

Exploring Identity Shifts in Individuals Undergoing Long-Term Psychodynamic Therapy

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ABSTRACT

This study aimed to explore the lived experiences of individuals undergoing long-term psychodynamic therapy. This qualitative research employed a phenomenological design to gain an in-depth understanding of identity transformation in therapy. Data were collected through semi-structured interviews with 24 participants from Germany, all of whom had been engaged in psychodynamic therapy for at least two years. Participants were recruited through therapy clinics and online mental health platforms using purposive sampling. The interviews, lasting between 60 to 90 minutes, were transcribed verbatim and analyzed thematically using NVivo software. The process of theoretical saturation was achieved after the 24th interview, and data analysis involved iterative coding and theme development guided by constant comparison. Analysis revealed five major themes reflecting the participants' experiences of identity shifts: Emerging Self-Awareness, Transformation of Relational Patterns, Integration of Past and Present, Emotional Regulation and Expression, and Therapeutic Relationship as Catalyst. Subthemes included recognition of inner conflicts, emotional insight, boundary setting, reframing childhood, managing emotional outbursts, and relational learning. Participants described a growing sense of coherence, self-continuity, and emotional resilience as therapy progressed. They attributed these changes to the reflective, safe, and relationally rich environment of long-term psychodynamic therapy, where insight, emotional processing, and narrative reconstruction facilitated profound identity development. The findings suggest that long-term psychodynamic therapy supports multidimensional identity transformation by fostering emotional awareness, relational restructuring, narrative integration, and self-reflection. The therapeutic relationship plays a pivotal role as both a mirror and catalyst for these changes. These insights underscore the value of sustained psychodynamic work in addressing complex identity issues and highlight its relevance for individuals with developmental and relational trauma histories.

Keywords: psychodynamic therapy, identity transformation, long-term psychotherapy.

1. Introduction

The exploration of identity transformation in individuals engaged in long-term psychodynamic therapy has garnered increased attention as the therapeutic process unfolds over time. Identity, conceptualized as the internal narrative and psychological framework through which individuals understand themselves, is not static but shaped by developmental, relational, and unconscious processes. Psychodynamic therapy, with its emphasis on insight, emotional processing, and transference, provides a unique context for such transformations to emerge and be reflected upon. Within the psychodynamic paradigm, identity is not merely a fixed essence but a dynamic construction influenced by unconscious conflicts, early attachment experiences, and relational templates that persist across time and context (Petriglieri, 2020). As individuals engage in deep, sustained therapeutic work, their sense of self often shifts in response to newly uncovered material and the reparative relational experiences within the therapeutic setting (Leichsenring et al., 2018; Seiler, 2025).

Long-term psychodynamic therapy offers a distinctive opportunity to trace how narrative identity evolves. Identity is fundamentally story-based, and psychodynamic therapy functions as a dialogical space in which these personal stories can be unpacked, challenged, and reconstructed (Timberlake & Fesel, 2023). The development of narrative coherence—where individuals can link past experiences with present meanings—has been identified as a critical mechanism for psychological growth, especially for those with identity disturbances rooted in early developmental trauma or disorganized attachment (Amodeo et al., 2017; Basten & Touyz, 2019). A central aim of psychodynamic therapy is to enhance the individual's capacity to reflect on and integrate disparate aspects of the self, which is essential for fostering a coherent and resilient identity (Leichsenring et al., 2018).

The therapeutic relationship plays a pivotal role in catalyzing these identity shifts. Psychodynamic theory emphasizes transference—the process by which clients project relational patterns onto the therapist—as a means of gaining insight into unconscious dynamics (Ardiyani & Karimah, 2021). This relational encounter becomes a mirror for the self, where the therapeutic alliance offers a secure base from which the client can explore previously defended or fragmented parts of their identity (Schechter et al., 2019). In this regard, the therapist does not merely observe identity reconstruction but participates in its co-creation through

relational attunement, empathic interpretation, and containment of overwhelming affect (Barnard & Flotman, 2020; Harari & Grant, 2022).

