

Empty Chair Therapy to Reduce Depression and Anxiety Symptoms in Early Adult Adjustment Disorder

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ABSTRACT

Adjustment disorder is a reaction in the form of excessive emotions or behavior to an event or change in life that causes stress. There are many triggers for adjustment disorders, and each individual has their own vulnerability factors such as the death of someone important in life, loss of a job, and many other factors. In this study, adjustment disorders were caused by many events in the subject's life that came together, including the loss of several family members due to exposure to the Covid-19 virus, requests from the school to transfer children to another school, and getting pressure to complete doctoral education from the campus. Several events experienced by the subject caused stress but the subject was unable to manage the emotions and stress he experienced properly. Based on the results of the assessment using observation, interviews, and psychological tests, it was found that the subject had an adjustment disorder. The intervention chosen in this study was adjusted to the conditions and symptoms experienced by the subject. The intervention given was empty chair therapy. In this intervention method, the subject is facilitated to express emotions that have been suppressed, because so far the subject has not been able to manage his emotions properly. Empty chair therapy also provides a dialogue space for the subject to talk to themselves, express what they feel, express what is their burden in the hope that the subject can find themselves again as before. The results of the intervention carried out stated that the results were very significant and had a good impact, the subject expressed that he felt more relieved and could get out of the introjection process

Keywords: *empty chair therapy, adjustment disorder, adults*

INTRODUCTION

Adjustment disorder is a short-term maladaptive reaction to a stressor. Adjustment disorder can be identified, and symptoms usually appear within three months of the onset of the stressor. This disorder is a pathological response to what laypeople call disadvantage, or what psychiatrists call psychosocial stressors (Kaplan, H.I., & Sadock, 1991).

Adjustment disorders are always preceded by one or more stressors. The strength of the stressor is not always proportional to the strength of the resulting disorder. The level of stressor is influenced by many complex factors, such as the degree of stressor, quantity, duration, environment and personal context that receives the stressor. For example, the reaction of a 12-year-old and a 45-year-old child is certainly very different to the death of a parent. Many other factors also affect the condition of a person with adjustment disorders, namely personality factors, group norms, and local culture also greatly influence how a person responds to a stressor (Sadock, 2007).

A person can be said to have an adjustment disorder if in his life he has experienced a traumatic and stressful event. This pressure eventually makes a person experience stress and causes the person to have difficulty in living his life again, this is what is called an adjustment disorder (Kandou, 2017).

Stressors experienced by a person with adjustment disorder can be caused by single/single or multiple/many, single for example, losing a loved one, while multiple for example in addition to losing a loved one, being laid off from work, and suffering from an illness. In addition, stressors can also be something that is repeated, for example business difficulties in difficult times, and can be something that is continuous, for example poverty and suffering from chronic illness. (Kaplan, H.I., & Sadock, 1991)

The adjustment disorder experienced by the subject is in line with what has been explained by Sadock (2007), where the subject experiences a stressful situation. The Gestalt view believes that individuals have the ability to take personal responsibility and live fully as an integrated person, but

due to certain problems in their development, individuals form various ways of avoiding problems and therefore reach a dead end in their personal growth.

The way to avoid these problems makes individuals form defense mechanisms (modes of defense), one of which is denial (Corey, 2013). In line with the above explanation, in this case the subject also experienced growth obstacles (disabilities in work and daily routine activities) due to denying the emotions he felt because he felt guilty if he admitted the existence of these emotions.

The feeling of guilt makes the subject have unfinished business which includes unexpressed feelings such as resentment, anger, hatred, hurt, anxiety, status, guilt, feeling neglected and so on. Although it cannot be expressed, these feelings are associated with certain memories and fantasies. Because they are not expressed consciously, these feelings remain and are carried until now in ways that hinder effective relationships between themselves and others.

The subject is the second of three siblings and is married and has two sons. The subject was born into a well-off family or can be said to be in the upper middle class category. The subject's father works as an employee at a BUMN while the subject's mother works as an entrepreneur and has several employees. Since childhood, the subject has never lacked and always received facilities from both parents.

Since childhood, the relationship between the subject and his parents tends to be harmonious. The subject is also friendly and often spends time together such as watching television in the family room, exercising together and going on vacation together. The subject had rebelled against his parents when he graduated from high school because the subject had his own desires and principles not to continue college and pursue work in the design field, but for the sake of the subject's good, his father and mother asked him to continue college.

