## Reflections from the existential analysis perspective, in times of pandemic.

"The self cannot be grasped or thought of if not related to the world" Heidegger (1997).

The year 2021 began a bit unusual, as we came from a year where a global health crisis developed, generated by SARS COVID 19. In this way, we had to face new experiences in our existence, and this has allowed us to contact and get closer to the deepest and most important thing we have: life.

People may react differently when they hear or read about COVID 19. There are many thoughts, images, feelings, emotions, and beliefs which may arrive.

We will likely remember a close experience such as the loss of work, the loss of health, of hope, or perhaps the death of a family member due to this virus. We may have even experienced this disease ourselves.

This is a topic that has been heard and seen daily. COVID 19 is a tag that has been normalized in our lives, it has been a common topic in long talks with our family, friends, couples, at work, at school, and in counseling; in short, it is immersed in the world and our relationships.

Accompanying other people in the therapeutic space, I have realized that there are times when clients feel tired, annoyed, desperate and unable to escape due to the current situation of the pandemic, presenting emotional moments of uncertainty, anguish, and anxiety, resulting in physical, cognitive and spiritual effects; psychodynamic reactions have often been presented through panic attacks and anxiety.

The main origin seems to be uncertainty when questioning, when is this going to end?, when will I resume my normal life?, when will I be able to see my family and hug them?, when can we leave home feeling secure? These questions, remaining unanswered, may generate insecurity, anger, frustration, and loss of hope.

Clients are constantly concerned about their health or the health of their close relatives, and they also have concerns about their economy. That is, if their income allows them to isolate themselves at home, or they must go out to work, which causes them fear. And if the experience of having tested positive for the virus is added to that, the following questions constantly arise: Will I be able to survive the virus? Will my body be strong? Will I get it again? What if I die?

These questions are only a brief approach to the different experiences that could diminish the possibility of a full existence. The issue of uncertainty in the future is common and with it, the increase in insecurity leads to anxiety and anguish.

All of the above invites us to look at and reflect-from Existential Analysis on the impact generated on the existence of people, and the great challenge we as existential analysts have in understanding the pain that many people are currently experiencing, from the approach of the fundamental question of existence, can I be? can I be in this world? can I be with these current conditions?.

Based on this reflection and what I have recently been hearing in the therapeutic space, some clients feel that it is difficult to exist in this world. Their existence has been and is being constantly threatened. The basic conditions for "being able to be in the world" are impacted and in some cases

have been destroyed. They do not have the strength to endure, they cannot see and accept reality because it is painful and oppressive, how can they be in the face of anguish?

Anguish confronts the being, and the feeling of being threatened arises, at risk, the person experiences a lack of support, and the feeling of not being able to be in this world appears. Due to the pandemic, the anguish of the possibility of death arises. From the perspective of Existential Analysis, it can be observed that people are being impacted mainly in the first Fundamental Motivation and in the basic conditions that are required to be able to be in the world: protection, space, and support. (Längle, 2009).

Protection is being affected because the person perceives an insecure exterior, and the way of relating to each other has changed, making it difficult to approach loved ones, or even hug them. Now we must say our greetings from a distance and hide the expressions of affection behind masks, prioritizing virtual encounters in contexts such as education, work, and social gatherings.

How can we accept these conditions and how can we feel accepted in the midst of them?

Some people do not have a physical space suitable for living, they do not have the freedom to move, or they do not feel it is their own, sometimes they have to share with more people and they cannot inhabit that space. How to study or work if they do not have a space to do so?

The psychic space is also extremely important since it allows the person to dialogue with themselves and have the experience that they have a space to be able to give themselves time and recover when necessary.

The body is the first space that feels like our own, but what if my body is not well? if it is sick or tired? if instead of helping the person it makes it difficult for them. Then the idea may appear that by not feeling enough strength, and not experiencing physical well-being, we can opt for resignation, depriving our bodies of physical care and attention.

Finally, we have the condition of the body as a support, and when it is not well, when it has been attacked or sick, the first thing that arises is insecurity, fear that it may fail so we become paralyzed. When there is support, we experience the confidence that there is something else that sustains us, and this gives us firmness and strength. But, what *happens when the person has nothing to hold on to?* 

Some people in consultation have shared that from the pandemic they focus more on work, extending working hours and dedicating even more time to it than previously required. Others choose to spend time on social media, and use digital entertainment platforms with the intention of not thinking about what is happening in the external and internal world, and ignoring the feeling and thought of not being able, the lack of protection, and the latent danger. (Längle, 2009).

As a psychologist and existential analyst, I have found answers from the phenomenological perspective, which has allowed me to approach the clients and try to understand them, accompany them in their existence so that they can respond, and find what gives them security and calm, accepting, in turn, the moments of anguish that the current pandemic brings, which brings us closer to life and existence.

