

# THE PRINCIPLE OF UNITING THE POLARITIES AS THE BASIS FOR CLIENT-CENTERED PSYCHOTHERAPY

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**Abstract:** *the article raises the problem of the influence of parents' sexual relations on the formation of the child's identification scenarios. The author pays special attention to the substantiation of the principle of connecting the poles as an effective method of working with parent-child relationships in constellation sessions.*

**Keywords:** *identification, parent-child relationship, constellation, polarity.*

## ПРИНЦИП ОБЪЕДИНЕНИЯ ПОЛЯРНОСТЕЙ КАК ОСНОВА ПСИХОТЕРАПИИ, ЦЕНТРИРОВАННОЙ НА КЛИЕНТА

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**Аннотация:** *в статье поднимается проблема влияния половых отношений родителей на формирование сценариев идентификации ребенка. Особое внимание автор уделяет обоснованию принципа соединения полюсов как эффективного метода работы с родительско-дочерними отношениями в сеансах созвездий.*

**Ключевые слова:** *идентификация, родительско-дочерние отношения, созвездие, полярность.*

The way relations within the mother-father dyad effect the child's emerging worldview traditionally appears to be one of the major problems in a number of

areas of both fundamental and applied psychology [Bern 2004] [Erikson 2006], [Schneider 2006]. The mechanism of such influence is usually being described through the notion of identification [Zinchenko 2003], [Petrovsky, Yaroshevsky 1990], among others. Identification in its most general form “is an emotional and cognitive process of an individual’s unconscious identification with another person, group, or pattern” [Petrovsky Yaroshevsky 1990, p.130]. The concept of identification was introduced by Freud to analyze the processes of assimilating the behavior patterns of significant others by the child. Nevertheless, even after Freud, experts in developmental psychology, family psychology, social developmental psychology, psychoanalysis and others agree with interpretation of identification as “the central mechanism of the self’s ability to develop, the most important mechanism of socialization” [ibid.] Therefore, there is no doubt that as a conscious-unconscious cognitive process identification acts as a basic mechanism for an individual's reproduction of proper social patterns of action, including intergender relations.

In modern psychotherapy the mechanism of a child’s unconscious identification with a parent is studied, in particular, by modeling the person’s ego states (E. Berne’s term) that fix the consecutive phases of emotional separation [Kamalova 2019]. Significantly, the separation is naturally based on the formed inner child-parent figures, or introjects, which, in fact, “include control at the level of the structure integrating the action of all psychic organs” [ibid., p.26], that is, they underlie the person’s psychological stability.

For all the functional importance of these ego-states, it is extremely important to study their dysfunctional manifestations in the practical terms. Thus, as S. Kamalova argues, “sometimes control manifests itself negatively when one of ... psychic organs devalues or stops control over other psychic organs under the influence of the past needs, previously necessary for survival” [ibid., p.27]. In this case the introjected behavioral scenario does not allow the person to adapt to effective interaction, but on the contrary, it prevents the individual from mastering the reality “here and now”. The above-mentioned ego-states as initial stabilizers of the psyche are formed as the child's psyche reflects female-male relations, including sexual, between parents.

Thus, on the one hand, identification with parental figures forms the basis for the adaptation of the subject, while on the other hand, a number of the formed mental representations quite often embody maladaptive models of response and, therefore, the problem of psychotherapeutic correction of internal images of parents and interiorized behavioral patterns remains relevant.

Although the scientific theoretical generalizations and practical methods of psychological support are abundant there is still a need to search for and develop new principles of psychotherapeutic work taking into account the latest data not only from neurophysiology and psychogenetics, but also other disciplines studying the person, including sexology [Kelly 2000].

Long-term experience of psychotherapeutic practice allows us to assert that the nature of sexual relations between parents is a basic determinant of intergender relations patterns and other types of person’s relations with the external world. In

such relations the individual shows greater or lesser adaptability to the actual conditions, which in turn directly depends on how the individual experiences the contents of the such polarities as “good” and “bad”.

