

The Approach of the Concept of Integrative Methodology© in Research and Practice for Sociotherapy

Prístup konceptu integratívnej metodológie© vo výskume a praxi socioterapie

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ABSTRAKT

The present article expounds upon a model in sociotherapy that is particularly oriented towards praxis, drawing upon two approaches showing the characteristics of the Concept of Integrative Methodology©. The main aim is to present this practical and sustainable approach to sociotherapy showing firstly findings of an exploratory study evaluating the methodology. The methodology is examined through a qualitative analysis of visual material and interview data from refugee mothers from Ukraine. Secondly, the practical application of the methodology is described in detail using a case study. This methodology was developed by Hanna E. Schumann for the treatment of people experiencing crisis. The model is primarily client-centred, as defined by Carl Rogers, and draws upon the theoretical approaches of Anton Antonovsky, Viktor Frankl and Hartmut Rosa. In order to explore this reality, a visual assessment of the situation is carried out. The selection and presentation of this is the responsibility of the client. In a subsequent process, further perspectives are explored in order to establish a shared reality as the basis for the counselling. This methodology is currently being applied with great success across many areas of sociotherapy and social work, both domestically – in Germany and internationally.

Kľúčové slová: Salutogenesis. An integrative view of human nature. A sociotherapeutic approach.

ABSTRACT

Predkladaný článok sa zaoberá modelom v socioterapii, ktorý je zameraný najmä na prax, a čerpá z dvoch prístupov, ktoré ukazujú charakteristiky konceptu integratívnej metodológie©. Hlavným cieľom je predstaviť tento praktický a udržateľný prístup k socioterapii, pričom najprv ukážeme zistenia prieskumnej štúdie hodnotiacej túto metodiku. Metodika je skúmaná prostredníctvom kvalitatívnej analýzy vizuálneho materiálu a údajov z rozhovorov s matkami utečenkami z Ukrajiny. Následne je praktické využitie metodiky priblížené prostredníctvom prípadovej štúdie. Túto metodiku vyvinula Hanna E. Schumann pre liečbu ľudí prežívajúcich krízu. Model je primárne zameraný na klienta, ako ho definoval Carl Rogers, a čerpá z teoretických prístupov Antona Antonovského, Viktora Frankla a Hartmuta Rosu. Na preskúmanie tejto reality sa vykonáva vizuálne posúdenie situácie. Výber a prezentácia tohto posúdenia je zodpovednosťou klienta. V následnom procese sa skúmajú ďalšie perspektívy s cieľom vytvoriť spoločnú realitu ako základ pre poradenstvo. Táto metodika sa v súčasnosti s veľkým úspechom uplatňuje v mnohých oblastiach socioterapie a sociálnej práce, v Nemecku i v zahraničí.

Key words: Salutogenéza. Integratívny pohľad na ľudskú prirodzenosť. Socioterapeutický prístup.

Introduction

Rooted in a salutogenic paradigm, the Concept of Integrative Methodology® (CIM®) emerges as a psychosocial model of practice that seeks to facilitate empowerment and change processes across both individual and collective dimensions. Its methodological foundation draws not only on verbal and dialogic forms of engagement, but extends to encompass visual, analogical, integrative, and imaginative modalities of intervention. The following section presents findings of an explorative research and, in a subsequent section, a case study, in order to demonstrate the practical applicability of the Concept of Integrative Methods®. The present article aims to outline the potential benefits of these established methods within the context of sociotherapy. The theoretical framework of the methods are delineated, followed by initial results from a preliminary evaluation study and an in depth case example. The primary objective of this work is to critically present and examine a practical yet sustainable framework for sociotherapeutic intervention, with particular emphasis placed upon the preliminary findings derived from an exploratory empirical study undertaken with the explicit purpose of rigorously evaluating the efficacy and methodological soundness of the proposed approach. In a subsequent phase, a comprehensive case description serves to further substantiate and complement the preceding analysis, thereby providing additional empirical grounding for the demonstrated effectiveness and practical applicability of the methodology under examination.

1 Theoretical background

The methodology under discussion is founded upon a humanistic, integrative conception of humanity, whereby the individual is considered within the full context of their existence. The focus is on the individual's capacity for positive development and their needs. The subjective interpretation of the client's reality is central to this process. *The Concept of Integrative Methods®* (CIM®, German: *Konzept Integrativer Methodik*

KIM®) was developed by German social worker Hanna E. Schumann (1980) in the wake of the Second World War, originally to support traumatised children experiencing loss and displacement. Her central insight was that therapeutic social work aims to restore what she called "aliveness" (*Lebendigkeit*) the fundamental motor of human development.