What is currently being experienced makes it difficult for some people, the ability to respond to life. In these cases it is necessary to develop ways to face it, endure it, see our fears and approach them,

embracing insecurity, and turn it into a firm floor that allows walking, approaching and accepting uncertainty, and working with the resources that each person has for it.

With clients I have addressed the importance of giving courage to their own lives, learning to live it as it is, with its conditions, accepting anxiety, because through that same anxiety we remember people who are still alive.

The therapeutic work in these cases consists in addressing the fundamental conditions of the 1FM (protection, space, and support) so that they can be in this current world.

First, we identify what gives them *protection*, that they question themselves on what gives them security, maintaining an active listening of what their body needs and how they can strengthen it. In the same way, the possibility of going to people who are important to them, maintaining ties, and contacting with the value of those relationships, even in virtuality, is recommended.

Secondly, regarding *space*, it is important to find a space where they can be, with all the conditions they need, that they can feel that there is a place where they can be calm, so they can pause and answer what that place is and if it does not exist, the invitation is to create it, so they have the certainty that they can move through it. Promoting conscious and deep breathing, and the questions: how am I? What do I need?

Third, it is important to identify what or who gives them *support* in their lives, whether it is religion or beliefs, relationships, trust in the care they have, or faith in the future, that at some point this pandemic is going to end. The possibility of trusting what is already at hand.

I am currently attending to a 22-year-old student, who is in her third year of medical school. She comes to the consultation in February of this year, with a diagnosis of depression, diagnosed by the Institute of Psychiatry.

Currently, she presents anxiety, tachycardia, sweating, and shortness of breath, the desire to carry out her school activities and tasks has decreased considerably, which led her to temporarily withdraw from her studies.

Based on the sanitary measures implemented in Mexico regarding COVID 19, the symptoms of anxiety and depression have been exacerbated, and she has expressed her desire not to continue living, which she has expressed during the sessions.

The current conditions of confinement have not allowed her to continue with her daily routine, such as going to the Faculty, going out to exercise, meeting with friends, and attending face-to-face classes.

It is important to mention that for the moment the face-to-face sessions were interrupted, since her father was infected with COVID 19, making it impossible for her to leave the house, mentioning that she cannot take the sessions online because she does not have a private space.

With the information obtained during the sessions, a work proposal has been developed to carry out the treatment plan.

In the first instance, we work with the 1FM, since it is necessary to strengthen the fundamental conditions of this motivation, addressing it from the Therapy of Anxiety.

The main objective is to address insecurity, identifying what provides her support, and what provides her confidence today, thus orienting her to reality and concrete things. We reflected on what really is the problematic area, identifying where the lack of trust is, and recognizing which relationships give her confidence and which give her insecurity. At the same time, observing what times in her life she has felt safe, and when there are irrational beliefs at play, is especially enlightening.

Subsequently, the purpose is that she identifies the places where she feels protected, and recognizes those physical spaces that are on the outside and inside that provide protection, and if she does not have them, seeing the possibility of creating them. It is necessary to identify spaces that allow her to be and provide her with security, to which she can resort when she needs it, to strengthen relations with herself and her support networks.

On the other hand, the grieving that she has experienced as a result of the current situation due to COVID 19 was addressed, the main losses identified are the loss of freedom, a rupture of her project of life, and loss of values.

The method that has been used in these first meetings is the Personal Existential Analysis (PEA) proposed by Alfried Längle. The main goal will be to take a personal, authentic and responsible position, with their own resources, which is possible through 4 steps (Längle, 1990).

The first point (PEA0): is the description and information of the facts, it is the first contact, the basic question can be: What information exists? What does it say? And how does it say it?

PEA1 Impression: identifying the primary emotion, what feelings are produced?, knowing the impacts will generate self-acceptance (SA).

PEA2 Internal positioning: a concrete understanding of self, integrated emotionality, self-distancing (SD).

PEA3 Expression: getting answers, driving the person's will to express themselves, self-transcendence.

According to the information gathered during the first sessions, we have worked with the PEA0 and the PEA1, where we have been able to express our primary emotionality, which is anger at her present and melancholy towards a future since she expresses that she does not know what is going to happen with her and her life.

Therefore, it is necessary to continue performing the PEA method, to achieve an approach to her losses and pains, subsequently achieving the PEA2 and PEA3.

With this brief description is how the reflections developed in the therapeutic space end, recognizing what challenges me as a therapist and as a person, recognizing that to exist in this current world we need enough strength and courage to say yes to life.

## References

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Nombre: Eliza Giselle Villena Medina.

Profesión: psicóloga clínica.

Formación en Análisis Existencial y Logoterapia.

Mail: evillenamedina@gmail.com

País: México