

# Self-Reliance Therapy: Reflections and a New Model

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## Abstract

**Background:** Using the learnings and reflections from their professional and personal journeys, the authors believe that every “Neurosis-oriented” mental health concern has four root causes: self-love (a lack of it), fear, grief, and aim (a lack of it). Using this as the premise, the authors have developed a new therapeutic modality that incorporates 12 primary universal formulas that they have conceptualized.

**Methods:** This novel therapeutic model was implemented on 5 pilot batches, and was delivered to a total of 50 clients. The clients were from the upper-middle class section of Indian society, and their ages ranged from 21 to 58.

**Outcomes:** Every participant had their own unique breakthrough moments over the three days of the implementation process. Further qualitative and quantitative research is needed before this new modality can be claimed as beneficial.

**Interpretation:** This modality can be used in both group as well as individual settings, and even implemented in a group, the structure of this modality enables each participant to have a personalized experience.

**Keywords:** Therapy, Mental health, Holistic wellness, Personal development, Innovation

## Introduction

### Self-compassion

Self-love can be understood as a learnable attitude of self-kindness entailing self-contact, self-acceptance, and self-care [1]. An important aspect of self-love, self-compassion is being touched by and open to one’s own suffering, not avoiding or disconnecting from it, generating the desire to alleviate one’s suffering and to heal oneself with kindness. Self-compassion also involves offering a non-judgmental understanding of one’s pain, inadequacies, and failures, so that one’s experience is seen as part of the larger human experience [2-4].

Selfish persons are incapable of loving others and of, loving themselves [5].

In fact, understanding grief and past trauma, and working on them, is essential for practicing self-love [6,7].

### Self-compassion and psychopathology

Personality disorders like Borderline Personality Disorder are seen to be associated with one or more unhealthy aspects of self-concept like self-neglect, self-attack, self-hatred, self-blame, and absence of self-control [8].

The language parents use with their children, especially in instances involving failure and disappointments later come to form the child’s inner voice or their self-talk. Negative and critical self-talk can in turn lead to mental health concerns like borderline personality disorder. It is also observed that apart from stress, unfulfilling relationships, and a sense of unworthiness, inferiority, and guilt, self-criticism and a lack of self-love also have a direct correlation to mental health concerns like mood disorders, anxiety disorders, eating disorders, and social phobia [7].

Likewise, on the flip side, it has been observed that the greater

the level of self-compassion, the lesser the psychopathology [9,10].

### **Self-compassion in psychotherapy**

Self-compassion as a psychotherapeutic approach has been found to heighten people's physical and mental well-being with an emphasis on an unconditional acceptance of oneself as they are. Hence, incorporating self-compassion into the process of psychotherapy helps reduce feelings of fear, guilt, shame, and unworthiness, in processing grief, and it helps clients identify & utilize their internal resources, and then maintain their motivation in the journey of healing & self-empowerment [7,11-14].

The experience of the client is further enhanced when the therapist themselves practice self-compassion [11].

On the flip side, self-invalidation is a deterrent in the psychotherapeutic journey and it is imperative to address it during therapy to make substantial progress [15].

Likewise, internalized shame can cause impediment in a person's ability to process emotions and creates a sense of failure, whereby impeding the therapeutic process [16].

### **Therapeutic implications of social support**

Individual placement and support (IPS) has been established a powerful factor that has a positive impact on one's mental health [17]. Thus, it can be inferred that having a supportive environment is conducive for optimum mental wellbeing.

### **Authors' observations**

Over the combined experience of 24 years as mental health professionals, and having had more than 22,000 hours of individual client time between them, Bhuvan and Nath believe that the traditional modalities of therapy and counselling either make one dependent on therapy, act as a quick-fix solution that does not address the real concern(s), does not focus on the "how" to equip the client to replicate their successes (of overcoming hurdles in life) in the face of future adversities, or oversimplifies the human mind to certain concepts. Thus, there is a need to develop a new approach to ensure that a client doesn't have to go through these challenges in the first place and/or equip them with preventive tools so that these problems do not evolve into psychiatric and irreversible conditions.