Empirical research supports the notion that long-term psychodynamic work fosters identity change, particularly among individuals with complex psychopathology. For instance, in individuals diagnosed with personality disorders, sustained engagement in therapy has been shown to reduce dissociative experiences and promote the emergence of a more integrated self-representation (Haskayne et al., 2014). The therapeutic encounter provides a structure for patients to experience themselves differently, often by disrupting maladaptive internalized roles and relational scripts that have been operative since childhood (Rowe, 2023; Schruijer & Curşeu, 2014). Furthermore, the safe and consistent relational container of therapy enables individuals to confront internal contradictions and develop a more stable narrative identity, even in the face of psychological fragmentation or existential ambiguity (Katzman, 2018; Malark, 2017).

The experience of identity transformation in therapy is also deeply influenced by sociocultural and contextual factors. Individuals do not form their identities in a vacuum; they do so within particular cultural, familial, and institutional structures that shape their understanding of who they are allowed to be (Wijaya et al., 2024). Psychodynamic work, particularly when practiced with a multicultural lens, can help surface and challenge internalized societal messages and oppressive dynamics that have constrained self-development. This is especially relevant in cases where individuals have had to adopt false or defensive identities to survive in rigid or invalidating environments (Petriglieri, 2020). As these identities are deconstructed in therapy, a more authentic and fluid sense of self can emerge.

Systems psychodynamic theorists have further emphasized that identity is embedded within larger institutional and relational systems. For example, in work settings, professionals often face identity dilemmas as they navigate competing expectations and internalized performance standards (Cilliers, 2018). These dynamics, while often implicit, become salient in therapy when individuals begin to question the roles they have unconsciously accepted or performed in their social worlds. Psychodynamic approaches are particularly equipped to explore these identity dilemmas at both the intrapsychic and systemic levels, offering a holistic understanding of personal transformation (Barnard & Flotman, 2020). Therapy thus becomes a space not only for emotional healing but also for

social and existential inquiry into the forces that have shaped identity across time.

From a developmental perspective, long-term psychodynamic therapy is aligned with identity maturation processes that unfold over the lifespan. As individuals age and encounter major life transitions—such as career changes, relationship shifts, or existential crises—questions of identity often resurface with renewed urgency (Seiler, 2025). Therapy provides a reflective space where these transitions can be processed not merely as disruptions but as opportunities for growth and reorganization of the self. The recursive nature of identity development—where new experiences prompt reinterpretation of past narratives—illustrates the dynamic, non-linear path of psychological change that psychodynamic therapy seeks to facilitate (Ivey & Deans, 2019).

One of the defining features of psychodynamic therapy is its commitment to the long arc of transformation. While short-term interventions often focus on symptom relief, long-term therapy attends to the deeper layers of identity construction and meaning-making. This extended temporal frame allows for a more thorough exploration of unconscious processes and the development of insight, which in turn supports sustainable change (Haskayne et al., 2014; Levenson et al., 2023). In this regard, therapy is not simply about treating pathology but about enabling clients to reclaim agency over their internal narratives and psychological functioning (Schechter et al., 2019).

The present study aims to explore how individuals undergoing long-term psychodynamic therapy experience shifts in identity over time.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a qualitative research design with a phenomenological approach to explore the lived experiences of individuals undergoing long-term psychodynamic therapy and the corresponding shifts in their sense of identity. The purpose of this design was to gain a deep, contextual understanding of how participants perceive and narrate their evolving self-concept over the course of sustained therapeutic engagement. The research sample consisted of 24 individuals from Germany who had been engaged in psychodynamic therapy for a period of at least two years. Participants were selected through purposive sampling to ensure relevance to the research objective, focusing on those with sufficient therapeutic experience to reflect on identity-

related changes. Recruitment was facilitated via referrals from psychodynamic therapists, as well as advertisements in psychotherapy clinics and online mental health communities. Theoretical saturation was achieved after conducting interviews with 24 participants, at which point no new conceptual themes were emerging from the data.

