference projections, the repetitive compulsive reenactments of self-defeating behavior will tend, of course, to sabotage successes. Inferential discoveries, nevertheless, are going on around the matrix of the neurotic responses, reconditioning at least some

neurotically structured reactions.

Instances of reconditioning in even severe neurotic and psychotic disorders have been recorded in persons who have by chance come under the guidance of a well-disposed and intelligent authority or group or who have found a congenial environment that is different from their habitual milieu. These changes are not fortuitous; they follow certain laws of learning. Where the individual finds an environment that does not actively repeat the punitive, frustrating conditions of the past; where it provides a modicum of security and some means of gratifying vital psychological needs; where it gives a feeling of knowing what is expected of each person and some ability of living up to these expectations; where it nurtures in the individual a sense of belonging and of being wanted; where it provides opportunities to expand capacities and skills—there will be optimal conditions for learning. Obviously, those individuals whose emotional problems have undergone minimal structuralization in the form of neurotic and character disorders will have the best chances to learn in a favorable environment. Where extensive organization has occurred, conflictual strivings will tend to be perpetuated even in a good setting. There still may be spontaneous periods of improvement, particularly where the environment absorbs and deals in a tolerant and constructive way with the individual's neurotic impulses and behavior without excessive punishment or withdrawal of love.

Alleviation of symptoms may follow change in one's philosophies and altered ways of looking at things. For example, some people adapting to difficult life situations from which there is no escape may insulate themselves by making a virtue out of suffering or by maintaining a stoical attitude accepting their plight as inevitable, and their endurance a test of competence. Some may even make capital out of personal disasters and secure equanimity through martyrdom. Many of the present-day mystical philosophies stress the unimportance of adversity and external hardship, focusing the individual's attention on establishing contact with the inner self, the essence of being. In this way the individual detaches from suffering and seeks joy in meditation and self-contemplation. An individual may resort to other devices in the belief that one has control of one's destiny, for instance, through reliance on astrology. By classifying oneself in a special category, subject to designated occult influences of the stars, security is gained through regulation of one's life according to a dictated design.

The patient may also evolve the tactic of pushing out of mind sensations of pain, substituting for

them thoughts of health and pleasure, hereby eliminating customary preoccupations with suffering. Through proper thinking habits, like “looking at the cheery side of life,” “counting one’s blessings,” and engaging in thoughts of happiness and health, attempts are made to sidestep calamities and illness. Troubles may be rationalized by assuming that one is not alone in strife, that there are others more disabled, more unfortunate. Striving for success and perfection are false objectives that can bring only exhaustion and disappointment. It is better to scale down ambitions and content oneself with modest goals that are within the range of immediate fulfillment. Some people make an inventory of their good qualities and recognize that there is much for them to be thankful. They may rule themselves to live in the spirit of forbearance, tolerance, sympathy, and altruism, reviving, in the course, religious convictions.

By turning to religion, some are able to help themselves tolerate the destructive effects of their neuroses. In the hands of a Power stronger than a human being who can lead one to paths of safety and glory, one can be reassured. In union with God, one does not have to struggle alone; one may be helped to endure travail, to conquer evil thoughts and impulses, and to find confidence and strength in living.

In addition to philosophic and religious aids, the individual may indulge other modes of gaining relief. Remediable, stressful environmental distortions that sustain and exaggerate tension must be rectified. Moving to a residential area, for instance, that is not so riddled with quarreling and disturbed neighbors may eliminate one source of irritation. Or, some difficulties may spontaneously cease to exist, as the case where a destructive supervisor or foreman is replaced with a genial one, or a hostile member of one’s family may regain control over explosive emotions or takes up residence in another city. The patient may also find relief from symptomatic preoccupation by externalizing interests in arts, crafts, hobbies, music, games, dancing, physical exercise, sports, and recreation. Diverting energies into useful channels of activity may thus have a salubrious effect. Engagement in social activities, joining clubs and other groups, in which there is a sharing of experiences can be most constructive.