The subject's father actually tends to have a perfectionist side so that he has standards in his children's education. The perfectionist side is likely obtained by the subject's father from his job which requires precision, sincerity and a fairly high social class. The existence of this side made the father urge the subject to continue college for his future. The subject who initially rebelled finally obeyed his father's orders and was willing to continue his studies on condition that he be in Yogyakarta. In addition to having a perfectionist side, his father also tended to emphasize moral values in the subject so that he could become a dutiful child and be a role model for his children and his small family. The perfectionist side in his father was apparently modeled by the subject. According to the mother's statement, since he was a teenager, the subject had always done his assignments according to the rules and was serious and often repeated them so it was not surprising that the subject often won the class championship. The subject himself also stated in his interview that when working, the subject had his own standards and carried them until now. The moral values instilled by his father were also internalized in the subject so that the subject felt afraid and guilty if he did not become a dutiful child and could not be an example for his children.

The subject experienced several stressful events including knowing that his child was in conflict with a friend at school so that the subject was asked to move his child to another school. In addition, the subject again experienced a stressful event, namely that all of his family were exposed to the Covid-19 virus which caused his father and uncle to die. At the same time, the subject also received great pressure from the campus to immediately complete his dissertation, doctoral education so that the subject experienced psychological imbalance in facing various events that were full of pressure.

METHODS

This study used several forms of assessment in psychology, namely interviews, observations, and psychological test tools. The assessment process begins with an interview. The interviews used were interviews with the subject directly or autoanamnesis and interviews with the subject's family or called alloanamnesis. Interviews were conducted several times in order to obtain detailed information related to the disorders experienced by the subject.

The assessment process is continued by conducting observations. Observations are conducted by looking at several different settings in order to obtain varied and more in-depth observation results. In addition to interviews and observations, psychological tests are also given to see and prove the alleged disorders experienced by the subject whether they are in accordance with

the symptoms or symptoms of adjustment disorders. The provision of psychological test tools includes DASS and Graphics.

RESULTS AND DISCUSSION

RESULTS

Based on the results of the assessment using observation, interviews with the subject and the subject's family, and the provision of psychological test tools in the form of DASS (Depression Anxiety Stress Scale) and Graphic tests (BAUM, DAP, HTP) the results stated that physically the subject had a normal physical condition and there were no abnormalities. The subject also looked younger than his age. In addition, the subject had no history of physical or psychological illness.

Cognitively, the subject has good intelligence abilities as indicated by the subject's achievements since elementary school and being able to continue his studies to the doctoral level at one of the leading universities in Indonesia. In addition, the subject was also accepted as a lecturer at a private university and was able to follow instructions given well. This proves the subject's ability in the cognitive aspect. The many achievements that the subject has achieved so far are due to the existence of strong motivation and ambition, ideas, concepts, imagination that are quite high and a rational way of thinking. The ambition and drive that exist make the subject have a tendency to be a perfectionist in doing tasks. The subject always follows the rules and has his own standards so that sometimes the subject does not allow others to help him because he feels that other people are "less capable". However, in the last few months the subject has tended to hesitate and feel that he is less capable and has lost interest in doing something so that it is difficult to optimize the existing abilities.

Emotionally, the subject has tension, this tension is possible due to emotional pressure, which ultimately has the potential to cause indications of anxiety in the subject. From the results of the test given, it is known that the subject's anxiety is in a very severe category which is manifested in physical responses in the form of difficulty breathing, often experiencing anxious conditions, feelings of restlessness and fear, trembling, heart palpitations, and worry. In addition to experiencing anxiety, the subject also has indications of depression in the severe category which are manifested in several symptoms, namely feelings of sadness and depression, feeling loss of interest, loss of enthusiasm and getting tired easily. The indications of anxiety and depression in the subject were caused by stressful events due to the Covid-19 pandemic, conflicts with children's schools and the many tasks and jobs that the subject has experienced over the past few months which have caused the subject to experience disabilities in work and choose to quit.

Socially, the subject has a personality that tends to be extrovert, easy to get along with and has good self-adjustment so that since adolescence the subject has had many friends and is active in various organizations and communities. The family relationship between the subject, father, mother and wife and their second child also tends to be harmonious. However, the subject avoids having two-way communication with the subject's first child because he feels guilty and uncomfortable. Based on the results of the assessment that has been carried out, the subject is diagnosed with Adjustment Disorder (F43.2). After completing the assessment process and establishing the diagnosis, the next step is the intervention process, the intervention process chosen is using the empty chair therapy technique. The results of the intervention using the empty chair therapy technique are quite significant, the subject said that the therapy was able to help the subject orientate himself to the situation so that the subject can fully realize the problems faced, in addition, the use of empty chair therapy can help the subject express emotions that the subject has not been able to express so far, and this therapy can also help the subject feel deeper and accept his experiences and be able to complete the subject's unfinished business towards himself.

