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Subjectivity in a therapeutic process as a predictor of psychotherapeutic success

Abstract

Reflections on the uniquely human dimensions of behavior over the last few decades have become a meeting space connecting different sciences. The holistic health model emphasizes the subjectivity of man. Humans are open and active, and remain in relationships with others; they relate to the world they live in and seek meaning. Subjectivity in the psychological perspective can be described in three ways: subjectivity as identity, individuality, specific experience of self; subjectivity as the ability to initiate, regulate, direct, and realize goal-oriented and autonomous activity; subjectivity as the application of one's own system of values. Subjectivity or causality (core features agency) expresses itself in the ability to make choices and planning, but also to directing actions and the realization of plans. The motivation to begin psychotherapy is influenced by numerous motives and conditions. Internal motivation is the main subjective resource in therapy. People internally motivated function better in better areas of life. They are characterized by greater involvement, activity, trust in their own abilities, persistence, creativity, a feeling of self-worth and general well-being. They experience engagement and immersion in the activities they undertake. The experience of causality – understood as the experience of being the author of events, the experience of having influence over events – is the fundamental cause without which the feeling of self-causality will not appear during development. As noted by R. White, it is a fundamental experience for good functioning and coping with the challenges of life, including illness.

Keywords

Subjectivity, therapeutic process, psychotherapy, internal motivation.

1. Introduction

The starting point for the discussion on the topic of human subjectivity is the fundamental conviction that the only way to describe and understand how humans function must be the one that uses a paradigm that goes beyond the laws that govern the behavior of animals. Karol Wojtyła described that unique difference between man and animals as *animal rationale* and emphasized the fact that the human-specific development of man expresses itself in the moral dimension¹. Elsewhere, Wojtyła writes: man has feelings and is therefore capable of experiencing himself through morality, which forms a unique basis for understanding humanity².

Reflections on the uniquely human dimensions of behavior over the last few decades have become a meeting space connecting different sciences: philosophy, anthropology, theology, sociology, and psychology. Each of those sciences have come up with its own concept of human subjectivity deeply rooted in its own foundations. Philosophical sciences approach the topic of subjectivity in relation to their concepts of man, theological sciences place subjectivity in relation to the Absolute, while biological sciences evolved from the empirical paradigms only lightly touch upon that topic. In medical sciences, the prevailing model of health and illness is based on the idea of the human body as a machine, seeing illness as damage and the doctor as a mechanic fixing a broken mechanism. The biomedical model focusing only on the biological dimension of the human body, detached from the whole of the human life, does not let one recognize and understand the weight of the health problems going beyond the Cartesian model of psychophysical mechanisms. Another perspective offers a holistic health paradigm.

2. The holistic model of man in natural science and the subjectivity of man in the humanistic currents

According to the principles of the organismic theory, an organism is a coherent system with complex dynamics and structure. Its most significant

¹ K. Wojtyła, *Osoba i czyn oraz inne studia antropologiczne*, in: T. Styczeń, A. Szostek, W. Chudy i in. (eds.), *Człowiek i moralność* t. IV, Lublin 1994, TN KUL, p. 433–443.

² K. Wojtyła, *Problem doświadczenia w etyce*, “Roczniki filozoficzne” XVII (1969) 2, p. 5–24.

distinctive features are self-renewal and self-transcendence. An organism always behaves as a unified body, because what happens in any part of the body affects the whole body. The functioning of any part of the body is governed by the laws that govern the functioning of the whole body. Therefore, in order to understand the functioning of any part of the body one must understand the laws that govern the functioning of the whole body³.

Contrary to the biological model, which treats man more like an object controlled by various mechanisms, the holistic model (especially in medicine) emphasizes the subjectivity of man. Humans are open and active, and remain in relationships with others; they relate to the world they live in and seek meaning. Seen from such a perspective, man is not only an organism following the laws of nature, but more as a subject, actively relating to the surrounding world as well as oneself, directing one's own behavior, having influence over one's own activities and capable of assigning individual meaning to those activities⁴.