Schumann saw this quality as relevant across all life transitions: from sickness to health, from trauma back to life, from one developmental stage to the next. The concept thus applies broadly, spanning crisis intervention and everyday social work practice across the lifespan.

The methodology is based on a humanistic, integrative view of humanity that considers the individual within the full context of their existence. It focuses on the person's well-being and needs. Central to this is a client-centred approach according to Rogers (1985, 1995). The subjective interpretation of the reality of the person being counselled is at the forefront. To experience this reality, a visual assessment of the situation is carried out (intrapersonal situation). The selection and presentation are left to the person being counselled. In a subsequent process, further perspectives are explored (interpersonal situation) in order to arrive at a shared reality. Schumann identifies an inherent human orientation towards meaning that is, towards what truly matters in our lives which brings her approach close to the theories of Aaron Antonovsky, Viktor Frankl and Hartmut Rosa.

2 Core Principles of CIM®

CIM® is predicated on a series of principles that differentiate it from deficit-oriented models of care. The orientation is strength based. The method is centred on the identification of an individual's strengths, skills, and internal resources. Problems are conceptualised as signals of a blocked integration process, rather than as individual deficits or pathologies.

The client is regarded as an expert in their own life by the service provider. Those seeking support are regarded as experts in their

own lives. From this standpoint, individuals cultivate decision-making competencies and a sense of self-efficacy, as opposed to becoming dependent on professional expertise. Multi-modal integration: The approach integrates conversation, image work, body work, and symbol work into a coherent framework, allowing practitioners to meet individuals where they are and to activate multiple pathways to healing. The utilisation of resonance as a medium for development is a subject that merits further consideration. The concept of "*resonant relationship*" is employed by Rosa (2019) to denote the state of being healthy and resilient, which is characterised by the interaction between people and the world. In this context, resonance is defined as the dynamic interaction between individuals and their environment. The objective of CIM® processes is to facilitate the opening up of these spaces of resonance and to render them tangible. The subject's role is that of a companion rather than a therapist. The social worker is not cast in the role of an expert who treats a passive client, but as a companion on the path to integration. This fundamental reorientation of the professional role has implications for professional identity and for the self-confidence of practitioners. A further implication of this role redefinition is that social workers who work within the CIM® framework often report an increase in their own self confidence, because they come to see their contribution as one of empowering others rather than of fixing problems. The valuation of clients as experts in their own lives engenders a reciprocal effect, whereby social workers are enabled to perceive their own actions and their own person as valuable.

The concept is teachable and is currently being taught in *Germany* and *Ukraine*.

3 Methodology of Research Study

This report presents an exploratory study as a preliminary step toward a full-scale evaluation of the method *Concept of Integrative Methodology CIM®*. The Exploratory study was carried out between spring 2023 and 2025 in cooperation with Institut KIM e.V. in *Germany* and the *State University of Lviv* in

Ukraine, where CIM® approaches are taught as trauma-therapeutic methods for addressing the psychological effects of the ongoing war. At the time of writing, data collection is still underway in *Ukraine*. The study is ongoing, and the findings reported here therefore represent preliminary results only.

Based on the data available at the time of analysis, the present study examined the effectiveness of CIM® interventions in a particularly vulnerable sample of 24 Ukrainian refugee mothers who had fled to *Germany* with their children because of the war in *Ukraine*. The selection criterion for participants was their voluntary engagement in services designed for Ukrainian refugee mothers, delivered by native-speaking social workers. Upon completion of group therapy sessions (4 groups, 6 mothers each), semi-structured interviews were conducted based on the Life Flow method. Participant feedback was gathered at the end of the course, addressing the question of whether the image retained personal significance beyond the initial encounter. The effect of the Life Flow was measured using a rating scale ranging from 1 to 10 (1 = free 10 = burdened). A follow-up assessment was carried out 8 to 12 weeks later, in which subjective meaning was explored from the participants' own perspectives.

The data corpus consisted of interviews conducted using semi structured interview guides, analyses of visual materials (participants' Rivers of Life or Life Flow drawings), and supplementary open ended interviews carried out during the second phase of data collection. The material was analysed in accordance with Mayring's qualitative content analysis approach (Mayring 2015; 2020). Mayring (2023) asserts that quality criteria, such as reliability and validity, are integral to qualitative research. However, the relevance of these criteria is contingent upon the phase and purpose of the research process.