Using the numerous case studies, we shall try to show how the absence of sexual contact between parents forms the psychological maladaptation of the individual in this or that area, as well as and how our original technique, **based on the united polarities principle**, restores contact between parental introjects solving the problem of destabilization of any level of individual mental representation.

We based our work on B. Hellinger's method of Family Constellations [Hellinger 2010]. We have developed the general framework of systemic interpretation by assuming significance of any conscious and unconscious representations of certain fragments of reality. This method also integrates the techniques of Sexual Grounding Therapy, Lifespan Integration, and etc. However the main innovative step is building correctional work around the principle of **united polarities**.

We have repeatedly pointed out the dependence of the polarized nature of an individual's responses, as well as his or her manifestations in certain areas of life and the internal discordance of the different components of the personality [Narinskaya 2020], [Narinskaya 2021]. The social aspect of the person's polarized states is effectively corrected within the framework of psychotherapeutic practice. Long-term experience of such work has allowed revealing the evaluative duality of mental representations as a structural component of the majority of clients' maladaptive states. Let us consider in general terms a number of typical cases when therapy was based on the above mentioned hypothesis.

1. A disgust for sex is one of the ways in which parents do not accept each other as sexual partners. In male-female couples, disgust at the tactile level is often accompanied by the emotional experience of mutual hatred, which is certainly a sublimation of the partners' sexual energy. Here it is important to remember that the model of sexual interaction between parents is being introjected by the child as a pattern of relations with himself, or rather, with the physical components of the self. In this case, it is natural that the individual appears to need to live through the disgust to himself or herself, to some part of his or her personality. Such discord as a way of interaction of personality parts is fixed in the psyche in the form of a scenario of a natural change of strong feelings (hatred and affection, in this case), fixing the actual polarized states. However, the conflict is displaced from consciousness as a traumatic experience and is projected onto the outside world in the form of experiencing a somatic symptom, such as a herpetic infection. In this case, the symptom seemingly satisfies the need to live the parental model of disgust to the physical aspects of the person.

Within the immediate relations of such a parent with the child, the issue of sex is naturally treated as a taboo one. Therefore, during the period when the teenager is going through the genital stage of psychosexual development, the models of sexual behavior, which are being mastered by the forming personality, may meet

with acute rejection and aggression from the part of the parent. Thus, teenage masturbation becomes an occasion for extreme aggression and physical violence toward the child. It is important for us that the background of living the parental model of aversion to sexual partnership encourages the experience of sex-related violence to form a traumatic scenario of male-female relations in the child's psyche. At the same time, later on the adult person lives through polarized states that reproduce the dual psychic model of interaction and fix the individual's maladaptability in this or that sphere (periods of lack of sexual partnership, on the one hand, and succeeding periods of promiscuous sexual relations including group sex, on the other hand). We believe that **it is important to consider these periods as polarized states with corresponding response scenarios and to search for ways to unite these polarities in work with the client.**

As a side note, the practice of group sex is known to compensate for the unconscious desire of the inner child to unite all the characters of the family system – mother, father, grandmothers, grandfathers, and etc. – in a positive body contact, which also testifies to the deficit of such contact as a way to relate the client's masculine and feminine introjects.

As the periods change regularly, while the close relations in a couple are not being accepted (when the individuality of the partner allows the person to feel unique) in each of them, attests to the non-adaptability of scenarios, as well as the bipolarity of emotional and affective responses. Thus, the childhood traumatic experience of living through patterns of sexual interaction determines the impossibility for an adult individual to organize his or her own sexual behavior in an appropriate way. The extent to which the scenarios lived out are inappropriate and severe for the individual is proved by the fact that both sexual isolation and promiscuous sexual practices are being lived through in the midst of painful and unbearable experiences; often, the individual sees a way out of them in new attempts to build healthy relationships. However, in fact, the individual cannot break free from reenacting two equally traumatic patterns of behavior, which we have characterized above as polarity states.