The identification of those dimensions in psychology is an undeniable achievement of the humanistically-oriented psychologists. The psychologists opposing the reductionist paradigms of behaviorism and psychoanalysis proposed a new concept of man. Gathered around the *Journal of Humanistic Psychology*, Gordon Allport, James Bugental, Charlotte Buhler, George Kelly, Abraham Maslow, Floyd Matson, Henry Murray, Rollo May, and Carl Rogers remained under the influence of existentialism. Husserl's phenomenology, and the works of Dilthey, Rickert, Spranger, and Stern emphasized autonomy, individuality, creativity, and man's ability to experience his existence. They were the first to ask questions about the nature of a person and the laws that govern its development, about human capacity, and self-realization processes. They emphasized intentionality, the subjective type of existence and a humanly-specific ability to transcend its present status quo and the limitations imposed by the external or the internal environment⁵. The humanists chose for their basic goal the freeing of the potential capacities

³ K. Goldstein, *The Organism. A Holistic Approach to Biology Derived from Pathological Data in Man*, New York 1939, American Book Publishing.

⁴ G. Dolińska-Zygmunt, *Teoretyczne podstawy refleksji o zdrowiu*, in: G. Dolińska-Zygmunt (ed.), *Podstawy psychologii zdrowia*, Wrocław 2001, Wydawnictwo Uniwersytetu Wrocławskiego, p. 11–18.

⁵ E. Mańka, *Polemiki wokół psychologii humanistycznej*, "Przegląd Psychologiczny" 57 (1980) XXIII 3, p. 429–444.

of man by offering support for the removal of internal blocks obstructing reactions to the outside world; autonomic, independent decision-making; and, the direct and unburdened by fear interactions with others. Therapy should not be focused on prediction and control, but on understanding and freeing the human potential. It should be derived from the fundamental principles of the humanistic psychology, for which the fundamental question is not what can be done to stop people from suffering, but how to change those who are healthy into people capable of self-realization. Humanistically-oriented psychologists proposed the following theses:

(1). Man is more than a sum of his parts. The subject of humanistic psychology is man in his most humane aspect. Its purpose is to emphasize that which is most distinctive in man and constitutes his uniqueness. This new science stands in opposition to the partial concept of man as the sum of its elements. Knowledge of the laws of the functioning of specific parts is only partial knowledge, and it does not help build a complete picture. The purpose of each part can be considered only in relation to the whole – to the essence of man as a person.

(2). Man exists in a human environment. To fully understand the functioning of man one has to consider him in the context of his relationships with his surroundings – the environment he lives in; his relationships with other people. It is specific to the essence of man to establish and remain in numerous interpersonal relationships. The postulate for approaching man in his interpersonal context is significantly emphasized by humanistic psychology.

(3). Man is conscious. Consciousness is emphasized as the most important component of human existence. The starting point to understanding the human experience is accepting the continuous character of consciousness. Seen from that point of view, consciousness is continuous and multi-layered.

(4). Man has a choice. Man is conscious of the influence of his own choices on his stream of consciousness. He is not a mere observer, but fully participates in it. This creates exciting opportunities to transcend the limits imposed by the nature. This knowledge is the source of the man's capacity for change, his activity and the ability to adapt to the surrounding conditions, situations, and to mobilize his own activity, potential and to undertake goal-oriented activities.

(5). Man is goal-oriented. Man is capable of taking a certain course of action and pursue its realization. Human intentionality exhibits itself in setting

goals, evaluations, and attaching meaning to one's own activities. Humanistic psychology assumes that man tries to reach stability, but at the same keeps looking for variety and disruption of balance. One can say therefore that man acts in a goal-oriented way, and uses a variety of ways of achieving those goals, in a complex, often paradoxical way⁶.

Exploration based on the natural sciences considers "self" as an object to be measured, described, examined and manipulated in order to describe, forecast, and control it. Humanistic psychologists who opposed such a simple vision of man also maintained that there is no such thing as a dry, objective knowledge. They maintained that all knowledge is based on the psychology of human experience – conscious or unconscious⁷. The new methodology assumed therefore from the beginning a subjective, internal point of reference, which makes it possible to understand the behavior of a man not from the point of view of an external observer using an external point of reference (*spectator knowledge*), but in relation to the person who is experiencing, living, and behaving in a certain way, all of which is possible when an internal point of view (*experiential knowledge*) is assumed. That internal phenomenological point of reference allows one to reach the individual, specific for a certain personal way of experiencing one's own existence and the surrounding world⁸.