The exploratory phase serves a preparatory function; its aim is to establish the research field and generate preliminary categories rather than to confirm predefined con-

structs. It is evident that the application of reliability and validity criteria is methodologically premature at this stage, due to the provisional nature of both the data collection instruments and the analytical categories. Reliability is contingent on stable and replicable procedures, while validity is predicated on clearly defined constructs. However, neither condition is yet fulfilled in exploratory work.

Mayring's sequential model posits that each phase serves as the foundation for the subsequent phase. Consequently, the role of quality assurance becomes increasingly central and criteria-bound as research progresses towards systematic analysis and interpretation. In the exploratory phase, methodological openness and flexibility are the appropriate standards, as premature standardisation would risk foreclosing relevant phenomena before they can be adequately identified. Preliminary findings are presented in tabular format as paraphrased excerpts from the transcribed interviews, organised according to varying levels of abstraction. The interviews drew upon drawings produced by the mothers during the course of trauma therapy. These visual narratives functioned as symbolic expressions of the participants' personal experiences and biographical trajectories. Throughout the interviews, the mothers were encouraged to interpret and elaborate on the meanings embedded in their drawings. The participants' impressions of their own drawings were reflected upon again after several weeks, and additional interview data were collected, to view sustainable effects.

4 The River of Life (Life Flow) Method

The River of Life (Lebensfluss) is a projective technique within the context of systemic family therapy for children, adolescents, and their parents. In the CIM® framework, the method has been further developed as an externalisation technique through which significant life experiences, personal resources, challenges, and social relationships are represented visually in the form of drawings.

Participants are given paper and drawing materials and are encouraged to depict their

life journey by reflecting on several guiding prompts, including:

- Which "treasures" along the riverbanks have been given to the river?
- Which obstacles and barriers has the river encountered?
- How has the river continued its course until the present day?

During the subsequent reflective stage, participants are invited to explore additional questions such as:

- Looking back, how has my river managed to overcome the cliffs and difficulties of life?
- Where do I perceive myself to be today?
- Which treasures along the riverbank remain meaningful to me today, and what significance do they hold?

The *River of Life* serves both as a sociotherapeutic intervention and as an instrument for qualitative data generation. By externalising personal life narratives through symbolic and metaphorical imagery, participants are enabled to create emotional distance from distressing experiences while simultaneously strengthening awareness of their own coping capacities, resources, and agency. Within the CIM® approach, interventions such as the *River of Life* or *Life Flow* are conceptualised as potential "carriers of development".

5 Results of Exploratory Study

5.1 The Drawings or Life Flow

The following presents, by way of example, the image and interpretation of one participant. She had achieved a relative sense of security and stability in *Germany*, created a particularly meaningful image in which a stone located within the river's course was represented not as an obstruction, but rather as a supportive element enabling the continued flow of water beneath and beyond it (*Fig. 1*). Her reflections exemplify the integrative and resource-oriented processes central to the CIM® approach. In her own words she reflects her analog image: „This is my life, which must be accepted in its entirety, with all its advantages and disadvantages. The

stone on the path is intended to help the water flow underneath it. The reeds represent the need for protection. I added the river after the stone. The water flowing beneath it and spreading further."

The participant's interpretation suggests a process of reconciling difficult life experiences while simultaneously recognising personal resilience, continuity, and the possibility of further development despite adversity.



Fig. 1: River of Life

5.2 The Interviews

Across all interview data sources from 24 participating mothers, a number of recurrent themes emerged:

Person-orientation and connectedness: Interpersonal relationships — family, friends, community — were consistently identified as the most significant resources and treasures in participants' lives.

Self-determination and self-efficacy: Many participants articulated a renewed sense of agency, expressing the understanding that they retain choices about the direction of their lives even in the context of forced displacement and loss.

Search for meaning: Despite the severity of their experiences, participants engaged actively in processes of meaning-making, drawing on memory, identity, and values to make sense of their life narratives.

Perception of trauma alongside recognition of strengths: The method enabled participants to acknowledge and name traumatic events (the war, bereavement, flight) while simultaneously identifying the resources and

coping capacities that had allowed them to survive and continue.

Restoration of the natural flow of life: Several participants articulated the experience of the intervention as helping to "restore the natural water movement" a metaphor for the reintegration of life force that is central to the CIM® framework.