Another observation they have made is that the majority of Western psychotherapeutic schools of thought developed based on studying individuals with mental health concerns rather than individuals who have transcendental mental health states, or in other words, these existing interventions are more curative than preventive.

Finally, they have also observed among their clients that virtually every psycho-socio-emotional problem faced by people can be traced to a few common roots, which when addressed can lead to an individual becoming self-reliant, or an individual who can make conscious decisions in every aspect of their life (including the decision to visit a therapist).

This paper introduces a new and dynamic approach to therapy that the authors have developed to address the challenges they have observed. The primary goals of this modality are to make the client more self-reliant, resilient towards adversities of life, and compassionate towards their own self. The current section highlights the significance of self-compassion and the subsequent sections throw light on the nature and flow of this new therapy modality.

## **Methodology: A New Modality**

### **Self-reliance therapy (SRT)**

The authors theorize that even though every individual is unique and has a unique combination and permutation of experiences, the challenges that they might be facing at any moment in their life can be boiled down to four root causes, namely lack of Self-love, Fear, Grief, and a lack of a clear Aim (SFGA). To addressing these root causes, the authors have formulated an algorithm that can be applied to address the mental health needs of the person. Self-reliance therapy or SRT provides 12 primary formulas that one can use anytime things go wrong in life. Each of the primary formulae also involves secondary formulas to make their application simpler. The authors have simplified complicated tasks into easily implementable steps which are based on the spiral curriculum technique and are progressive as well as cyclic in nature.

SRT is intended to help the client gain clarity of anything they are going through, by understanding the roots of every circumstance and using this clarity along with simple, universal formulas to overcome any obstacle they might face in the journey of life. Thus, more than a therapy modality, it is a blueprint for a fulfilling and purposeful life.

These formulas have been curated into a 24-hour curriculum that is designed for both group as well as individual settings. Even when being applied to a group, every client experiences a personal journey throughout the process for SRT does not require the clients to share any personal details with the therapist, but rather, the therapist plays the role of a facilitator who enables the clients to apply universal formulas to either overcome hurdles in any aspect of their life (personal, interpersonal, or professional) or improve their overall quality of life.

### **Tenets of SRT**

Following are the tenets on which this new modality is based:

**Self-control.** We might not always have control over what is happening outside of us, but we have full control over what happens within ourselves.

**Anti-diagnosis.** Regardless of the diagnosis one might have according to the DSM or ICD, every neurosis-oriented psychosocial concern can be addressed in a unified manner.

**Universality.** Every individual is unique and has a unique combination and permutation of experiences, yet certain formulas can be applied to address the mental health needs of the person.

**Questioning.** Redefining the existing concepts that guide our life and questioning pathological social rules.

**Systemic structure.** Help the client develop a system for themselves that they can apply in their lives.

**Self-work.** Only when one has worked on themselves and has become self-reliant can one truly think of changing the world around them.

**C4 of SRT.** Unlike traditional psychotherapeutic modalities, SRT incorporates a four-pronged approach of counselling, coaching, capacity building, and community.

**Covers four major components.** a) The self, b) Skillset, c) Mindset, d) Support system

#### Requirements for using SRT

For a client to reap the benefits of SRT, they need to follow two prerequisites:

**Put in the effort.** If one is not willing to help themselves, they will not be able to see the changes.

**Be true to yourself.** If they are not honest with themselves, they will not be able to see the true benefits of this technique.

#### Disclaimer before using SRT

When used for the first time, the formulas discussed in the following sections are not to be applied without the supervision of an SRT practitioner. When applied for the first time, it is natural to experience a sense of overwhelm when processing these emotions and an SRT practitioner is equipped to help one navigate through the formula(s) appropriately.

#### Defining self-reliance

Self-reliance is not living in isolation and not seeking any help, rather it is the ability to deal with life's problems independently and if needed, proactively seek help from whom you want, and the way you want it, instead of help being forced and being made dependent on the helper.