2.2. Data Collection

Data were collected using in-depth semi-structured interviews, allowing for both consistency across interviews and flexibility to follow emergent themes specific to each participant's therapeutic experience. Each interview lasted between 60 to 90 minutes and was conducted either in person or via secure video conferencing platforms, depending on participant preference and availability. The interview guide consisted of open-ended questions focusing on participants' self-perception before and during therapy, changes in internal conflicts and self-understanding, and reflections on relational patterns and emotional experiences. All interviews were audio-recorded with the participants' consent and transcribed verbatim for analysis. Participants were assured of confidentiality and the voluntary nature of their involvement, and all ethical protocols approved by the institutional review board were observed.

2.3. Data Analysis

Data analysis was conducted using thematic analysis within the NVivo software environment, allowing for systematic coding, categorization, and interpretation of the data. The process began with repeated readings of the transcripts to achieve immersion, followed by open coding to identify initial meaning units. These codes were then grouped into broader themes that captured patterns of identity transformation across the dataset. Constant comparison was applied throughout the analysis to ensure coherence within and across cases, and emerging interpretations were continuously refined. Reflexivity was maintained by the researchers through analytic memoing and peer debriefing sessions to minimize interpretive bias and to enhance the credibility and depth of the findings.

3. Findings and Results

The study sample consisted of 24 participants (14 women and 10 men) residing in various cities across Germany, all of whom had been engaged in long-term psychodynamic therapy for a minimum of two years at the time of the

interview. Participants ranged in age from 29 to 61 years, with a mean age of 43.7 years. In terms of educational background, 8 participants held a university degree, 10 had completed vocational training, and 6 had a secondary school diploma. Regarding employment status, 16 participants were employed full-time, 5 were working part-time, and 3 were

unemployed at the time of data collection. All participants had voluntarily consented to participate and were recruited through psychodynamic therapy clinics, professional referrals, and online mental health forums. The duration of psychodynamic therapy among participants ranged from 2 to 9 years, with an average length of 4.8 years.

Table 1

The Results of Qualitative Analysis

| Category | Subcategory | Concepts |
|---------------------------------------|------------------------------------|--|
| Emerging Self-Awareness | Recognition of Inner Conflicts | confusion, emotional tension, self-doubt, internal struggle |
| | Emotional Insight | naming feelings, emotional triggers, emotional vocabulary |
| | Increased Reflectivity | introspection, questioning past actions, examining assumptions |
| | Awareness of Defense Mechanisms | projection, denial, rationalization |
| | Identity Fragmentation | shifting roles, inconsistent self-image, role confusion |
| Transformation of Relational Patterns | Boundary Setting | assertiveness, saying no, personal limits |
| | Attachment Revisions | redefining closeness, recognizing dependency, secure base |
| | Improved Empathy | seeing others' views, less blaming, shared emotions |
| | Reevaluation of Past Relationships | childhood memories, parental bonds, romantic history |
| | Trust Development | gradual openness, reduced suspicion, testing trust |
| Integration of Past and Present | Shifting Social Roles | new group dynamics, peer role changes, family interactions |
| | Reframing Childhood | new narrative, reinterpreting trauma, acceptance of past |
| | Memory Reconstruction | lost memories, emotional recall, episodic clarity |
| | Breaking Generational Patterns | family repetition, new behaviors, conscious change |
| | Timeline Coherence | life story connection, past-present link, identity timeline |
| Emotional Regulation and Expression | Meaning-Making | sense of purpose, why it happened, growth narrative |
| | Narrative Coherence | storytelling, self-narrative, linking events |
| | Self-Continuity | stable self-image, identity over time, persistent values |
| | Managing Emotional Outbursts | anger control, reduced reactivity, delayed response |
| | Understanding Triggers | patterns of reaction, emotional cues, self-awareness |
| Therapeutic Relationship as Catalyst | Healthy Expression | verbalizing feelings, safe outlets, non-destructive release |
| | Tolerance of Ambivalence | mixed feelings, uncertainty, living with paradox |
| | Emotion-Mind Integration | thinking-feeling balance, mindfulness, emotional logic |
| | Therapist as Mirror | validation, reflecting back, seeing self through therapist |
| | Secure Therapeutic Base | safety, trust, non-judgment |
| | Transference Awareness | past projections, therapist role confusion, pattern repetition |
| | Therapeutic Confrontation | naming patterns, challenging narratives, provoking insight |
| | Relational Learning | new interactions, attachment in therapy, corrective experience |