The impersonal objectivism of a researcher, typical in a neo-positivistic approach does not allow for the subjective exploration of the subject's world. In that kind of exploration emphasizing the unique way of seeing and experiencing, it is necessary to establish maximum honesty and openness. Facilitating conditions can be built through the atmosphere of safety and acceptance in a therapeutic relation. Getting to know someone is only possible through positive, emotional engagement and not through impersonal distance and restraint. The main driver during contact with the patient should be effective dialogue and not manipulation. Depending on the type of contact with the researcher, patients expose different traits. It is therefore highly likely that various interdependencies established during the course of therapy will

⁶ J.F.T. Bugental, *W poszukiwaniu autentyczności*, in: K. Jankowski (ed.), *Przełom w psychologii*, Warszawa 1978, Wydawnictwo Czytelnik, p. 325–340.

⁷ E. Paszkiewicz, *Psychologia humanistyczna – między naturalizmem a antynaturalizmem*, "Studia Filozoficzne" 5 (1978), p. 149–160.

⁸ Z. Uchnast, *Metodologiczne problemy w psychologii humanistycznej*, "Zeszyty Naukowe UJ. Prace psychologiczne" 9 (1993), p. 59–74.

be artifacts of the specific therapeutic approach that influences the relationship between the psychologist and his client.

In the humanistic context, currently defined subjective orientation is the disposition for being the subject of actions and activities⁹. A complex and multi-layered structure, originating from the internal organization of man lets him become unique through identity and individuality as well as through his relation to the outside world. The subjectivity of man finds its expression in the abilities necessary to recognize his situation and transforming it into a goal that drives action. It is worth pointing out that Karol Wojtyła in his breakthrough publication “Person and Act”, while remaining under the influence of phenomenology, emphasizes the uniqueness of the human experience of the world, especially in the undertaken activities – the experience that realizes itself in action. The main space of expression of that which is human, are the conscious, free, and responsible actions of a mature person – the human act¹⁰. Philosophical and theological influences of the thought of St. Thomas Aquinas, St. John of the Cross, and Husserl’s phenomenology brought about a synthesis of all of the aforementioned schools of thought that was well-aligned with the newly developed currents of humanist psychology¹¹. According to Carl Rogers, man is a subject experiencing freedom and capable of realizing himself through specific actions. The most important experience motivating the efforts to achieve freedom is the experience of being oneself. Such freedom is understood as internal, existential freedom, it is the freedom of experiencing one’s choices and their consequences, it is the freedom of choice without external pressures. It is connected to overcoming fear of cutting existing ties and to the courage of meeting that which is new, unknown, unpredictable: one needs courage when one makes one’s own choices to make that first step towards the unknown¹².

Subjectivity in the psychological perspective can be described in three ways: subjectivity as identity, individuality, specific experience of self;

⁹ M. Kořta, *Orientacja podmiotowa: zarys modelu*, in: A. Gurycka, M. Kořta (eds.), *Podmiotowość w dořwiadczeniach wychowawczych dzieci i młodzięży*. Cz. I: *Wychowanek jako podmiot działań*, Warszawa 1989, Wydawnictwo Uniwersytetu Warszawskiego, p. 35–46.

¹⁰ K. Wojtyła, *Osoba i czyn oraz inne studia antropologiczne*, Lublin 1994, Towarzystwo Naukowe KUL.

¹¹ A. Półtawski, *Filozofia Karola Wojtyły a fenomenologia*, “Ethos” 19 (2006) 4, p. 96–102.

¹² C. Rogers, *Uczyć się jak być wolnym*, in: K. Jankowski (ed.), *Przełom w psychologii*, Warszawa 1978, Wydawnictwo Czytelnik, p. 289–303.

subjectivity as the ability to initiate, regulate, direct, and realize goal-oriented and autonomous activity; subjectivity as the application of one's own system of values¹³.

