

Rooted in the Mud, Born in the Sun

-- A Case Report on Growth Counseling for Crisis Response of Students with Bipolar Disorder

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Abstract: This article starts from a case that actually occurred in university. Due to being bullied by others from a young age and not receiving timely guidance, as well as strict discipline from his father, he was diagnosed with depression (later diagnosed with bipolar disorder). Currently, he is taking medication to treat depression and his condition has been somewhat controlled. His academic performance in university is average, and he has few friends. The counselor promptly discovered and intervened, took active measures to alleviate symptoms, and provided advice to students

Keywords: Crisis growth counseling for students with bipolar disorder

1. Tutoring background

1.1 Basic information

Xiao A, male, comes from a rural area. His father is a taxi driver and his mother is a mall salesperson. The student has been staying in their hometown with their grandparents since childhood, and has a younger sister who goes to elementary school.

1.2 Case background

At the beginning of the new semester, the student sought help from a new counselor, stating that life was boring and even wanted to die, not knowing what to do. The counselor learned from the conversation with the student that due to his small and delicate figure, he was ridiculed as a "sissy". He was bullied and isolated in elementary and middle school. At first, it was useless for him to resist and seek help from his parents. His parents always said why others only bullied him and let him face it on his own. Later, he comforted himself by "reaching out and not hitting smiling people" and often kept a "fake smile" when hitting classmates who scolded him. As he grew older, no classmates bullied him anymore, but he also had no friends. At one point, I had abnormal emotions and wanted to commit suicide. After being discovered by my former counselor, I intervened in a timely manner and was guided to seek medical treatment. I was diagnosed with depression (later diagnosed with bipolar disorder) and am currently taking medication to treat my depression. In order to avoid his father getting angry after learning about his illness, he concealed it and only his mother and grandparents knew that he suffered from depression. On the one hand, the mother conceals her illness, and on the other hand, she often worries and cries about her son's condition and fate, I like to talk.

2. Tutoring process

Before the student actively sought help, the counselor had already handed over the work to the original counselor and was aware of the student's basic situation. As the student took the initiative to seek help, the counselor brought the student to the growth counseling room for a detailed understanding of the above situation.

2.1 Problem analysis

2.1.1 Depressive episode

Currently, the student's mood has been consistently low for 3 months, and the effectiveness of antidepressant medication treatment is not good. The student is currently not interested in learning and has thoughts of suicide. The student is in a state of psychological crisis.

2.1.2 Growth experience

They are small in stature and have a feminine temperament, often being bullied, isolated, and even beaten and scolded by classmates. They often feel lonely, insecure, and helpless because their parents and teachers did not intervene and protect them in a timely manner. This experience has become an indelible shadow for them, and they still cannot get out.

2.1.3 Interpersonal relationships

The student has had no friends since childhood, and his experience of being bullied on campus still influences him to this day. He claims to have a pleasing personality, is sensitive and insecure when interacting with others, lacks a sense of security, and sometimes cannot grasp the scale of social interaction due to lack of confidence.

2.1.4 Family relationship

The relationship between the parents of the student is average. There is a 10-year-old younger sister in the family, and the father has completely different attitudes towards the siblings. The mother is under a lot of pressure and often affects the emotions of the student because she shares a secret with the student, secretly providing medical care and taking care of him without informing her family.

2.1.5 Economic pressure

The student comes from a rural area with average family economic conditions, and their parents have just found new jobs after losing their jobs.

2.2 Tutoring time and frequency

Based on the above analysis, the counselor has decided to start with the most urgent crisis intervention and gradually carry out counseling to promote the psychological growth of the student.

2.3 Coaching ideas and methods

2.3.1 Family school cooperation for crisis intervention

Immediately initiate crisis intervention, report the student's situation to the college leaders and the school psychological center as soon as possible, urge the parents to come to the school for an interview immediately, and take the student to Hunan Provincial Brain Hospital for follow-up.

2.3.2 Return to the past and focus on the 'inner child'

A specialized psychological counseling was provided for the student's childhood experiences of being left behind and bullied. The counselor and the student traveled back in time to see the loneliness and helplessness left behind by his childhood, the longing for parental love and protection, the anger and helplessness towards being bullied, the resentment towards his parents ignoring his experiences and feelings, until all his feelings were awakened, seen, accepted, and comforted.