#### Advantages of being self-reliant

- Helps us to make choices that are truly our own, rather than ones that we borrow from others based on their expectations.
- Helps us to create the life we desire and deserve.
- Only when one is self-reliant, can one truly think of changing the world around them.
- Even though the healing journey might take a lifetime, with the right skill set and mindset, one can be self-reliant and face the hurdles by themselves.

#### Mental health through the lens of SRT

As a therapeutic lens, SRT views mental health as having its roots in a lack of self-love, fear, grief, and/or the lack of a clear aim in life, and is a product of interaction between a stimulus loop (SFGA) and a response loop (PVPR, or Premise, Vision, Purpose, Strategy). Bhuvan and Nath have realized through experience that understanding the mind and body can help take care of most mental-health-related problems.

#### The Therapeutic Journey

The therapeutic model applies a 3-phase approach covering three segments of an individual's life; the inner world, the external world, and the social world.

##### Inner world

The first phase addresses the inner world of the client and enables them to take care of the baggage they have been carrying throughout their life and understand where their current problems are rooted. It covers the following aspects:

**Perspectives.** The client is encouraged to reflect upon their existing perspectives and is provided with a fresh set of lenses that they can apply in their lives. The client is also made aware of how one can strive for the ideal, by being ready for the not-so-ideal scenarios in the journey.

**Psychoeducation.** The client is made aware of the various ways in which the mind can be deceptive regarding certain thoughts and emotions, various unhealthy ways of processing emotions that people often adopt, and of various mental health concerns.

**Integrity/authenticity.** The client is encouraged to practice integrity and make efforts to be as authentic as possible for themselves. To enable them to be authentic, the therapist and the client explore the concept of honesty and how they can incorporate the nuances of this concept in their life.

**The four driving forces (SFGA).** Our lives can be seen as

having four pillars; self-love, fear, grief, and aim. The absence or presence of these four pillars determine every aspect of our life and are the root of all our thoughts, beliefs, emotions, and behaviours.

Each of the four can be broken down into the following formulas:

**Self-love:** I AM

**Fear:** I AM FEAR

**Grief:** MISSING

**Aim:** AIMED

Whenever we face any problem, the root is in one or more of these four pillars, and these pillars can be looked upon as a cyclic loop that can be repeated till we come out of the problem we might be facing.

These pillars of SFGA are in a particular order for when we can love ourselves truly, we gain the ability to face our greatest fears. Then once we can overcome our fears, it becomes easier to process our grief since every grief has an element of fear (for example, "What will I do without them?"). Finally, once we have processed our grief, we can truly work towards developing an aim for the kind of life we want to live. Sometimes a client can also set an aim for themselves without working on the previous aspects of self-love, fear, and grief, but it is observed that in such scenarios one often either gets overwhelmed or feels lost and confused. Thus, it is an essential prerequisite that the therapist does not skip or make haste with any of the steps.

**Note.** These formulas are not to be applied without the supervision of an SRT practitioner for when applied for the first time, it is natural to experience a sense of overwhelm when processing these emotions, and an SRT practitioner is equipped to help one navigate through the formula appropriately.

**Self-love.** Almost every mental-health-related problem can be seen to have its roots in an absence of self-love because when we do not love ourselves enough we ignore our own needs and desires, and these unmet needs cause emotional pain. This emotional pain can translate into various problematic thoughts and behaviours, which ultimately create a loop of misery.

The client is made aware of the concept of self-love (what it is and what it is not), and to enable them to apply self-love, the following formula of I AM is provided to them:

- *Identify* (various aspects of themselves)
- *Acknowledge/Accept* every aspect of their own being and accept them without any bias or prejudice.

- *Modify* aspects that they recognize as unhealthy and/or causing them unnecessary distress.

