

# My Integrated Therapeutic Approach

My work is based on an integrated therapeutic approach grounded in evidence-based psychotherapy and shaped by a warm, respectful, and collaborative understanding of human suffering. I draw in particular on Cognitive Behavioural Therapy (CBT), Compassion Focused Therapy (CFT), and Metacognitive Interpersonal Therapy (MIT), integrating these approaches according to the person's needs, history, and goals. The aim is not only to reduce symptoms, but also to explore and address the underlying emotional, cognitive, and relational patterns that sustain them, helping people understand themselves more deeply, strengthen emotional balance, and create lasting psychological change.

**Cognitive Behavioural Therapy (CBT)** helps people understand how thoughts, emotions, bodily reactions, and behaviours influence one another. Often, distress is not caused only by what happens to us, but also by the meaning we give to events, the expectations we develop, and the patterns we repeat under stress. CBT helps identify these patterns and work with them in a practical, structured, and collaborative way. It can be especially helpful for anxiety, depression, stress-related difficulties, burnout, low self-confidence, emotional dysregulation, and other forms of psychological distress.

**Compassion Focused Therapy (CFT)** is particularly helpful when suffering is shaped by harsh self-criticism, shame, insecurity, or a persistent sense of not feeling good enough. CFT helps people develop a more balanced, supportive, and resilient relationship with themselves. This does not mean lowering standards or becoming passive. It means strengthening inner stability, emotional regulation, and the capacity to face difficulty without turning against oneself. For many people, this becomes an essential foundation for recovery and change.

**Metacognitive Interpersonal Therapy (MIT)** is especially useful when difficulties are linked to recurring interpersonal patterns, inner conflict, or long-standing ways of relating to oneself and others. It helps people better recognize and understand their own mental states, such as thoughts, emotions, wishes, fears, and intentions, as well as those of others. It also helps identify interpersonal cognitive cycles: recurrent relational patterns in which certain expectations, fears, and protective strategies can unintentionally recreate the very difficulties a person is trying to avoid. By making these cycles clearer and more understandable, therapy can open space for new ways of experiencing oneself, relating to others, and responding to emotional pain.

In practice, therapy is always tailored to the individual. Some people need a focused and practical approach to a current difficulty. Others need a deeper exploration of emotional patterns, relationships, and personal history. In all cases, the work is grounded in careful listening, clinical rigor, and a respectful therapeutic relationship in which people can feel safe, understood, and supported.

Particular importance is given to confidentiality, privacy, and professional secrecy. For therapy to be truly helpful, people need to know that they can speak freely within a secure, discreet, and ethically protected space.