The patient may also gain relief from some personal problems by running away from trouble sources. A woman may rightfully decide that her difficulty is stirred by a destructive home environment, or an impossible work situation, or a relationship problem with which she cannot cope. She may consequently remove herself bodily from her predicament by going on a long vacation or permanently rupturing her contacts. Thus, she may seek a divorce, quit her job, or abandon her boyfriend; and these

disengagements may, if auxiliary problems do not intervene, temporarily at least, relieve her distress. She may act more destructively to escape her suffering by indulging in excessive drinking that deadens her sensations, take tranquilizers that ameliorate them, or take sleeping potions that submerge them.

Some people seek peace of mind by providing what they consider rational answers to explain what they are experiencing. They may do this through self-probing, examining their reactions, questioning their motives, or cogitating on their fantasies. Under situations of stress individuals are particularly disposed to such self-analysis. Adolescents particularly attempt to resolve warring elements within themselves through self-searching. Such efforts are not always successful since sources of difficulties may be hidden from their rationalizing probes. The capacity for insight varies.

The desire to reach an understanding of one's turmoil will invoke different degrees of logical compromise. Education helps especially through proper readings and personal therapy. Those individuals who have evolved reasonable understanding are most capable of illuminating dark recesses within themselves. Spontaneously, a recovery of forgotten important memories, a relating of present-day patterns to past experiences, a recognition of inexorable and self-defeating demands they make on themselves may occur. Ultimately, new solutions for old problems may emerge.

Sometimes such self-understanding is mobilized by single interviews with a psychotherapist with no further professional help. Malan et al. (1975) at the Tavistock Clinic made a study of untreated neurotic patients who had exposed themselves to one initial interview and had been seen by a therapist no more than twice in their lives. On follow-up, 51 percent were found to have improved symptomatically, and 24 percent were judged to have improved dynamically, some even to the point of recovery. This is a significant number. Considering the fact that the work was done at the clinic by established psychoanalysts who utilized rigid standards of measurement, we, therefore, have evidence that even single encounters may prove of great benefit to some patients. Whatever activity was mobilized during the interview, the patients continued spontaneously on their own to work through residues of their problems.

It will be seen from the above that the so-called spontaneous remission or cure does not take place in a vacuum. It results from the operation of many forces that exert a healing influence. Even though

these processes are not deliberately designed, but obtrude themselves through what appears to be chance, each individual takes advantage of some healthful elements in the environment and within the self to reduce suffering and pain.

As a general rule, spontaneous remissions or cures are of a palliative nature, with no great change coming about in the existing mental mechanisms and intrapsychic apparatus. In a few instances, however, rather surprising spontaneous structural alterations develop in the personality organization itself. Most recalcitrant to spontaneous resolve are deep-seated neuroses linked to repression of infantile anxieties, which are so split off from access to awareness that they do not lend themselves to dissolution. Nevertheless, even here they may be more readily held at bay by a spontaneous strengthening of repressive forces, or improved by avoiding situations that tend to activate them. Focal conflicts may in this way be isolated sufficiently to enable the individual to function satisfactorily without being aware of their content or even existence.

It will be recognized that some of the undercurrent processes in spontaneous cure are similar to those in psychotherapy. Whereas in spontaneous cure the individual inadvertently arrives at conditions in which it is possible to work out problems, in psychotherapy, circumstances conducive to relief or recovery are actively manipulated.

Many opportunities exist in the environment that would lend themselves to a corrective influence on the patient. Unfortunately, the average person does not often take advantage of them because there is no awareness of their potential or because their meaning is distorted, or because they pose a threat to neurotic defenses. During psychotherapy, the resistances of the individual are handled so that the most can be made of the opportunities encountered. In contrast to the fortuitous nature of the spontaneous development, psychotherapy is a planned effort to promote symptom alleviation and constructive learning both within and outside of the psychotherapeutic setting.