**Fear.** Fear, which is a basic emotion, if not processed, can lead to a multitude of psycho-socio-emotional problems in an individual's life for it is the most powerful force that holds one back. However, it is important to note that fear can be either rational, or irrational, and the client is educated about how rational fears (like not jumping in front of an oncoming bus) do not require the implementation of the following formula, which is intended to help them process their irrational fears. The client is enabled to get a deeper understanding of fear, and to help them process their fears, the client is provided with the following formula of I AM FEAR:

- *Identify* their biggest fears and recognize the aspects of those fears that terrify them the most.
- *Ask* questions like why they are afraid of it in the first place, what is the worst thing that can happen if they confront their fear, and if these fears were absent from their life, how different would their life be.
- *Make a distinction* between how much of what they fear is external, and how much of it is internal.
- *Face your fears*, first in their mind, then in the real world.
- *Embrace* their fears.
- *Analyse* the purpose the fear is serving.
- *Resilience*

**Grief.** Grief is a natural reaction to any form of lack or missing in one's life, and this emotion, if not processed, can become the root of multiple psycho-socio-emotional concerns by creating a sense of overwhelm that renders the individual powerless and helpless. To help the client process their grief, they are provided with the following formula of MISSING:

- *Make a list* of everything and everyone that they are missing at the moment.
- *Identify* what aspects of each of the items on their list they miss the most.
- *Speculate* whether it is present in their current life, possibly in a different form.
- *Strategize* ways they (what the participant is missing) can be recreated in any way .
- *Incorporate the strategy*
- *Negate* their beliefs about being strong and other such beliefs.
- *Grounding and gratitude*

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**Aim.** The fourth and final pillar that the authors have identified is the absence of an aim in life, when an individual either does not have anything to wake up for in the morning or is pursuing aims that are not truly their own or they feel overwhelmed about what to do, they are susceptible to succumbing to multiple psycho-socio-emotional problems. To help the client work on their aim, they are provided with the following formula of AIMED:

- Ask what kind of life they would truly like to live.
- Identify the resources they already have and the resources they shall need to make this ideal life possible.
- Make a plan of action or blueprint to make this ideal life a reality.
- Execute
- Deliberate what went right, what went wrong, and how the plan can be better.

#### External world

The second phase of the journey addresses the life of the client outside their own mind and focuses on skillsets that can be implemented by the client in compliment to the mindsets that they developed in the previous phase. It covers the following aspects:

**Reticular Activating System (RAS).** The client is made aware of the in-built filter system that shows our five senses what we want, the significance of the RAS, and how to take conscious control of this natural filtering mechanism.

**The two gatekeepers of RAS.** The authors have recognized that our Reticular Activating System is influenced by two factors, namely our inner child, and our inner malevolence.

**Inner Child.** No matter how old we grow, a part of us always remains a child and this child can show any one or a combination of the following behavioural patterns:

- *The upset child.* This happens when we have unfulfilled desires or did not get enough opportunities to express ourselves. When we have an upset inner child, we experience a sense of unfulfillment and emptiness no matter how good our life might be.
- *The hurt child.* This happens when we have unprocessed trauma (neglect is also a form of trauma) within us. When we have a hurt inner child, we tend to either become people pleasers, mature beyond our age or find it difficult to trust people.
- *The helpless child.* This happens when we felt powerless as a child and our voices were constantly silenced. When we

have a helpless inner child, we tend to rebel and disregard rules and we do this to feel powerful. This can also make one want to be in powerful positions in society so that everyone can hear their voice.

- *The happy child.* This happens when all our physical, psychological, emotional, and social needs are met as a child. When we have a happy inner child, we tend to be well-adjusted in life as an adult.

The client is enabled to identify the state of their inner child and the therapist educates the client about the process of healing their inner child by asking the following questions:

- What are the needs that remain unmet even now? How can you fulfill those needs now that you are an adult?
- What are the resources you have, to fulfill these needs? What resources do you need to fulfill these needs?
- Once the clients have the answer to these questions, they are facilitated to work toward them.

**Inner Malevolence:** The client is enabled to identify, acknowledge, accept, and embrace this side of themselves that they themselves find difficult to accept as a part of them.