All aspirations and the originating from those aspirations attempt to embrace man without reference to the higher – personal dimension organizing dispositions, features, and adaptations and in the consequences are doomed to be accused of reductionism. Without considering the dimensions that constitute the personal character of it, all attempts at describing man must remain necessarily partial.

3. The Client as the subject in therapeutic activities

Contemporary psychology emphasizes three basic challenges that condition the good functioning and preservation of health: coping with difficulties, pursuit of balance and health and focus of internal development¹⁴. However, for many, these are tasks beyond their ability. Exposed to multiple, often complex conditions, the ongoing functioning is disrupted. The variety and complexity of difficulties experienced by the patients is a challenge to contemporary therapists. Researchers working in the fields of psychology and psychiatry carry out research in order to identify the causes of the difficulties experienced by the patients as well as ways of helping patients. The issues raised in this paper are aligned with those attempts.

Unfortunately, the development of medical and psychological diagnostic tools and techniques lead on one hand to the deeper understanding of the causes and the mechanisms of the development of dysfunctionalities or diseases, and to an even stronger establishment of the views that see the patient as an object of medical and therapeutic activities. The patient has to “undergo therapy”, “undergo procedures”, and “comply with therapeutic procedures”. The issues of dignity, subjectivity and freedom of making decisions in the therapeutic process will take a lower priority. *Kodeks Etyki Lekarskiej (The Ethical Code for the Medical Profession)* does not contain any direct references to

¹³ A. Tokarz, *Problematyka podmiotu w wybranych koncepcjach motywacji*, ”Zeszyty Naukowe Uniwersytetu Jagiellońskiego – Prace Psychologiczne” 11 (1993), p. 19–30.

¹⁴ J. Preston, *Zintegrowana terapia krótkoterminowa*, Gdańsk 2005, Gdańskie Wydawnictwo Psychologiczne.

the patient's subjective dimension. A doctor is treated as a special kind of craftsman and his occupation is presented as a special type of craftsmanship. A good example of such an approach is article 8, which states that *a doctor ought to carry out all diagnostic, therapeutic, and preventive procedures with due care, spending the time necessary to carry them out.*

However, the doctors themselves (not just patients) had noticed quite early on the incompleteness of such an approach. The respected psychiatrist, Antoni Kepinski, in his clinical practice treats patients as whole, emphasizing that the psychiatrist's help cannot be limited to the diagnosis of his illness, but must include a holistic analysis of the patient's life. Therapists should not limit their diagnosis to a narrow fragment of the patient's existence, because life should be seen as a whole. The distinction between the sickness of the body and the sickness of the soul is false, because man always experiences suffering as a whole psychophysical unit¹⁵. Therefore, the only appropriate approach for the doctor is to treat the patient in a way that emphasizes his or her subjectivity.

Contrary to the medical perspective, *Kodeks Etyczno-Zawodowy Psychologa (The Ethical Code for the Psychology Profession)* approached this issue from a different point of view. The introduction contains the following passage: the most important value for a psychologist is that of the good of another man, and the professional goal – helping other people in solving life's problems and achieving a higher quality of life – on the path of personal development – and the improvement of interpersonal relations¹⁶.

The aforementioned C. Rogers, the creator of one of the most inspiring concepts of therapy – client-centered therapy defined the job of the therapist and his or her role on the process of accompanying the client in his or her efforts to cope with life's challenges and employing the patient's own resources in the process. According to Rogers, human beings ought to pursue freedom and realize it in specific actions along the path of their own development. The most important experience motivating them to achieve freedom is that of being oneself. That process is achieved during psychotherapy – as a part of the therapy. The ultimate goal of Rogers' psychotherapy is helping the patient become convinced that he or she is capable of directing himself or

¹⁵ A. Kępiński, *Lęk*, Kraków 2002, Wydawnictwo Literackie.