2.3.3 Explore strengths and improve interpersonal relationships

The growth experience of this student from a young age has led to the formation of a pleasing personality, being anxious about gains and losses in interpersonal relationships, and being insecure and sensitive. The counselor guides the student to discover their shining points, such as sensitivity, strong empathy, and strong language expression ability.

3. Tutoring effect

3.1 Timely and effective crisis intervention

Under the guidance of the counselor, the parents of the student immediately came to the school to take the student to the hospital for a follow-up visit, overcame family difficulties, rented a house near the school to accompany the student, took care of their daily life, and urged them to take medication on time.

3.2 Get rid of anxiety and focus on the present moment

Under the guidance of the counselor, the student took good care of their physical and mental health, studied professional knowledge and dance seriously, and achieved significant progress without failing any courses in the final exams. As a leading actor, they performed in a large-scale school stage play and won the second prize at the school level.

3.3 Enjoy the relationship of self enjoyment

The student realized that as long as they do not harm others or society, all existence and relationships are worth being allowed and accepted, provided that they are accepted first. In his future life, he can still rely on his own judgment and efforts to establish healthy and reliable friendships and romantic relationships. In the process of studying his major and dance hard, he gained true friends who could understand and accept him.

3.4 Say goodbye to the past and experience the power of growth

After embracing and nurturing the inner child again, the pain of the past was healed and a powerful force was born from it. He shook off the heavy burden, reconciled with his mother, reconciled with himself, and tried to understand his parents' difficulties. Through part-time tutoring, he reduced the burden on the family.

4. Reflection and Inspiration on Tutoring

4.1 Crisis intervention requires courage and attention to detail

The key to successful intervention is twofold: firstly, to gain the trust of students and reach an agreement on the location, time, accompanying person, and other matters of medical treatment; secondly, to have a detailed understanding of family relationships, communicate clearly with parents about the above matters, and ensure that students' emotional fluctuations will not be caused by disagreements in family relationships or school opinions, which may backfire.

4.2 Strong collaboration formed through communication between home and school

Firstly, guide the mother to release her inner stress, express empathy towards her, popularize knowledge about depression, and from the perspectives of both women and mothers, guide her to accept the child's illness, form an alliance between family and school, and promote growth together; Secondly, together with her mother, return to the past, pay attention to the child's lack of family affection and bullying experience in childhood, guide the mother to have a dialogue with the child, see and comfort, and raise the weak and helpless' inner child 'again.

4.3 Economic assistance to solve practical problems

Based on the principle of combining solving practical and psychological problems, and considering that the student's family has average economic conditions and a heavy burden of education and medical care, the counselor guided the student to apply for recognition as a financially disadvantaged student and apply for a national scholarship.

4.4 Observing the condition and promoting scientific treatment

In the process of promoting peer support, the counselor learned from the psychological committee that the student showed a tendency to have "shallow and deep conversations" when interacting with others. Initially, it was analyzed that this may be due to the student's desire for friendship and willingness to sacrifice their privacy to create a sense of presence among classmates. Later, the student reported that the student was sometimes "not very self respecting", "exaggerated in words and actions", and "trying to please others". The counselor suspected a manic episode and immediately contacted the parents for a follow-up visit. The hospital diagnosed the patient with bipolar disorder and changed the treatment plan. At present, the student's emotions are relatively stable and there are no abnormalities.

4.5 Peer support creates a good environment

In response to the situation where the student's feminine temperament is often ridiculed by classmates, unable to accept oneself, and under great psychological pressure, the counselor used the opportunity of the themed psychological class meeting to guide students to respect, tolerate, and help each other, and to correctly view students with different temperament types.

References

- [1] Zheng Xiuxiu, Yan Fengwu. Non suicidal self injury behavior and influencing factors in adolescent depression patients. *Su Research [J]. Shanghai Preventive Medicine*, 2022, 34 (10): 960-964
- [2] Ling Renxi, Liang Changquan, Tang Jingxiong, et al. Non suicidal self harm behavior in middle school students with depression analysis of Current Situation and Risk Factors [J]. *Medical Theory and Practice*, 2021, 34 (10):1774-1776.