

**Case Conceptualization:**

**Feminist Psychotherapy Treatment of Gloria After “Three Approaches to Psychotherapy I”  
(1965)**

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## Biographical Information

Gloria Szymanski is a 33-year-old white cis-gender woman. She was born in October 1933 to a Polish family that had recently emigrated to America. She trained and works as a nurse. In 1953 she married Bill Burry, a Korean war veteran, however the marriage did not last and in 1958 she found herself with daughter Pamela (Pammy) moving West to build a new life in California. Her relationship with her daughter has always been good, though it has become strained recently due to her divorce and Pammy's questions about the birds and the bees.

She has recently been in therapy with Everett Shostrom, a Gestalt psychologist that is an acquaintance of Fritz Perls. She was asked by Shostrom to participate in his film *Three Approaches to Psychotherapy I* in 1965, and she has alluded to the fact that her agreement to do so may have been coerced because of her status as his patient. Through this educational film, Gloria had sessions with Client-Centered therapist Carl Rogers, Gestalt therapist Fritz Perls, and Rational-Emotive therapist Albert Ellis. The sessions were each 30 minutes long and filmed all in one day. At the end of the day Gloria reported that in her opinion the session with Fritz Perls was the most beneficial, but she has since recanted that statement, even stating in front of a viewing audience of 100 delegates at the Western Behavioral Sciences institute, in La Jolla, California, "Why did I do all those things that he asked me to do! Why did I let him do that to me!" (Referring to the session with Perls).

The main stressor for Gloria was the divorce from her husband, and her reasons for seeking therapy with Shostrom after her divorce and those expressed in her sessions with Rogers, Perls and Ellis were anxieties over her sexual desires and relations with men, and how this would affect her fourth-grade daughter Pammy. Gloria says that these relationships are primarily kept away from her daughter, with Pammy having limited contact with these men as Gloria does not

want her having experiences with strange men in the house. Gloria also expressed anxiety that she was only seeming to attract men that she did not really like, and worried if she would ever be good enough to attract the men that she really desired: kind, academic, etc.

Gloria works as a nurse, and in her free time loves to spend time with her daughter, though some conversations cause anxiety. She also has been getting back into the dating pool, and has had some relationships, though she is currently single. She is otherwise healthy, though she has a serious dependency on cigarette smoking. Gloria does not think that she has had any traumatic experiences, though her description of the sessions with Rogers, Perls and Ellis would seem to constitute a little 't' trauma. These sessions are the main stressor that brings her into therapy now. Rogers, Perls and Ellis unwittingly did harm to their client through these sessions by means of their gender bias and power position as expert. This little 't' trauma has exacerbated her symptoms of anxiety.

Gloria recalled the session with Perls where he insisted that she was being inauthentic and then proceeded to call her a "phony" and mock her body language. She describes this as embarrassing and causing her to doubt herself and made her think that she was a little crazy. She also recalled the session with Ellis and how he kept insisting that she was devaluing herself and she was the one complicating the issue. She also recalls how in her sessions with these two (albeit not with Rogers), the doctors barely let her get a word in edgewise. She recalls feeling as if she was being lectured and not heard, and her words were not quite being heard and valued.

With men that she has dated, Gloria recalls feeling like she can be herself when the men are not ones that she would deem particularly "eligible" but getting anxious and flip when meeting with men she particularly likes. She expresses fear of being herself as it relates to what these men will think of her. Gloria has come to therapy quite eagerly, as she has been to therapy

before and thinks that it is necessary to work through the issues she feels she has with men and with her relationship with her daughter.

### **Case Conceptualization**

The therapist must first be aware that is first aware that Gloria is a woman and of Polish heritage in a culture infused with the values of European men. The therapist recognizes that Gloria's female sex and Eastern European heritage will likely have a significant impact on who she is and how she operates in the world—and how the world reacts to her. The therapist assumes that Gloria experiences the power disparity in mainstream culture and that the behavior that others label “dysfunctional” is a reaction to these inequities.