**We believe that such maladaptiveness in the sexual area may be successfully corrected by restoring contact between parental introjects.** The main therapeutic task in such cases involves **building a connection in the individual's perception between feelings of affection and sexual feelings for a partner.** Such work requires addressing the traumatic experience of sexual development during adolescence, as well as the correction of the patterns of conflicted sexual behavior adopted from parents.

2. Aversion to sex adopted from one of the parents in the couple acts as an extremely strong destabilizer of the family system, directly affecting its boundary mobility. It generates a strong sense of insecurity in the child. At the same time, the context of insecurity is closely connected to the experience of love, since the family is unconditionally perceived as the source of the latter. Accordingly, clients quite often come inquiring about the inability to withstand violation of psychological boundaries of the personality in contact with the partner. Such violation manifests especially strongly at the bodily level and can be realized in

acute criticism of the partner's height or weight, accompanied by tactile "control" of each other's body condition, which contributes to the development of depressive states in partners. Boundaries can also be violated by forcing the partner to have sex regardless of the his or her psychological and physiological readiness for it. It is remarkable that in these cases, as a rule, after a feeling of insecurity from the violation of boundaries an individual gradually moves on to a feeling of euphoria and boundless love for the partner who has broken his boundaries (similar to the transition from the feeling of insecurity to the feeling of love for the family). In our opinion, such a natural transition between these affective states captures the polarity of the states as a key indicator of the individual's maladaptiveness in a particular sphere of life activity, namely in the construction of male-female relations.

According to our hypothesis, the violation of adaptability, expressed in polarity of emotional responses, may be caused by an intrapersonal conflict of male and female introjects, in particular parental introjects. Consequently, work with the problem of violation of personal boundaries requires the restoration of contact of the client's masculine and feminine introjects. The conflict of introjects formed during childhood quite often leads to interiorization of the emotions of one of the parents, usually negative ones that the former experienced toward the partner. For example, the hatred of the father toward the mother is unconsciously accepted by the child as a part of his or her own identity and subsequently the person may experience feelings of the father toward the mother. At the same time, this kind of transference contributes to the feeling of hatred toward the father as well as toward parents in general as structural components of the family system, which seem to be responsible for the destabilization of the system. Finally, hatred as an introjected model of partner interaction is lived out by the individual in his own intimate relationship, which thus becomes the most vivid sphere of manifestation of polemical reactions, a manifestation of duality as an opposition of "parts of the world" and maladaptiveness to the patterns of making contacts. Consequently, the main goal of work on the principle of uniting the polarities is to reduce the feeling of duality/non-contact/opposition of certain parts of the external world, which in the perception of the client unconsciously become his own conflicting identities, namely introjects of male and female.

3. The refusal to have sexual contact in parental relations in one of the most severe variants is realized further in the refusal of contact with the child who acts, essentially, as a product of parental contact. In such cases, as a rule, the client as a child experiences a whole complex of traumatic events: the conflict between the parents, the extramarital partner, the parent's leaving the family (which manifests most clearly for the child the destabilization of the family system), and the inability of the other to psychologically handle the conditions and give sufficient supportive resources to the child himself or herself. Moreover, both parents, even when having formal contact with the child, unconsciously convey to him or her their rejection as part of the rejected partner. As a result, pain, resentment, and anger from parental contact tend to become the dominant modes of emotional and affective response in the subject's female-male relationship.

In such cases the dual nature of the “polarities” as a discrepancy of parts of the personality is manifested in the fact that, on the one hand, the client is afraid of any relationship with the opposite sex at all, fearing a reenactment of the disruption experience and, consequently, most often does not want to have children. On the other hand, the client has a strong desire for contact with the opposite sex and feels deeply and painfully unvalued because of the absence of such contact.