**The Four Balancing Forces (PVPR).** Just as the four pillars of self-love, fear, grief, and aim drive our thoughts and behaviour, this second loop can help us consciously balance out the first loop for each of the four pillars of this loop (premise, vision, purpose, and strategy) are the counterpart of each of the pillars of the first loop. Each of the four pillars of this loop is guided by the following philosophies:

**Premise.** When the premise or the context is set in self-love, everything else falls into place.

**Vision.** When fear is replaced with discipline, the path ahead becomes crystal clear.

**Purpose.** When our purpose is bigger than our grief, we can move forward.

**Readiness.** We need to feel ready to incorporate the appropriate measures to convert our aim into a reality.

**Premise.** To ensure that the premise or context of the client's life is based on self-love, they are provided with the following formula of RESTING:

- Release their pent-up emotions, limiting beliefs, toxic relationships, and unhealthy habits.
- Embrace their malevolent side.
- Surrender: The therapist helps the client understand the



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true meaning of surrendering and how it can help one move toward self-love.

- *Talk*
- *Imagine* the kind of life they would want to live and the kind of emotions they would want to experience in this ideal life of theirs.
- *Nurture* this thought with belief and confidence.
- *Go get it*

**Vision.** Fear can make our vision of reality blurry, making us choose the path that might give instant pleasure at the moment, but can prove to be harmful in the long run because fear can make us lose sight of what truly matters. To help the client have a clear vision, they are provided the formula of SEE:

- *See the bigger picture.*
- *Envision a desirable future .*
- *Entertain every possibility.*

**Purpose.** Grief is a natural part of life, but sometimes we allow it to consume us completely. Having a purpose that is bigger than us can make it easier to deal with our grief because our purpose gives us hope, and hope is essential to survive in the darkest of times.

However, while identifying our purpose, it is important that the goals we are setting for ourselves are not borrowed from others (friends, family, teachers, society, etc.) but truly our own. One effective way to ensure that our goals are truly our own is to ask a series of “why” questions to each of our goals. To help us find our purpose and make the most of it, we can use the formula of FOCUS:

- *Find your North Star*
- *Observe* the distractions that are keeping them away from their north star.
- *Create* a plan of action to reach their north star.
- *Use* every possible resource to reach their north star.
- *Sort* their plan in accordance to their priority.

**Readiness.** One needs to feel ready and prepared to work towards making their aim a reality. To help the client feel ready, they are provided the following formula of READY.

- *Realize* that there is a need to evolve.
- *Explore strategies you can use to create the change.*

Decision Making. The ability to make decisions is an integral part of strategizing, and to help the client to efficiently make decisions, they are provided with the following formula of DECIDE:

- *Determine the end goal.*
- *Explore the pros and cons of each available option.*
- *Categorize your needs in alignment with your end goal.*
- *Integrate the formula so far.*
- *Deduce one single choice.*
- *Execute and implement the choice.*

Anger Management. Anger can cloud an individual’s ability to strategize effectively, for intense anger is known to interfere with an individual’s rational cognition. The client is educated about the nature of anger, and how, when not regulated, it can have detrimental consequences. To help them manage their anger, they are provided with the following formula of PAUSE, which they can use any time they notice that they are starting to get angry. To facilitate the explanation of this formula, the therapist asks the client to recollect a memory that induces an emotion of anger within them.

- *Pause.*
- *Ask yourself* what you are truly angry about and why you are angry.
- *Understand your anger.*
- *Silently feel.*
- *Engage after two minutes.*

Time Management. The client is educated about the Eisenhower Decision Matrix that was developed by 34th president of the United States, General Dwight David Eisenhower.

Emotional Regulation. Emotions, when regulated, can be one of the greatest superpowers an individual can possess. In contrast, when feeling overwhelmed, one can easily lose control, making any strategy useless. Similarly, if one is not mindful, one can get overwhelmed with their thoughts. Thus, to help the client improve their emotional quotient, they are provided with the following formula of BREAK:

- *Breathe.*
- *Recognize* the thoughts and feelings they are experiencing at the moment.
- *Examine* these experiences and make sense of the experiences.

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- Address the clutter.
  - Keep working on your emotional quotient.
  - Aspire to be the best version of yourself.
  - Dare to make the change .
  - Yes to possibilities.
  - Instill/set healthy boundaries.
  - Explore your expectations from the relationship. Never put all your expectations on one single person.
  - Decide whether you want to continue with the relationship or not.
  - Speak up.