The data analysis revealed five overarching categories that encapsulate the identity shifts experienced by individuals undergoing long-term psychodynamic therapy. These include *Emerging Self-Awareness*, *Transformation of Relational Patterns*, *Integration of Past and Present*, *Emotional Regulation and Expression*, and *Therapeutic Relationship as Catalyst*. Each category includes several subcategories that reflect distinct yet interrelated aspects of identity transformation.

Under the category of *Emerging Self-Awareness*, participants described a growing *Recognition of Inner Conflicts*. Many reflected on the ways therapy had brought previously unconscious contradictions to light. One participant shared, “I always thought I was confident, but in

therapy, I saw how scared I really am of rejection.” Concepts such as confusion, emotional tension, self-doubt, and internal struggle were frequently noted, highlighting the internal dissonance uncovered during therapy. Another participant remarked, “There was this tension inside me I couldn’t name before. Now I can see it’s fear and anger fighting each other.”

The subcategory of *Emotional Insight* was marked by participants’ enhanced ability to label and understand their emotions. For instance, one participant noted, “I used to say I was just ‘fine’ or ‘not okay,’ but now I can tell if I’m feeling sadness, disappointment, or shame.” This emotional vocabulary, alongside recognition of emotional triggers, facilitated a more nuanced self-understanding. Participants

described feeling more connected to their emotions, stating that “naming what I feel helps me not run away from it anymore.”

In *Increased Reflectivity*, participants reported an expanded capacity for introspection and questioning of past actions and assumptions. A participant explained, “I never used to think about why I react a certain way—now I catch myself and ask, what’s really going on here?” This reflective stance was central to identity transformation, fostering the ability to examine long-standing patterns and underlying motivations.

Participants also reported heightened *Awareness of Defense Mechanisms*. Mechanisms like denial, projection, and rationalization became increasingly transparent as therapy progressed. “I realized how often I blame others to avoid looking at my own guilt,” said one participant. Another reflected, “I see now how I used to rationalize everything to avoid feeling weak.”

The final subcategory in this theme, *Identity Fragmentation*, captured experiences of feeling split between different roles or self-images. One participant shared, “Sometimes I feel like a different person at work, at home, and in therapy. It’s like I’m still figuring out which one is really me.” This subcategory included concepts like role confusion, inconsistent self-image, and shifting identities as individuals navigated the integration of disparate parts of the self.

Within the category of *Transformation of Relational Patterns*, the subcategory of *Boundary Setting* revealed increased assertiveness and the ability to maintain personal limits. Participants recounted, “I learned to say no without feeling guilty. That’s new for me.” Another stated, “Setting boundaries used to feel selfish. Now it feels like self-respect.” These shifts in interpersonal dynamics signaled a restructuring of relational identity.

In the subcategory of *Attachment Revisions*, participants described changes in how they approached intimacy and dependency. “I used to think closeness meant losing myself,” said one participant. “Now I know I can be close without disappearing.” These shifts included redefinitions of closeness, recognition of unhealthy dependency, and the development of a secure base in relationships.

Improved Empathy emerged as participants became more attuned to the perspectives and emotions of others. “Before, I couldn’t see beyond my own pain,” said a participant. “Now I try to understand where others are coming from.” This subcategory reflected greater emotional attunement and reduced blame toward others.

In *Reevaluation of Past Relationships*, individuals revisited early relational experiences, particularly those with parents or romantic partners. One participant reflected, “I used to idolize my mother. In therapy, I saw how she hurt me by being emotionally absent.” Such insights often brought clarity to present-day relationship patterns and enabled healing.