Disrupted sexual contact between the parents brings the child into imbalance, because in the process of forming his or her personality he or she crucially identifies with the mother, on the one hand, and with the father, on the other hand, unconsciously internalizing their images. Consequently, non-contact between parents becomes the child's intrapersonal conflict. Moreover, psychological tension in this case is approximated by means of the physical components of the self-image; the conflict is literally experienced as a conflict of different bodily parts of the child.

The image of the ovum and the image of the sperm, which in their union are embodied in the whole child, seem to go into conflict, refusing to unite. In this case, if the child sees that the parents refuse to have sex or do not accept each other as sexual partners, it is tantamount to rejection of life, because the parents that did make him/her convey the following message: “Do not live”.

Loyalty to parents triggers a desire for suicidal behavior or other forms of life rejection (illness, apathy, depression, maladaptability as a refusal to act) in the child.

The mother's lack of sexual desire, for example, as a form of opposition to the father, creates in the mother's mind a certain pattern of perception of the son. Contact with the son as an extension of the father is possible in the eyes of the mother only in conflict with his masculinity, with his genitals symbolizing the latter, and therefore with his masculine identity. Subsequently, then, the unconscious loyalty to the mother prevents the person from manifesting this identity, from being integral in his actions in his profession and other spheres (in favor of the observing mother). However, at the same time contact with the father, who fully realizes his own masculine identity, forms the manifestation of masculine identity in the son. This is when the polarity of the realization of the individual is fixed, where a man, on the one hand, shows strength and courage, and, on the other hand, falls into loyalty to his mother and in this state he is weak and he does not realize his masculine identity.

The described polarized states of personality and the related maladaptiveness become less pronounced if the therapist approaches the resolution of the conflict between the parents' introjects from the standpoint of the necessity to unite the polarities. It is fundamentally important to show the individual that besides the conflicting parts of introjects, there are parts that reflect the parents' love to each other, which means that these parts are not opposing, not polarized, but replete with implicit contact. From here the client becomes able to see that he or she is the product of love (and not conflict), so it becomes possible to build a sense of his or her own feminine/masculine value. In the course of the work one of the

polarities – fear and pain of being unvalued – loses its affective charge, which makes the client more ready to get in touch with the opposite sex.

The key feature of all situations described above was (1) interiorization of aversion as a way of contact in the sexual area, (2) psychic response to destabilization of the parental system of forming polarized states, (3) fixation of polarized contact of parts of the personality on different levels, (4) projection of disintegration of personal states onto the events of the external world, namely on the relations with the partner, with one's own body.

**In working with the client's main problem, it is extremely important not to interpret the parental introjects narrowly (as the nearest systemic family figures), but to take them as dual structural supports of the individual's adaptation in the world. In this case, the principle of uniting the polarities allows not only to resolve this or that childhood trauma, but also to correct maladaptive behavioral patterns in various areas of life which in one way or another reproduce violation of contact of the personal parts.**

Thus, the formation of an increasing number of neural connections between the dominant polarized circuits of female and male apperception (the connection of the horizontal poles) is projected onto the entire spectrum of the individual's life activity, increasing his/her efficiency.

Let us emphasize once again that our methodology is based on the idea of the necessity to connect the polarities, which is achieved by making the client unidentified with the emotions of his parents, as well as by restoring value in the relationship between the feminine and masculine introjects. Restoration of balance in the relationship of introjects has a direct effect on restoration of the client's adaptability in life, as a non-dual context for the person's comprehension of his or her practice is being formed. As a result, the client gets back a feeling of safety, stability of his or her own psychological boundaries and male/female value.

The proposed method of work with male and female introjects proves to be efficient given the following. Positive dynamics in development of adaptability is observed in more than 90% of cases. Increased adaptability is expressed, first of all, in the fact that clients become calmer and more confident in practical life activities, feel much better, stop feeling resentment, pain and anger. In more than 98% of cases, polarized responses are balanced, becoming less acute.

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