What is important to you when you look at the river of your life?	Generalisation to the level of abstraction
Paraphrasing	Person-orientation, connectedness
all the people in my life	
I always have a choice and it is up to me to decide where the river flows and how long the water cycle lasts.	self-determination
People who stand by me and support me.	People orientation
People have a harder time than I do	Appreciation of own situation/situational orientation
Fear of being left without support	Emotional neediness
Love, child, friends, support from family	Value orientation, person-orientation
People are the most important thing	Person-orientation
steady flow of life, critical life events	Appreciation of own situation/situational orientation, feeling of security in the past, recognising critical events in life
objective list of life events	Sense of reality

Fig. 2: Reflections on Your Life's Journey

The findings of this study provide empirical support for the effectiveness of the *Concept of Integrative Methods®* as a tool for empowerment in social work with traumatised populations. Several dimensions of this effectiveness merit further discussion. The interview data are systematically reduced through paraphrasing and generalisation, thereby elevating the level of abstraction and rendering the content analytically accessible. The following presents a selection of analytical units for illustrative purposes.

What do these treasures on the banks of the river of life mean to you?	Generalisation to the level of abstraction
Paraphrasing	
Being embedded in a social context, meaning in life	search for meaning
Belief in own life plan, own life plans	own life plan, self-reflection
Recognising opportunities	Self-organisation of life, self-confidence, perception of own resources
Energy through child-orientation	Family Orientation
Motor of life	Self-efficacy, future orientation, motivation to persevere
Meaning of life and optimism, wish fulfilment, self-discovery	Positive lifestyle, motivation and future orientation, perception of strength

Fig. 3: Meaning of Life's Treasures

First, the study confirms the relevance of a strengths-based, resource-oriented approach for working with individuals who have experienced severe trauma. In line with the theoretical premises of CIM®, the *River of Life method* did not invite participants to dwell primarily on deficit or suffering, but to

identify and articulate the resources relational, spiritual, personal that have sustained them. This orientation proved both therapeutically meaningful and practically feasible within a group setting.

Second, the use of image-based externalisation proved particularly powerful in a cross-cultural, multilingual context. The visual and symbolic dimensions of the method allowed participants to express experiences and meanings that might be difficult to articulate verbally, especially in a second language. The availability of Ukrainian-speaking facilitators was a crucial enabling condition for the study, and the results underscore the importance of linguistically and culturally appropriate delivery.

Third, the concept of resonance understood as the mutual, lively contact between the individual and their environment emerged as a central mechanism of therapeutic change within the CIM® framework. Participants who engaged deeply with the River of Life method appeared to re-establish a sense of resonant relationship with their own life narrative and with the people and values that mattered to them. This finding is consistent with Rosa's (2019) theoretical account of resonance as a fundamental dimension of human wellbeing.

Fourth, the study has implications for the professional identity and self-understanding of the socialworker not as a therapist who corrects pathology, but as a companion who creates conditions for integration and empowerment. This reframing has practical consequences: social workers operating within the CIM® framework reported a heightened sense of the value and significance of their own contribution a dimension of professional wellbeing that deserves further investigation.

Beyond the qualitative preliminary study described above, the effectiveness of CIM® can be further substantiated through evidence drawn from practical application. To this end, the following case example serves to illustrate the low-threshold accessibility of the approach and its direct applicability in practice.

6 A Case study of CIM®: Tam

The inclusion of a concrete case example is of considerable scholarly significance, insofar as the practical applicability and transferability of the proposed methodologies of CIM® become most compellingly evident when illustrated through a specific, tangible instance, allowing the reader to gain a more nuanced and contextualized understanding of its real-world implementation.

In the present case, the sociotherapeutic developmental support of 21-year-old Tam will be described, who has been living within the youth welfare system since the age of 16. Following an initial period of full residential care, she later transitioned into supported independent living (Betreutes Einzelwohnen, BEW), which she shares with a female friend. Her two younger siblings continue to live with their mother. Her father is deceased, representing a profound turning point in Tam's life. Prior to this, the family situation had been characterized by conflict, neglect, and limited parental caregiving capacity, requiring Tam to assume substantial responsibility for her siblings at an early age. In addition, she experienced bullying during her school years. At the time of first contact at the age of 19, case records indicated multiple psychological stressors. Tam presented with significantly low body weight and restrictive eating behavior, raising suspicion of an eating disorder. Furthermore, severe anxiety, depressive symptoms, and social withdrawal were documented. Her circadian rhythm was markedly disrupted; she remained awake predominantly at night, spending extensive periods playing computer games, while sleeping during the day in a permanently darkened room. Commitments, such as appointments, were frequently not maintained, and integration into school, vocational training, or broader social contexts initially appeared impossible.