The subcategory of *Trust Development* described a gradual reduction in suspicion and fear of intimacy. Participants noted, “I used to expect people to hurt me. Now I give them a chance.” Others expressed, “I’m still careful, but I’m learning to trust slowly.”

Lastly, *Shifting Social Roles* included reconfigurations in how participants engaged with family, peers, and communities. One shared, “In my group of friends, I used to be the quiet one. Now I speak up more, and it’s changing our dynamic.” These shifts reflected growing agency and self-definition in social contexts.

In the category *Integration of Past and Present*, the subcategory of *Reframing Childhood* involved reinterpretations of early life events. Participants moved from a place of victimhood or confusion toward greater understanding. “I stopped blaming myself for what happened when I was a child,” said one participant. “It wasn’t my fault.”

Memory Reconstruction included the recovery or reorganization of emotionally significant memories. “Things I hadn’t thought of in years came back,” one participant stated. “And now they make sense in a way they didn’t before.” Emotional recall and episodic clarity helped ground participants in a more coherent personal history.

In *Breaking Generational Patterns*, individuals recognized inherited behaviors or beliefs and consciously worked to disrupt them. “I used to yell like my dad did. Now I pause and respond differently,” a participant explained. These changes represented a commitment to growth and the refusal to perpetuate harmful legacies.

Timeline Coherence referred to the process of linking past, present, and future into a unified life narrative. One participant noted, “For the first time, my life feels like a story with a plot, not just random chapters.” This subcategory emphasized identity continuity over time.

In *Meaning-Making*, participants described a deepening sense of purpose and understanding in relation to their struggles. “I don’t regret the pain anymore—it shaped who I am,” said one participant. Another added, “It’s not just about surviving; it’s about making sense of what I’ve been through.”

Narrative Coherence involved the restructuring of personal stories into coherent self-narratives. “I’ve stopped telling the story of being broken. Now it’s a story of becoming,” shared one participant. This shift enabled a more empowered and stable self-image.

The final subcategory, *Self-Continuity*, described the emerging experience of a stable, enduring identity. Participants stated, “I feel more like myself across situations now,” and “There’s a core me that I can trust.”

In the category of *Emotional Regulation and Expression*, the subcategory of *Managing Emotional Outbursts* highlighted participants’ new strategies for handling intense emotions. “I still get angry, but I don’t explode like I used to,” one participant remarked. Concepts like delayed response and reduced reactivity were common.

Understanding Triggers described participants’ increased awareness of the cues that activated strong emotional reactions. “Now I know that when I feel dismissed, it’s not always about the present—it’s an old wound being touched,” one explained.

Healthy Expression emerged as participants learned more constructive ways of releasing emotions. “Crying in therapy used to scare me. Now it feels like relief,” shared one. Participants emphasized verbalizing feelings and finding safe outlets.

Tolerance of Ambivalence involved the ability to sit with mixed or conflicting emotions. “I can feel love and anger at the same time. That used to confuse me, but now it makes sense,” said a participant.

In *Emotion-Mind Integration*, participants described greater harmony between their cognitive and emotional processes. “I don’t just think about things now—I feel them too,” one said. Another shared, “Mindfulness helped me slow down and check in with my body.”

Finally, the category *Therapeutic Relationship as Catalyst* underscored the central role of the therapist in identity transformation. In the subcategory of *Therapist as Mirror*, participants spoke of gaining self-awareness through the therapist’s feedback. “It’s like she sees parts of me I didn’t know existed,” one noted.

In *Secure Therapeutic Base*, participants emphasized the emotional safety provided by the therapeutic relationship. “I could finally open up without fear of judgment,” one explained. This safety created a foundation for deep emotional work.

Transference Awareness captured moments when participants projected past dynamics onto the therapist. “I

got angry at her for no reason. Then I realized I was reacting to my mother, not her,” said one.

In *Therapeutic Confrontation*, participants described moments when the therapist challenged their narratives or behaviors. “He called me out on my victim story—and it was hard, but it helped,” one recalled.

The final subcategory, *Relational Learning*, reflected how participants used the therapy relationship as a model for healthier interactions. “What I learned with my therapist is now helping me connect better with others,” a participant shared.