¹⁶ *Kodeks Etyczno-Zawodowy Psychologa*, Warszawa 1991, Polskie Towarzystwo Psychologiczne.

herself. A very important step in this process is achieving independence from external influences over his or her attitudes, judgments, and behavior. The patient realizes that he or she does not have to meet the expectations of the community, does not have to try to what others expect him or her to do, but should focus on using the opportunity to realize his or her own decisions, goals, and choices. The feeling of individuality begins to replace conformism and alienation. The client begins to learn to fully accept himself or herself, fully conscious of his or her faults and capacities, which should be improved. During the process the client becomes conscious of his or her own feelings, begins to notice what is happening inside from the point of view of a person directed by the values imposed by the external world, and continues the journey towards the values discovered within himself or herself¹⁷. Realization of one's own goals, ideals becomes more important than trying to meet the expectations of others. A significant achievement of psychotherapy is the focus on making one's own choices and taking responsibility for those choices. Lesser emphasis is then placed on the internal and the external unexplained motives directing previous behavior and the emphasis is placed on the unused possibilities and the unknown potential for directing one's actions. Rogers contrasts the deterministic model with the vision of free man claiming that freedom is by its nature something internal, something that exists inside of a living human being independently of all external choices and alternatives¹⁸. It is connected to overcoming fear of cutting existing ties and the courage to meet new, unpredictable challenges: one needs courage to make one's own choices and to take the first step towards the unknown. The freedom of choice is accompanied by a new experience of responsibility for the chosen path, for discovering one's own identity. Understood in such way, freedom gives new possibilities to realize the newly discovered potential. But the acceptance of freedom and adaptation to the new style of functioning causes a certain type of ambivalence: freedom is attractive, because it opens up new opportunities, but it is also scary, because of the responsibilities that it imposes. Learning to be free requires one to abandon the old ways, styles of functioning, and the pursuit of the discovered potentials. Man stops being

¹⁷ *Kodeks Etyczno-Zawodowy Psychologa*, Warszawa 1991, Polskie Towarzystwo Psychologiczne, p. 297.

¹⁸ *Kodeks Etyczno-Zawodowy Psychologa*, Warszawa 1991, Polskie Towarzystwo Psychologiczne, p. 297.

worried and limited, begins to better understand his actions and begins to make decisions based on his own convictions and conscious motives instead of the values imposed by others. An important step in that process is acceptance of one's feelings and learning to seek their fulfillment and satisfaction based on those feelings. One's own experience begins to have a higher value and that in turn helps discover one's uniqueness. Acquiring those experiences causes man to begin to live in a creative and responsible way, open to experiences brought about by the active participation in life. One can then set realistic goals and mobilizes his own efforts towards achieving them on the path towards self-realization.

4. Internal motivation as the main subjective resource in therapy

The concept of internal motivation has a long history in psychology, even though recently it has most often been associated with the work of Richard Ryan and Edward Deci¹⁹. Among researchers whose works in a significant way contributed towards the formulation of the concept of internal motivation one has to mention Robert White and Albert Bandura. Their research into the causality and the feeling of self-efficacy inspired researchers looking for the factors shaping the activities of the subject. According to Bandura, the subject has most of all the abilities to self-motivate and self-regulate. Subjectivity or causality (core features agency) expresses itself in the ability to make choices and planning, but also to directing actions and realization of one's plans. The factor that enforces the processes of causality and self-regulation is the ability to judge one's own behavior, meta-reflection. Thanks to them people judge their own motivations, values, and the meaning of life's goals.

Particular attention should be paid to the contemporary research of R. Ryan and E. Deci on internal motivation and basic needs, which eventually led to the development of the theory of self-determination.

The starting point for the deeper reflection by both researchers was basic observation of people and noticing their different levels of satisfaction derived from the actions they were taking. The researchers' interests build upon the

¹⁹ R. M. Ryan, E. L. Deci, *Intrinsic motivation and self-determination in human behavior*, New York 1985, Plenum Press.

interests of White and Bandura – the motivations that lead to the feelings of causality, efficacy, or competence.