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were documented. Her circadian rhythm was markedly disrupted; she remained awake predominantly at night, spending extensive periods playing computer games, while sleeping during the day in a permanently darkened room. Commitments, such as appointments, were frequently not maintained, and integration into school, vocational training, or broader social contexts initially appeared impossible. The initial encounters were characterized by reservation and emotional distance. Tam remained in her darkened room and initially addressed the social worker formally. Through a non-judgmental and accepting stance, the conscious avoidance of performance pressure, and openness to resonant moments, the social worker gradually succeeded in establishing trust. Within their conversations, particular emphasis was placed on Tam's personal resources, which thereby became increasingly visible, including humor, creativity, intelligence, and empathy. Over time, the interactions developed into a stable therapeutic relationship characterized by increasing lightness, emotional safety, and situationally differentiated self-disclosure. As the process progressed, the social worker applied imaginative and resource-oriented interventions derived from the Concept of Integrative Methodology (CIM®/KIM®). Central to this work was the use of inner imagery as an analogy for self- and world-perception. Tam metaphorically described herself as a "vampire" who found protection in darkness and experienced light and social contact as threatening. This image was understood as a meaningful expression of her subjective reality and was therapeutically explored and further developed in a solution-oriented manner. A symbolic "protective cloak" was created, enabling her to take initial steps into the external world. Rituals thereby provided safety and structure within what Tam experienced as an overwhelming and unpredictable world. From a developmental psychological perspective, this approach corresponds to early childhood developmental stages in which rituals organize the experience of the world into a secure structure. The social worker therefore offered Tam a ritualized action

through which she could realize her intention of leaving the room protected by the symbolic cloak. The conscious "crossing" of an imaginative boundary supported Tam in regulating her anxiety. Passing through the doorway became a ritual act through which she enacted determination and agency. Subsequently, Tam first succeeded in integrating walks together with the social worker and later established regular independent walks within her daily routine. Over time, she developed positively connoted inner images associated with light, openness, and safety, indicating a transformation of her inner experiential world. Another central component of the intervention involved addressing anxiety-provoking fantasies, which Tam described as "ghosts" visiting her at night. Through careful therapeutic attunement and imaginative methods in accordance with the Inner Dynamic Developmental Experience (IDEE) framework within KIM®, strategies for coping with these fears were developed. Concrete supportive tools were also utilized, such as a light projector that created a calming atmosphere and gradually replaced her previous nocturnal media consumption. As the process continued, Tam succeeded in symbolically externalizing these threatening images and assigning them a new and less fear-laden "place," contributing to an increased sense of safety. Within the process of biographical reflection—which became possible on a verbal and reflective level following these positive sociotherapeutic experiences—it became evident that Tam had carried extensive responsibility within her family system over many years. She recognized that her current social withdrawal could also be understood as a response to this prolonged burden. In this context, the symptomatic function of social withdrawal was explored through a focus on underlying personal values using the methodological approach known as "the Reuse." Tam came to understand that her behavioral patterns—particularly withdrawal, anxiety, and the need for control—served a protective and security enhancing function. At the same time, she recognized that other central values, such as participa-

tion, connectedness, and interpersonal relationships, were equally important to her but had been significantly restricted by her withdrawal patterns. As she increasingly experienced a sense of safety, she decided to pursue these previously constrained values more actively. On this basis, Tam gradually developed new perspectives for her life. She began to orient herself increasingly toward the outside world and to establish social relationships. Regular activities, such as excursions with her mother and roommate or meetings with friends, enabled positive relational experiences. Through these new experiences, she expanded her behavioral repertoire and was able to experience herself in resonance with her environment. This contributed substantially to the stabilization of her self-concept and the consolidation of her identity. In addition, the externalizing method of the “*Life Flow*” was employed in order to reflect biographical interconnections and make personal resources visible. Tam engaged very successfully with this method. Throughout the process, a high degree of reliability in collaboration became evident, as she no longer missed appointments and experienced the meetings as meaningful and significant.