DISCUSSION

The subject has a relatively good cognitive ability. At the age of 39, the subject continued his studies to the doctoral level and got several jobs, namely as a lecturer and MCCC team. The many achievements that the subject has achieved so far are due to the encouragement and ambition, ideas, concepts, imagination and rational ways of thinking, but the subject has been under a lot of emotional stress for the past few months due to stressful events that cannot be overcome which then make the

subject unable to function as before and experience significant changes. However, the subject often denies these negative emotions because they do not match his values.

There are several changes that appear in the subject, namely depressive affect, loss of interest, fatigue, decreased concentration levels, anxiety, motor tension, autonomic overactivity and disability in work and daily routine activities. Based on the assessment that has been carried out, the problems experienced by the subject at this time are problems related to adjustment disorders (f43.2). The results obtained are in accordance with the diagnostic criteria for adjustment disorders in PPDGJ III (American Psychiatric Association, 2000).

Adjustment disorder is commonly referred to as a psychosocial disorder, where the sufferer experiences obstacles in carrying out their roles as usual. This disorder is not a worse condition than an existing psychiatric disorder. (Kaplan, H.I., & Sadock, 1991).

Based on the definition expressed, adjustment disorders are always preceded by one or more types of stressors. The level of stress experienced is sometimes not always comparable to the level of the resulting disturbance. The level of stress is influenced by many complex factors, such as the degree of stressor, quantity, duration, environment and personal context that receives the stressor. Personality factors, group norms, and local culture also greatly influence how a person responds to a stressor (Sadock, 2007). The adjustment disorder experienced by the subject is in line with what has been explained by (Sadock, (2007) where the subject experiences a stressful situation starting from having to move the child from the previous school due to conflict with peers, losing a father as a loved one and multiple stressor events, namely the many burdens of tasks and work received until finally the subject finds it difficult to adapt and experiences adjustment disorders because the events that trigger stress occur sequentially.

The subject is unable to adapt and adjust to his/her condition so that the problems that arise are often not resolved but rather kept to himself/herself, then without the subject realizing it, the problem causes the individual to form a defense mechanism (mode of defense), one of which is Denial (Corey, 2013).

In line with the above explanation, in this case the subject also experienced growth obstacles (disabilities in work and daily routine activities) because he denied the emotions he felt because he felt guilty if he acknowledged the existence of these emotions and made them an (unfinished business).

There is an intervention with an effective gestalt approach to overcome unfinished business in the subject, namely the Empty chair. The Empty chair technique is a way to invite individuals to externalize their introjections. In this technique, two chairs are placed in the middle of the room. The counselor asks the client to sit in one chair by playing the role of the top dog. Then move to another chair and become the underdog. Dialogue can be carried out between the two sides of the client. Basically, the empty chair technique is a game technique in which all roles are played by the client (Corey, 2013).

Looking at the various applications of the empty chair technique in the counseling process, it can be seen that this technique in its application can help clients overcome unfinished business and also the client's grief. Clients can express their grief and also unresolved feelings with people who cannot be met directly through this empty chair technique (Suryaman & Karneli, 2020). The use of a combination of empty chair and reframing techniques can be used effectively to help clients resolve unfinished problems, release their sadness, and also choose positive thoughts and behaviors regarding the problem conditions they are facing, namely unfinished business and grief (Suryaman & Karneli, 2020).

This technique is used because it is very suitable for the subject's problem, namely by presenting guilt towards the father and son with acceptance and integration between the two roles. Through the empty chair, the subject can end conflicts by resolving unfinished business that comes from the subject's past.

Furthermore, research was conducted Suryaman & Karneli in 2020 with the title "Case study: empty chair technique counseling and reframing in overcoming grief and unfinished business problems" has proven effective in overcoming grief and unfinished business problems in its subjects. More specifically, research conducted by (Paramita, 2020) with the title "gestalt counseling to resolve stress symptoms" has been proven to make the subject successfully express emotions and

feelings that have been suppressed for so long to the source of stress that has been avoided. The subject can express what is on the person's mind. This method makes the subject understand the position and point of view of the person who is in conflict with the subject (Paramita, 2020).

CONCLUSION

The entire series of assessment processes to interventions helped the subject overcome the clinical disorders he experienced. Previously, the subject was diagnosed with an adjustment disorder in which there were symptoms resembling depression and anxiety, but because of the subject's willingness to process, the disorder has now decreased and the subject has experienced many positive developments. The positive changes obtained from this intervention process are supported by the subject's strong desire and commitment to change his condition for the better. The subject is also willing to follow the entire process to completion and is proactive and always follows instructions well, besides adequate cognitive abilities make it easy for the subject to imagine when having a dialogue with the desired role assisted by the photos on his cellphone. The subject fluently expressed his feelings and was carried away in the dialogue until he sobbed.

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