That fundamental motif, already observed in the behavior of small children, inspired the researchers to focus on internal motivation and the factors shaping that motivation. That motif directs the behavior in a way that allows the person to experience the feeling of efficacy, the conviction that one functions effectively in the surrounding world and has control of what is happening. Internally motivated behavior originates from the inherent tendency to seek challenges and overcome difficulties. It is directed by the need for efficacy and self-determination. From very early childhood, man tends to try to overcome difficulties and feel satisfaction from victories large and small, sometimes deliberately seeking those challenges. The environment supports the realization of those needs when it provides the challenges and mobilizes the person to overcome them. Praise and reward in the form of certain goods provide children with positive feedback, a feeling of satisfaction, and help enforce the tendency to seek and overcome challenges. In the early stages of development, the child completes a lot of the tasks because of the expected rewards or to avoid punishment. External motivation is more prevalent at that stage. Over time, the child will internalize the norms, the values, and the standard of behavior. External motivation is still prevalent at that time, but it is about to be overtaken by the internal motivation. Only when the laws have become fully internalized as one's own, in line with the Self, internal motivation begins to govern one's behavior in a more significant way. The last stage of the transition from the externally motivated regulation of behavior to the internally motivated regulation of behavior is the stage during which the internally motivated behavior is more prevalent than the externally motivated behavior. These are behaviors that stem from the person's needs, and are cause of pleasure or satisfaction²⁰. Over the course of life, internal motivation is being shaped by various experiences, education. Rewards initially enforce external motivation, but over time they serve to enforce internal motivation. External motivation is a direction towards achieving a specific, expected outcome – internal motivation is oriented towards action for the action's sake, for pleasure, comfort. Seen as such, internal motivation is a natural inclination towards assimilation, improvement, necessary for the intellectual

²⁰ A. Bandura, *Self-Efficacy*, New York 1997, Freeman.

and social development, finding ways to express itself in initiating activity and performing it for its own sake.

People internally motivated function better in better areas of life. They are characterized by greater involvement, activity, trust in their own abilities, persistence, creativity, a feeling of self-worth and general well-being. The search for the conditions of internal motivation allowed to observe the freedom of challenges that are chosen and the presence of positive feedback. The features of the challenges that enforce internal motivation have been summarized in the following way:

- 1) The challenges are moderately difficult.
- 2) One is convinced that one can handle the challenges.
- 3) The challenges are a source of satisfaction.

In the end, the research into internal motivation, its sources and conditions led to the formulation of the three basic psychological needs:

- (1) The need for competence – the need for having influence over the course of events and the effects of one's actions.
- (2) The need for autonomy – the ability to act using one's own free will, freedom of choice.
- (3) The need for relatedness – the need for relationships, connections, caring about other people.

Fulfillment of those needs releases the feeling of efficacy. The three basic needs remain closely related. The need for competence, based on the experience of causality enforces the feeling of autonomy and independence. The need for autonomy in relationships is not synonymous with isolation, but rather translates into the feeling of independence and responsibility that allow for cooperation and engagement in various initiatives with other people which conforms the communal nature of man. Realizing those three basic needs man naturally develops internal motivation and direct his activities in a way that allows for the realization of the feelings of causality, efficacy, the realization of the self and cooperation.

5. Motivation to begin psychotherapy

The motivation to begin psychotherapy is influenced by numerous motives and conditions. Amongst conditions most often cited by the patients are: the prolonged experience of suffering, expressed as sadness, a lack of interest