In summary, Tam initially demonstrated a profoundly negatively shaped self- and world-concept associated with a fundamental mistrust toward herself and her environment. Her social withdrawal was understood as a functional coping strategy protecting her from an external world experienced as threatening and overwhelming. The professional relationship established within the sociotherapeutic support according to KIM© represented, for the first time, a reliable and trustworthy access point to the “outside world.” Rather than acting in an institutionally controlling manner, the relationship conveyed trust and acceptance. Instead of evaluative and instructive expert dominance, the intervention emphasized discovery rather than pathology-oriented questioning and action, a resource-oriented approach, and a focus on meaningful and coherent values that strengthened Tam and provided motivation to

gradually relinquish her withdrawal patterns. Within the framework of the *Concept of Integrative Methodology* developed by Hanna E. Schumann, the transformation of Tam’s self-concept can be understood as resulting from resonant relational experiences within a developmental space that communicated acceptance and validation so tangibly that Tam gradually dared to become emotionally accessible and increasingly open herself to others. In the Concept of Integrative Methodology, Hanna E. Schumann explains the essential functions of developmental spaces through the metamodel of central functions for development. As illustrated by this case, these include:

1. the central importance of relationship as a new level of self-experience,
2. the willingness to understand the client’s subjective situation,
3. openness toward the client’s subjective reality without instruction or correction, taking it as the foundation for sociotherapeutic action,
4. the use of externalization through analogies,
5. engagement with analogical subjective reality,
6. resource orientation,
7. solution orientation,
8. the transfer of therapeutic experiences into everyday life,
9. and the achievement of developmental success.

The following section provides an overview of this process in order to facilitate the identification of the key functions within the subsequent model.

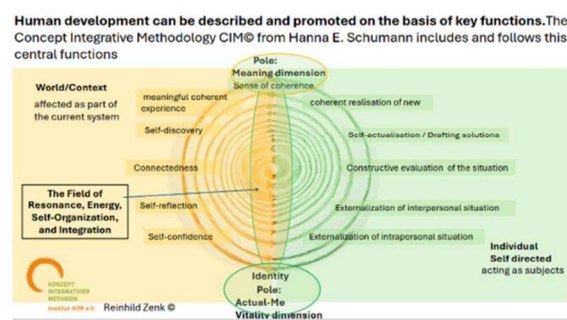


Fig. 4: Metamodel of the Central Functions for Development

The theoretical model in **Fig. 4** represents essential stages that constitute a developmental process. It is divided into two sides. The green side describes the process of the subject from the innerside toward the challenges in the world.

Central function Externalisation of Intrapersonal situation can be shown by Tam who experiences herself as a “vampire.” Avoiding the daylight, awake at night.

The Central function of Externalisation of Interpersonal situation is also known to both Tam and the sociotherapist: other people perceive her as incapable of working, disturbed, and ill. However, the sociotherapist focuses on her resources.

Within the *Central function constructive evaluation with the situation*, she engages with Tam’s challenges within her life situation, such as her fears of leaving the house and the “ghosts” she experiences. Sociotherapy emphasizes connection and relationships both relationships with other people and with the surrounding environment.

Following the *Central Function of self actualisation and drafting solutions* Tam develops the imaginative concept of a protective cloak that she experiences as surrounding her and providing a sense of safety. Furthermore, she perceived the ritual of consciously stepping through the doorway as a symbolic threshold into the external world as a meaningful and supportive representation that strengthened her determination and sense of agency.

Within the *Central function of the coherent realization of the new*, Tam succeeds in implementing her solution-oriented ideas. In doing so, she experiences herself as self-efficacious, while the world she encounters proves to be surprisingly positive, which significantly improves her attitude toward the external world. She begins taking regular walks and also starts arranging social meetings.

Tam’s development can now be further traced on the yellow side of the model. The yellow side captures the direction from the outside inward that is, from being affected by the world toward the inner self, moving from lived experience in the world toward identity formation. Tam increasingly experiences herself positively within the world, perceiving herself as meaningfully touched by life and as moving along a purposeful path. Experiencing herself in such a meaningful and coherent context fulfills the *Central function of the experience of meaning*.

She experiences herself as perceived both by herself and by the external world, with which she is now able to establish connection and experience resonance: *Central function self-discovery*.

This process conveys to her that she is connected to the world and to her sociotherapist. This fulfills the *Central function of connectedness*.

This experience leads her to a new recognition of her expanded possibilities for action. she comes to the *Central function of self-reflection*.

Her self awareness of this process culminates in assuming self responsibility for these new own possibilities. It strengthens her: *Central function self-confidence*.

Subsequently, these experiences become integrated as newly expanded characteristics within Tam’s self-concept. She realizes that she is capable of overcoming her fears, that she can and wishes to go out into the world. This broadens and transforms her identity.