Here, the therapist identifies if the client is feeling stuck in any way or is holding themselves back, and facilitates the process of revisiting either self-love, fear, grief, or aim to overcome the roadblocks they might be facing before proceeding to the third phase of the journey.

### Social world

The final phase of the journey is about enabling the client to integrate the progress they made over the previous two phases in a social setting. It covers the following aspects:

**Cyclic Nature of SRT and Introduction to Integration.** The therapist educates the client about how both the loops of SFGA and PVPR can be seen as cyclic in nature for, mathematically speaking, both the loops serve as the Left-Hand Side (LHS) and Right-Hand Side (RHS) of the equation (SFGA being the stimulus loop while PVPR is the response loop). Whenever one feels stuck in any of the stages, one needs to revisit the previous stages and repeat the cycle as needed.

The therapist then explains since we all live and exist in a social setting; we need to take into consideration the external environment and its influences. To complete the loop of formulas, the client is introduced to the third set of formulas (ARFI) which reflects the social world in which the client exists.

**Authenticity.** To enable the client to be their authentic self in a social setting, the therapist explains to them the following formula of PARC:

- Practice what you preach.
- Announce your existence.
- Reject all the bullshit society has been feeding you.
- Create your own unique identity.

**Relationships.** To enable the client to experience healthy and fulfilling relationships on both personal and professional fronts, the therapist explains the following formula of FRIENDSHIP:

- Free yourself from past baggage.
- Revisit your relationship with yourself.

- Have **HOT** (honest, open, and transparent) communication  
Initiate action.
- Plan the journey together.

**Forgiveness.** The therapist educates the client about the nature and importance of forgiveness before providing them with the formula to practice forgiveness in their life.

**Elements of forgiveness.** Unlike popular belief, forgiveness is not just about someone saying "I am sorry" and the other replying "It is okay." Following are some of the major elements that forgiveness involves multiple elements which the clients are educated about.

**Ladder of forgiveness.** The process of forgiveness can be seen as a four-step ladder. It begins with anger and sadness directed towards our own self, which leads to self-blame, guilt, regret, and shame. Once we forgive ourselves, we move to the second phase, where the blame is directed at someone else, someone who did us wrong.

Once we forgive the person, we move to the third phase, where there is no person to blame, but there is still anger and sadness within us, so we begin to blame society, destiny, and the world in general. Once we can move past this phase, we are at peace with what happened and we no longer feel the need to blame. Till we reach phase 4, it is very possible that we might switch between the previous three phases over time.

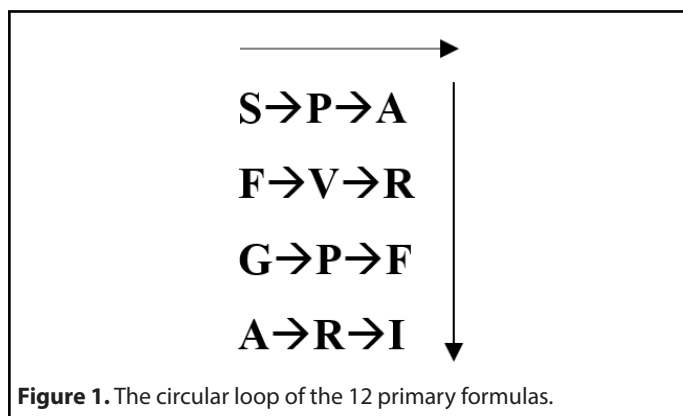
**Formula for forgiveness.** To facilitate the process of forgiveness, the therapist takes the client through the following formula of IT CREATES US:

- **I:** Identify the person and act to forgive.
  - **T:** Time quadrant decide which quadrant forgiving the particular person would fall in.
  - **C:** Create space to forgive.
  - **R:** Read the charges (Let the other person know how they hurt you but without an aspect of blame).
  - **E:** Experience the anger and pain.
  - **A:** Assess what you might have learned from that experience.
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- T: Try to see the other person as a human being.
- E: Eye contact.
- S: Society (We need to remember that all this is happening in a social context).
- U: Use the SFGS-PVPR loop when we find it difficult to forgive, we are usually stuck in one of the phases of these two loops.
- S: Switch the focus to love.