in life or undertaking activity; a feeling of prolonged tiredness, a constant feeling of internal tension, the difficulty in taking decisions (ambivalence), general heightened levels of anxiety, panic attacks, disrupted sleep, etc. Patients stop understanding their own reactions to what is happening to them, their own emotions, which are often exaggerated in contrast to what is happening. The patient may show signs of being upset, angry, enraged. He may be experiencing somatic discomfort, heart problems, an upset stomach, a lack of breath, and chest pains. A frequent reason forcing someone to seek help includes adaptational difficulties stemming from difficult, stressful life situations: the death or separation from a close family member, loss of employment, the inability to achieve self-realization, problems at work, at school, feeling burnt out, the need to face changes over the course of life, existential problems and many everyday problems. All of those worries negatively influence the quality of life and the satisfaction with oneself and one's life. Lidia Grzesiuk points out that a beneficial starting point for psychotherapy is the motivation connected to the wish to change one's behavior – even if the patient is not exactly clear about what he would like to change²¹. Quite often, even without feeling dissatisfied with himself or his life, the individual finds it difficult to try therapy. The causes may be varied. Fear can be one of the obstacles. Resistance is an important stage in the therapeutic process, it is an important expression of the patient's natural desire to avoid suffering or shame. Resistance is a common occurrence in the case of all types of change – what is known is perceived as safe; resistance against psychotherapy is natural, because it is seen as something that threatens narcissistic feelings; resistance against the influence of a psychotherapist; and resistance to self-consciousness (realization of one's internal needs, thoughts, memories, emotions – “the truth” of the internal experiences).

The research conducted by the author of the study of patient motivation allows us to formulate interesting proposals on the subject of the possibilities for the exploration of new areas of therapeutic influence, such as internal motivation based on the basic experience of causality and self-efficacy. Using the *Motivational Questionnaire*, created by the team of employees at the Office of Psychotherapy at the Department of Psychiatry CM UJ led by Jerzy Aleksandrowicz, researchers conducted a study of 24 patients who applied

²¹ L. Grzesiuk, *Psychoterapia. Szkoły, zjawiska, techniki i specyficzne problemy*, Warszawa 1998, PWN.

for qualification for therapy delivered at the daily ward of Wojewodzki Specjalistyczny Zespół Neuropsychiatryczny im. sw. Jadwigi w Opolu. The selected group consisted of people with diagnosed nervous disorders, who passed the qualification procedures and later took part in a full 3-month psychotherapy as a part of the group of nervous disorders of the daily ward. From the start, the selected group had a high motivation to take part in therapy. The questionnaire allows us to isolate seven aspects that constitute motivation:

- 1) pursuit of improvement of the observed symptoms;
- 2) avoidance of the therapy of the nervous disorder motivated by the predicted negative consequences;
- 3) pursuit of understanding of the disorders;
- 4) undertaking therapy under peer pressure;
- 5) pursuit of understanding and changing oneself;
- 6) pursuit of advantages derived from the nervous disorder;
- 7) denial of suffering from nervous disorder.

Despite the overall high level of motivation, the analysis of the results helped pinpoint the weakest components. Therefore: 54% of the subjects referred to the benefits of the nervous disorder and 46% were ready to deny that they were suffering from a nervous disorder. This proves that nervous disorders, despite causing negative and detrimental effects to everyday life disruptions, can be at the same time used to acquire certain rewards that the patients are afraid of losing. Jerzy Aleksandrowicz suggests that the appearance of the symptom lowers the level of the perceived helplessness and fear (the original advantage of the symptom), brings relief and at the same time allows the patient to obtain help and support of family and friends (secondary advantage)²². Some patients want to prove to others (friends, family), that they are truly suffering and try to disassociate themselves in their own eyes and in the eyes of others from full responsibility for their behavior. Both groups derive benefits from their status as a patient. The label helps them manipulate their friends and family who are willing to give “someone in therapy” certain privileges, such as delaying or relieving them of certain chores, obligations, or decisions. On the other end of the spectrum

²² J.W. Aleksandrowicz, *Zaburzenia nerwicowe*, Warszawa 1998, Wydawnictwo Lekarskie PZWL.

are patients who want to undergo therapy, but try to minimize and hide the impact of their disorder and try to emphasize their good state of health.

6. Internal motivation and the support for it in psychotherapy

The phenomenon of internal motivation can be considered on the basis of the concept of internal motivation proposed by Ryan and Deci, which is an example of a concept that points out unknown or ignored perspectives on the analysis of personal meta-resources responsible for the behavior that serves the preservation of health and the involvement in the process of healing.