As a result, her *intrapersonal situation* also changes, causing the developmental spiral to move back toward the green side of the model. The *interpersonal situation* has thus fundamentally shifted. Tam is now perceived as unexpectedly capable of development and growth. Strengthened by these experiences, additional challenges can once again be addressed within the *Central Function of self actualisation and drafting solutions*, allowing further solutions to emerge, which in turn lead to new coherent experiences, continuing the developmental process further.

The Concept of Integrative Methodology enables, within each central function of development, x to the power of n possibilities though not arbitrary ones. These possibilities must, in accordance with the underlying view of the human being, be oriented toward:

- fostering resonance between the person, their own unique form of vitality, and the world,
- corresponding to the individual’s capacities and possibilities,
- relating to the reason for the collaborative process,

- and contributing to the respective central function of development currently at hand.

In this way, a maximum degree of fit and relational attunement emerges precisely the two factors that research has consistently identified over many years as the most stable predictors of successful developmental processes.

The socialworker came to Tam as a part of the world outside of her, the yellow side. She was the one, coming into Tams dark room, which gives an impression of her mood, her intrapersonal situation. In this encounter with the sociotherapist and social worker she experienced herself during these visits as accepted, not judged, not forced, not consulted. This circumstance gave her the possibility for a resonant feeling with the social worker. A resonant experience means to be connected, which gives human being a positive selfreflection, selfrealisation and selfconfidence. That feeds the identity, how you see on the running circle. Up from this Tam became more brave and could leave her room with an externalised permission to cross the door using a ritual for it. So they did externalize her subject view of her intrapersonal situation. With help of a constructive evaluation she used the idea of crossing the door to go outside very consciously after the positive experiences with the socialworker.

7 Results of sociotherapeutic work with CIM®

The findings provide empirical support for the effectiveness of *the Concept of Integrative Methods®* as an empowerment-oriented approach in social work with traumatised populations. The study highlights four key aspects.

First, the results confirm the value of a strengths-based and resource-oriented approach. Rather than focusing primarily on deficits or suffering, the River of Life method enabled participants to identify relational, spiritual, and personal resources that supported them through traumatic experiences.

Second, image-based externalisation proved particularly effective in a cross-cultural and multilingual context. The visual and

symbolic elements of the method facilitated the expression of experiences that were difficult to verbalise, especially in a second language. The involvement of Ukrainian-speaking facilitators further emphasised the importance of culturally and linguistically appropriate support.

Third, resonance emerged as a central mechanism of change within the CIM® framework. Participants appeared to reconnect with their life narratives, relationships, and personal values, supporting Rosa's (2019) understanding of resonance as fundamental to human wellbeing.

Fourth, the study has implications for the professional identity of social workers. Within the CIM® framework, social workers act less as pathology-focused therapists and more as facilitators of integration and empowerment, which may also strengthen their own sense of professional meaning and wellbeing.

The study nevertheless has limitations. The sample was relatively small and homogeneous, consisting of 24 Ukrainian-speaking mothers in one regional context. The findings are based mainly on self-reported data, and no control group was included. Future research should therefore involve larger and more diverse samples, longitudinal designs, and standardised measures of trauma and wellbeing. Possible theoretical and practical conclusions arising from the process of analysis and interpretation should be formulated.

8 Discussion

The most important results are compared with other research findings to identify similarities and differences that would demonstrate the ability to generalize the results to the population.

Sociotherapy is a form of treatment for people in complex life situations whose support needs exceed the standard range of psychosocial care services. Sociotherapists work with:

- individuals whose mental health condition has not improved sufficiently through psychiatric or psychothera-

peutic treatment approaches to enable an autonomous and self-determined life;

- individuals whose illness-related impairments such as heightened vulnerability, anxiety, and reduced functional capacity lead to resignation, feelings of insufficiency, avoidance of social contact, or difficulties in interpersonal relationships;
- individuals suffering from the secondary consequences of mental illness, including stigmatization, social exclusion, and isolation, placing them at risk of losing connection to their social environment;
- individuals who are difficult to engage through conventional psychiatric and psychotherapeutic services, often referred to as “hard-to-reach” clients, who may distrust psychosocial institutions due to distressing previous experiences;
- individuals in crisis situations requiring immediate support and stabilization.

Professionals working in sociotherapy require modes of practice and methodological approaches that are responsive to the individual person within their specific life situation. This demands a broad repertoire of relationship-building and process-oriented methods aimed at reactivating existing resources and fostering the development of new ones. The overall goal is to support forms of life organization that contribute to improved emotional balance, enhanced social competencies, and greater integration within the person’s living environment.

