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REFUSING THERAPY

What causes people to refuse to enter psychotherapy even when they clearly need it? What could teachers, family or friends do to help a suffering person accept the idea of going to therapy?

It is usually assumed that it is the fear of stigma that prevents people (especially from the *frum* community) from agreeing to therapy. While stigma undoubtedly plays a significant role, there are also other, deeper, subconscious factors.

Attitudes from childhood

Parents who are excessively critical toward their children tend not to recognize or accept the environmental or developmental reasons for their children's difficulties. They deny or minimize the common impediments to appropriate functioning, e.g. being human, the normal immaturity of childhood, etc. They tend to attribute their children's difficulties to malicious intent, laziness, bad *middos* and the like. They certainly deny or minimize their own contribution to their children's difficulties.

This has been confirmed by studies that found that mothers of aggressive boys were more likely to judge normal reactions of children as "noncompliance," and even more significantly, attribute defiant **intent** for this "non-compliance" (Strassberg, 1997; Lorber & O'Leary, 2005).

As a result these children grow up attributing their difficulties to being "bad" or being defective.

If they are bad then the obvious solution is to simply try harder to be good. What's the point of therapy? If they believe they are defective, then we can certainly understand why they would not want to expose their defect to others. As a result of being criticized and misunderstood, these children grow up with very fragile egos, and therefore, they, more than the average child, would be hypersensitive to the judgment of others. In addition, since the most important people in their lives, i.e., their parents were so critical they will assume that everyone else is also. The unfortunate paradox is that those who need help the most are the very ones who can least tolerate being helped.

Another impediment to accepting the need for therapy among those who see themselves as defective is that they can't believe that therapy could possibly magically transform an inherently defective person into a normal one.

How can you help?

So what can one do to convince a friend or relative who has these feelings to agree to therapy? The first step is to not join all those who have been critical of such people in the past, by criticizing their refusal to go to therapy. Instead one needs to be sympathetic to their hesitancy and ambivalence regarding this endeavor. After one demonstrates this empathy and understanding, one can then sadly communicate to their suffering friend or relative the unfortunate reality, that due to no fault of their own, their only hope for a happy life probably requires professional intervention. This is similar to convincing someone who is afraid of dentists to have their infected tooth looked at. One can be very sympathetic to the fear while stating that unfortunately, there is no viable alternative to facing the fear.

Another layer of fear is often expressed by those who develop a deeper understanding of their feelings. As long as they avoid going to therapy, they can maintain the "back up" belief that if they would go it may help. If they do go and it doesn't help, however, then there is no hope left!

It is important to paint the picture of how much happier their life would be if they would take this courageous step. People with these life experiences usually find it incomprehensible to believe that they deserve a happy life or that it is at all possible for them to achieve it and, therefore, they see no reason to subject themselves to this painful and, what is for them, a humiliating process. Therefore, one needs to convince them their predicament is not their fault, they do deserve to be happy like everyone else and that with hard work they certainly could achieve this happiness.

References

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- Strassberg, Z. (1997). Levels of analysis in cognitive bases of maternal disciplinary dysfunction. *Journal of Abnormal Child Psychology, 25*, 209-215,