Although external motivation is oriented towards the achievement of a specific expected outcome, internal motivation tends toward action for action's sake – pleasure, comfort, satisfaction. The completion of actions is accompanied by the feeling of competence and autonomy. People motivated in such way experience curiosity and the joy of undertaking activities and seeing their effects. It is characteristic that they locate their causality as internal. They experience engagement and immersion in the activities they undertake. The experience of causality – understood as the experience of being the author of events, the experience of having influence over events is the fundamental cause without which the feeling of self-causality will not appear during development. As noted by R. White, it is a fundamental experience for good functioning and coping with the challenges of life, including illness²³. As shown by the results of the studies of patients with nervous disorders, their motivation is mostly external – derived from the perspective of certain benefits such as better treatment by friends and family or the removal of discomfort, suffering²⁴.

It is a widely held belief that the main goal of psychotherapy is the removal of the symptoms and the problems causing the discomfort experienced by the clients. Undoubtedly, the most difficult cases are the patients completely lacking self-motivation to seek help, often forced to try therapy by their families

²³ R. White, *Motivation reconsidered: The concept of competence*, "Psychological Review" 66 (1959), p. 297–233.

²⁴ In this case we consider homeostatic motivation which is the basic mechanism of both: regulation of needs and elimination of discomfort – both aims ultimately tend to restore the disturbed balance in the system, which is the organism itself.

or friends. It is expected that they will quickly abandon psychotherapy, or will assume a passive role without making any effort to improve their situation²⁵.

Taking into account the concept of self-determination and the related concepts of causality in the context of the situation of the patients who choose psychotherapy one has to ask if internal motivation is going to be a significant factor in making the decision to start and later continue the psychotherapeutic process. Quite often the decision to try psychotherapy is motivated by the desire to regain the feeling of control over one's life, emotions, and the reactions to various events happening in one's life – all of which seem to be internally motivated. One can ask if the phenomenon of internal motivation will play an equally important role for all patients or if there are patients whose disorders will determine the decision to undergo therapy. It is expected that the feeling of lack of control over one's life will be emphasized in patients with traumatic or post-traumatic experiences²⁶.

And what about those patients who abandon therapy? Are they an example of the lack of internal motivation? Maybe those patients who had decided to undergo therapy and later abandoned it were precisely lacking internal motivation?

Patients with raised levels of fear are a special case. The levels of fear they experience make it difficult for them to complete even the simplest of the common daily activities. Ordinary situations and events that do not cause concern, less alone fear in most cases, become insurmountable for those patients. In their case, the question of efficacy and causality becomes acutely important. Such patients become overwhelmed by the least threatening events or the most common of everyday situations. What they should be experiencing instead is the feeling of moderate to heightened satisfaction dependent on the significance of the everyday challenges they are dealing with. Such experience is foreign to those patients. Regrettably, in most cases, the therapy will focus on the behavioral techniques of coping with fear. Yet, the experience of the efficacy and the causality of one's own actions can be the source of internal motivation and can lead to the positive outcomes of psychotherapy. The conclusions derived from many of the contemporary studies confirm the significance of this new way of thinking and the new approach in the

²⁵ L. Grzesiuk, *Psychoterapia. Szkoły, zjawiska, techniki i specyficzne problemy*, Warszawa 1998, Wydawnictwo PWN.

²⁶ L. Cierpiałkowska, *Psychopatologia*, Warszawa 2007, Wydawnictwo Scholar.

therapeutical process of helping patients with various psychological disorders. Studies of patients addicted to alcohol and drugs²⁷ and studies of people with traumatic experiences²⁸ confirm the value of such an approach in relation to the therapy of certain issues. The authors of this theory – R. Ryan and E. Deci in one of their latest articles, *A self-determination approach to psychotherapy: The motivational basis for effective change* postulate that the positive outcomes of psychotherapy remain in close relation to the needs and conditions for internal motivation discussed earlier in this article.

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²⁷ L. Smith, *Self determination theory and potential applications to alcohol and drug abuse behaviors*, “Journal of Alcohol and Drug Education” 55 (2011), p. 3–7.

²⁸ M.F. Lynch, *Theoretical contexts of trauma counseling*, in: L.L. Levers (ed.), *Trauma counseling: Theories and interventions*, New York 2012, Springer, p. 47–58.

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