**Integration.** As a conclusion to the therapeutic journey, the therapist elaborates upon the entire journey as an integration of twelve quadrants that operate in vertical as well as horizontal loops. The therapist also explains how the journey progresses in a way that only when one practices self-love and uses healthy language, can one proceed to have a healthy premise for their journey of becoming self-reliant. Once the premise is set, one needs to be authentic enough to accept and face their fears. Once they have overcome their fears and brought balance to their life, their vision becomes clearer. With a clear vision, they can nurture healthy relationships, which are not only aligned with their vision of life but also help them in the process of dealing with grief. Using silence as a tool to process their grief, they are able to focus on their purpose. When the purpose is bigger than the resentment they hold towards anyone, the process of forgiveness becomes smoother. And once they have freed themselves from the shackles of blame and resentment, they can develop an aim that is truly their own. A clear aim that is not clouded by overwhelm allows them to be in a state to be ready and prepared to integrate the entire therapeutic journey into their lives and create a lifestyle that enables them to consciously navigate through the ups and downs of life.

The therapist closes by highlighting the implications of applying SRT in a social setting, for it can help in not only preventing occurrent/recurrent mental health concerns in the client's life but also passively affecting people around them and thus they can become a catalyst in making the lives of their loved ones better.



**Figure 1.** The circular loop of the 12 primary formulas.

**Next course of action.** Once the therapeutic journey concludes, the client is encouraged to apply what they learned in the program with at least one person from their life and observe how it impacts their personal and interpersonal dynamics. The purpose of this exercise is to reinforce what they acquired over the journey.

To reinforce the feeling of self-reliance, the client is encouraged to identify a passion project that has the potential for monetization and deploy it over a span of three months.

If conducted in a group setting, every client shall receive 3 months of therapist guidance during which they can clarify any doubt about the application of any of the formulas they learned over the three days in their everyday life.

### Discussion: Application of SRT

This approach is designed to be universal in nature, so the therapist can implement it with any client who is willing and able to work upon their own mental health holistic wellness. As mentioned above, this modality can be applied in a group setting while enabling every participant to have a personalized experience.

For individual sessions, it can not only become a part of the therapists' eclectic toolkit, whereby they are able to use combinations and permutations of the 12 primary formulas to gain a holistic understanding of the client, and accordingly conceptualize the therapeutic journey ahead, but the authors have also observed that when both the therapist and the client are equipped with SRT, resolving the most difficult of life problems becomes easier since they can both refer to the relevant formulas according to the need of the circumstances.

The authors have also observed that because of the C4 approach of the modality, SRT can be used as a framework for workshops and training programs as well to cater to the multiple needs of the clients, wherein a therapist or trainer can use one of the three phases, or even one of the 12 primary formulas as stand-alone topics for the session.

### Pilot Study

This novel therapeutic model was implemented on 5 pilot batches, and was delivered to a total of 50 clients. The clients were from the upper-middle class section of the Indian society, and their ages ranged from 21 to 58. It was observed that even though it was delivered in a group setting, every client had an individualistic experience.

Client A.M, a 21-year-old was suffering from guilt and was traumatized by the failures he faced in life. He had internalized that he is the villain of his life, and as a trauma response, he was unable to cry for 2.5 years, but after attending SRT, he was finally able to process this grief and anger, and let go of the



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baggage he was carrying until then. He has now started his own fintech startup and is successfully starting his career.

N.S, a 27-year-old male, who was in a toxic relationship which was making him toxic towards his own self, on the completion of SRT, puked and experienced a sense of detox on a physical level. He is now able to manage his work-life balance and is going to be married to a loving partner, with whom he was able to establish a healthy relationship post the completion of SRT.

A.P, a 25-year-old female, who was unable to find clarity regarding her profession, and was stuck in a toxic workspace, was able to quit her organization and successfully pivot in her career. She is now successfully managing a community for queer sensitization and also running a podcast on the same topic. Similarly, F.S, a 22-year-old female, who was indecisive about her career, was able to start her own coaching institute to teach her subject of expertise, after the completion of SRT.