The issues that Gloria faces stem from her internalized and external patriarchal realities that serve as a source of distress and a hindrance on growth and personal power. The therapy that she has gotten in the past had been operating in the absence of an analysis of gender and power, practiced in ways that actively or inadvertently upheld problematic status quos and reinforced hierarchies of value inherent in dominant cultures. The cause of her psychological dysfunction resides in her oppression by society. As a woman, she has been expected to adhere to a rigid set of expectations, and both over adherence to and deviation from these behaviors are labeled mental illness. As a female, Gloria has always had her gender affect her life in social, political, economic, and historical ways. The misogyny that exists in all aspects of her life has been emotionally, physically, and spiritually damaging.

Gloria's family life must not be overlooked. As the daughter of Polish immigrants, it is safe to say that there was sex-role socialization pressure from her parents to settle down and start a family early, instead of exploring her career desires and sexuality. Traditional eastern European

values would emphasize Gloria's duty to marry and fulfill her husbands' sexual desire while having none of her own, bear and raise children, and run a household. These values were undoubtedly internalized by Gloria and then became the root of her psychological dysfunction.

The desires that Gloria feels in respect to her sexuality, as well as her independence in the workplace, are in conflict with the internalized patriarchal expectations of her upbringing, and as a result, anxieties are manifested. Gloria has probably been reinforced for exhibiting traditionally "female" behaviors and punished for displaying traditionally "male" behaviors; her sexual desire and motivation to work outside the home are both masculine behaviors of independence.

The therapist is also aware that the difficulties Gloria brings to counseling are a product of factors in her environment, especially the cultural context in which she was raised and now exists. She suffers from society's disempowerment of women, and some of her current behavior is likely a reaction to these very real feelings of helplessness. For example, her low self-confidence when dating men is surely influenced by the societal devaluing of women. Gloria seems to have developed along the relational-cultural theory, previously called the "self-in-relation" theory. Because of her socialization as a girl, she was encouraged to maintain her focus on the feelings of others, and therefore her sense of self-esteem thus became linked to maintaining relationships, whether that be with the men she is dating or her daughter Pammy.

This patriarchal linking of her self-worth to her relationships has caused Gloria to feel anxiety regarding her daughter. She expresses that she is pretty self-confident and knows that she has things to offer and is right in her desires for a sexual life after her divorce, but she is constantly returning back to how Pammy will perceive her, and how her actions will affect Pammy. Gloria expresses that it doesn't matter if she feels justified in her desire to date again, all that matters is what Pammy thinks of her. Though some would say that this is the worry of any

good mother, Gloria would not feel the same way if she was Pammy's father, so this must be addressed. Gloria also is very anxious about how the men that she wishes to date perceive her. This is also likely due to her self-in-relation development.

Her former psychotherapists were all men, and there was a clear power differential that was not addressed in their therapy sessions. Shostrom, Rogers, Perls and Ellis, as leaders of their particular subfields, were all regarded as experts by others in their discipline, saw themselves as such, and so put on an air of superiority when speaking with Gloria. The therapist client relationship was in this way extremely unequal, disempowering Gloria from being able to feel like she had a say in analyzing how she was feeling or coming to her own conclusions about solutions for her perceived issues.

For Gloria, just like most women, the (middle-class-oriented) psychotherapeutic encounter was another instance of an unequal relationship, another opportunity to be rewarded for expressing distress and to be 'helped' by being dominated by an 'expert'. This disempowerment at the hands of men constitutes as little 't' trauma for Gloria and has worsened her anxiety in regard to men as well as her self-confidence. Gloria was made to feel less intelligent, both of her own inner thoughts and feelings, but also in terms of the social intelligence that is required in raising a daughter as a single mother and dating new men.

### **Therapeutic Goals and Methods**

There will be no formal assessment or diagnosis with Gloria. These systems are confining and limiting in their androcentric nature and would probably distort the role of cultural forces in Gloria's current distress. Instead of seeing Gloria as "dysfunctional," the focus in therapy will be on Gloria's strengths rather than the deficits that she feels brought her in. Instead of being seen as

negatives, these feelings and behaviors are understandable efforts to respond adaptively to oppressive occurrences in her life. As an advocate of humanism, the therapist will view Gloria in a positive light, but must be careful to attend to social influences that are significant in Gloria's life.