From a broader perspective, the concept of Integrative Methodology presented here offers a theoretical and practical framework that, already at the level of its anthropology, conceptualizes both the intrapersonal dimension and the systems surrounding the individual in terms of their synergistic interaction. The “external world” thereby includes both the concrete social lifeworld and the cognitive-symbolic world to which the person relates and from which meaning is derived.

The inner dimension introduces an aspect that, in this form, has not been comparably articulated in other approaches: the notion of an individual and unique vitality as the deepest personal core, characterized by an immanent striving for resonance, aliveness, and connectedness as fundamental qualities of lived experience. This depth dimension stands as an inner pole in relation to the encompassing system or existential context of the person that is, the world experienced as meaningful and emotionally significant. In this respect, parallels can be drawn to Aaron Antonovsky’s concept of the *sense of coherence*.

The model therefore spans a relational field between these two poles in which experiences of resonance facilitate processes of integration that enrich and strengthen the existing inner system. The case of Tam illustrates this on the level of shared everyday interactions and individualized interventions that engage the client’s inner reality and thereby enable developmental processes.

As a specific intervention, the River of Life Model is introduced. Using the metaphor of one’s life as a flowing body of water enriched along its banks with “treasures of life” gained through positive experiences, the model reframes even difficult phases of life as passages that have been endured and integrated up to the present. In this sense, the model functions as an empowering, resource-oriented approach to reinterpreting one’s biography.

Specific intervention models are important because they serve as vehicles through which overarching therapeutic factors become effective: “the common factors do their work.” The KIM approach offers multiple models and strategies aimed at activating these common factors (Sprenkle & Blow 2004, p. 126).

Both exemplary cases presented here share a common feature: they provide individuals with substantial freedom to be as they are and to decide for themselves what they wish to externalize and engage with. Clients are encouraged to follow their own processes of insight and understanding without interpretive dominance by professional experts. In this way, developmental processes

in the sense of self-organization appear to emerge particularly for individuals who are resigned, therapy-fatigued, or considered “*beyond treatment*.”

When interventions are highly attuned to the person and situation, a qualitatively strong working alliance consistently develops in which both client and practitioner can experience themselves as effective. This corresponds closely with findings from psychotherapy research on common therapeutic factors. However, no finding in psychotherapy research has been confirmed as consistently as the relationship between the therapeutic alliance and psychotherapy outcome. The positive association between a strong therapeutic relationship and therapeutic success has been reinforced by several meta-analyses (e.g., Horvath & Simmonds 1991; Martin, Garske & Davis, 2000; Norcross 2011).

9 Recommendations for theory and practice

There is the need to integrate patient, therapist, procedural, and relationship factors as the major priority for future research (Beutler et al., 2004, p. 292). The meta-model of the Central Functions for Development within the Concept of Integrative Methodology formulates, at an overarching level, those functions considered essential for successful therapeutic developmental processes. Several researchers have emphasized the need to move beyond the fragmentation of therapeutic schools toward an understanding of shared therapeutic principles. Thus, George K. Lampropoulos (2000) stated that behind the effect of different specific techniques, the same general principle of change may be hidden.

Similarly, Klaus Grawe (1995), following a comprehensive analysis of psychotherapy studies, identified four common therapeutic factors: problem activation, resource activation, motivational clarification, and problem mastery.

Schumann (1980), within this model, moves beyond the traditional orientation toward therapeutic schools and instead conceptualizes the integration of therapeutic methods within a unified developmental

framework. In a developmental spiral, she integrates both the active, creative agency of the individual and the experiential dimension of the person as part of a community.

The central functions described on the side of the individual show certain parallels to Grawe's four factors while extending considerably beyond them. Consequently, the model encompasses the sociotherapeutic process as a whole while simultaneously providing orientation without being restricted to fixed interventions. Instead, interventions are allowed to emerge in response to the specific situation, thereby creating space for synergy and selforganizing developmental processes among the persons involved. The literature review by GrenCavage and Norcross (1990) further demonstrates that the majority of common therapeutic factors described in the literature can be understood as principles of development directed toward therapeutic change processes.

In this way the Concept of Integrative Methodology® realize impulse for development with an interesting theory and practice of a common principle, which renews power and energy of people. It should be more used in the field of sociotherapy and social work and also should the impact be examined in more studies. interpretation.

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