S.K, a 58-year-old male, who was grieving the loss of his wife, was able to find new perspectives and move closer to closure after the completion of SRT. On the onset of the journey, he was resistant and believed that he had come to terms with his experiences, however post the completion of the process, he acknowledged his pent up grief of losing his wife and the hurdles he experienced in his professional life, and after processing these difficult emotions, consciously chose a fresh outlook towards life.

S.S, a 30-year-old male, who was struggling to process the trauma of being wrongly accused and framed for an act he did not commit, was able to find peace and develop a stronger bond with his own self, after the completion of SRT. Even though he believed that he had processed the thoughts and emotions related to his trauma and had moved on from his victim mindset, during the process of SRT he realized that the trauma reflected in him either not trusting someone or overly trusting someone, and post the completion of the process, he was able to develop an internal schema for himself that was not tainted by his past experiences.

M.A, a 23-year-old male, who was unable to find a balance between his career and the expectations of his family, was able to amicably find a middle path to not hurt his family and still pursue his career of his choice, after the completion of SRT. He is now the brand consultant for a fashion startup and helping them increase their public presence.

M.K, a 21-year-old male, who was bullied and found it difficult to voice out his own opinion, was able to confront his fears and take a stand for himself both personally and professionally after the completion of SRT. He is now a part of the founding team of the fintech startup along with A.M

S.C., a 28-year-old-male, who was feeling lost and confused

in life, was able to not only gain greater clarity of what he wants in life, but was also able to expand his network to take his dreams towards fruition, during SRT. He is now working on a microbiology project towards creating better vaccinations with S.K.

These clients and the other 42 were observed for 6 months, and their growth trajectory was recorded. All the 50 clients are doing well, and with occasional mentorship, wherein they are provided clarity about which formula would be most appropriate in their respective context in life, they are able to navigate through the challenges they found difficult to face before attending SRT.

## Conclusion

After its series of pilot runs, SRT is now ready to be implemented on a larger population, with outcomes measured to determine the evidence base, whereby can begin the process of standardizing this novel model for the global population, while creating an impact in their lives. Further qualitative and quantitative research is needed before this new modality can be claimed as beneficial. Following are some other significant areas that the authors have identified as potential studies:

### Therapist training

Currently, this new therapy modality has been deployed solely by the authors. It is going to be worth understanding the journeys and experiences of future therapists who will be trained in this modality.

### Therapist subjectivity

The efficacy of every therapy modality is significantly influenced by the efficiency of the therapist [18,19]. Future research can also explore the efficacy of this approach when delivered by more therapists who are trained in this modality.

### Neuroscience of self-compassion

Studies in the field of neuroscience have found that engaging in self-criticism, on an fMRI, activates the brain regions of the lateral prefrontal cortex and dorsal anterior cingulate cortex which are responsible for processing error detection and correction. In contrast, engaging in self-reassurance has been found to activate the left temporal pole and insula areas, previously found to be activated in compassion and empathy. Thus, people who are self-critical tend to show an activated dorsolateral prefrontal activity, while those who engage in self-assurance show an activated ventrolateral prefrontal cortex [20]. This opens the doors for future research to study the neurological impact on the clients after the application of SRT.

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## Beyond neurosis

The authors have developed this model based on their experience with clients who belong to the neurosis section of mental health concerns. Thus, another interesting avenue for future research is exploring the extent of the universality of SRT on clients facing mental health concerns that fall under psychosis and/or developmental disorders.

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## Author Contributions

The current paper is a product of combining the learnings and reflections from the professional journeys of both of the authors. Both of them co-created the formulas that this therapy modality entails.

**AN:** He brought in the theoretical perspectives and worked on the literature used in the paper, to ensure that it is an original work that entails minimum resemblance to existing therapeutic modalities.

**HB:** He has been instrumental in adding the application and practical implications of this modality. He also brought in critical insight that helped in fine-tuning the paper and ensured grammatical correctness.

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