Therapy will be based on the constant and explicit monitoring of the power balance between therapist and client and will pay attention to the potential abuse and misuse of power within the therapeutic relationship in order to strive toward an egalitarian and non-authoritarian relationship that is based on mutual respect. This finds its basis in that the client is an expert on herself, and the therapist owns her professional knowledge and expertise. The therapist's power is temporary and lies in her knowledge of the change process and her ability to assist Gloria's empowerment. This power differential will be openly discussed and monitored by both the therapist and client at each session. There must also be a continuous monitoring on the part of the therapist of levels of self-awareness and self-disclosure, as well as biases, distortions, and limitations in respect to Gloria's experiences.

In an attempt to demystify the therapeutic process and make it more accessible and egalitarian, Gloria and the therapist will come up with a therapy contract. This contract involves Gloria and the therapist in a collaborative process of determining the goals and pace of the counseling process. The therapist will explain her approach to helping, the costs and benefits of counseling, the roles of client and counselor, and other features of the process that she deems relevant. These points, along with agreed-on goals, will be put in writing, according to Gloria's choice.

Goals of therapy will include the following. The main goal will be to empower Gloria to create a feminist consciousness. The therapist will work collaboratively with Gloria to

understand how she has incorporated societal beliefs and values, and how to challenge and transform those constructs that are destructive to the self, as well as help her create her own perspectives while recognizing, claiming, and embracing her individual and collective power as a woman. The detriment of Gloria's previous therapeutic experiences at the hands of male therapists will be addressed. Throughout the therapeutic process, the underlying goal of uncovering the presence of the patriarchy as a source of distress will remain. As a result of collaboratively rooting out this presence and addressing it, Gloria will become more empowered, and her symptoms of anxiety will go away.

Previous therapy sessions will be discussed, and Gloria will be encouraged to challenge the ways she thinks about herself in relation to the men she wishes to date, and will be encouraged to guide the therapy process, though this may bring up internalized views that the therapist must be an 'expert' leading the sessions and answering questions. Gloria's position as the expert on her life will be emphasized, and the therapist will attempt to help her break away from this misogynistic valuing of her self-knowledge. The therapist will mostly go along with the goals that are expressed by Gloria, such as her desire to be more self-confident in her dating life and sexuality, as well as with her daughter Pamela.

The therapist is very interested in Gloria's anxiety around her sexuality and how it will affect Pammy. She will guide Gloria through an analysis of this gender-role characterization and its potential roots in an exaggeration of traditional sex roles that are reinforced by the dominant culture. The therapist and Gloria will also explore the values of Gloria's parents, who were raised in a very traditional society. How these influences shaped Gloria's view of herself and her behavior is examined in an attempt to depathologize Gloria's behavior and move the locus of the problem to the political realm.



The therapist will also use small amounts of self-disclosure, as deemed appropriate when self-monitoring. This should be beneficial as Gloria has never had a female psychotherapist and this may help to both demystify the process and also allow for a more egalitarian atmosphere.

### **Support, Strengths, and Weaknesses**

The feminist theory of psychotherapy has been criticized for being a political stance rather than a theory of therapy, and some have accused the therapists on imposing their own values onto their clients. The theory is not very testable in terms of a theory of behavior, but it does have a basis in much research on sex roles and gender issues. Certain aspects of the theory, such as assertiveness training, gender-role analysis, and therapist self-disclosure, but these are not unique to feminist theory. Outcome research on feminist theory as a counseling approach is sparse. The basic tenets of the approach, such as sex-role issues and socialization, are empirically supported.

Feminist theory is more so an ideology than a theory, and as such can be applied as a second layer to virtually any other theory. Other techniques and approaches can be used with a feminist lens in order to best serve the client. This theoretical orientation fits with my values as a potential therapist, though I do think that it is more of an ideology than its own theory, and requires another with a more empirically based foundation to guide it and lend techniques to the therapy sessions.

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