4. Discussion and Conclusion

This study explored the lived experiences of individuals engaged in long-term psychodynamic therapy, focusing on the shifts in identity that occurred throughout their therapeutic journeys. The thematic analysis revealed five overarching categories that illuminate this process: Emerging Self-Awareness, Transformation of Relational Patterns, Integration of Past and Present, Emotional Regulation and Expression, and Therapeutic Relationship as Catalyst. These categories collectively demonstrate how sustained engagement in psychodynamic therapy fosters profound, multi-dimensional transformations in one’s sense of self.

The theme Emerging Self-Awareness encompassed participants’ increasing recognition of inner conflicts, emotional insight, and heightened reflectivity. This aligns with the core aims of psychodynamic therapy, which seeks to make unconscious material conscious and to deepen the individual’s capacity for introspection (Harari & Grant, 2022; Leichsenring et al., 2018). Participants’ accounts of identifying and naming previously diffuse emotional states and internal contradictions reflect what Levenson et al. describe as the development of “treatment rationale,” wherein clients begin to understand their psychological suffering within a coherent framework (Levenson et al., 2023). This mirrors findings by Ivey and Deans, who observed that training in psychodynamic modalities fosters a capacity for self-inquiry and emotional differentiation among therapy trainees (Ivey & Deans, 2019).

The theme of Transformation of Relational Patterns highlighted how therapy participants redefined their interpersonal boundaries, revised attachment patterns, and cultivated more empathic and trusting relationships. These relational shifts are well-documented outcomes of long-term psychodynamic treatment, particularly for individuals with

developmental trauma or personality disturbances (Haskayne et al., 2014). Barnard and Flotman found that professionals undergoing systems psychodynamic interventions similarly reconstructed their relational roles, developing more agency in their interactions with others (Barnard & Flotman, 2020). In this study, participants' ability to revise dysfunctional relational scripts supports the broader view of identity as a relational construction—one that evolves through reflective interaction and corrective emotional experiences (Petriglieri, 2020; Schechter et al., 2019).

The third theme, Integration of Past and Present, reflected how participants reinterpreted childhood experiences, reconstructed personal narratives, and developed a coherent sense of identity across time. This finding is congruent with psychodynamic theory's emphasis on narrative integration as a mechanism of change (Timberlake & Fesel, 2023). Several participants described developing a "timeline coherence," where their life stories began to make sense as interconnected rather than fragmented. Similar processes are documented by Timberlake and Fesel, who illustrated how psychodynamic therapy can foster the development of narrative identity in individuals with avoidant personality structures. Additionally, this integration of biographical meaning is fundamental to identity maturation and psychological well-being, as observed in systems psychodynamic coaching outcomes (Cilliers, 2018).

The theme of Emotional Regulation and Expression illustrated how clients developed more adaptive strategies to manage emotional arousal, express complex affective states, and tolerate internal ambivalence. These findings reflect the therapeutic value of affect regulation—a well-established goal in psychodynamic psychotherapy (Leichsenring et al., 2018). Participants' ability to verbalize emotions and delay impulsive reactions suggests a strengthening of ego functions and internal containment capacities. Basten and Touyz emphasized that a stable sense of self requires effective affective processing, and disturbances in emotional regulation are core features of identity fragmentation (Basten & Touyz, 2019). Participants' growth in this domain aligns with clinical observations that emotional literacy and regulation are not only outcomes of therapy but also prerequisites for identity coherence.

Lastly, the theme Therapeutic Relationship as Catalyst revealed the central role of the therapeutic alliance in facilitating identity change. Participants reported experiencing the therapist as a reflective mirror, a secure relational base, and a co-creator of meaning. These insights

resonate with the transference-focused dynamics described by Ardiyani and Karimah, who emphasized that working through transference leads to both symptom reduction and identity reorganization in individuals with borderline traits (Ardiyani & Karimah, 2021). Moreover, this study affirms the findings of Schechter et al., who documented how therapeutic confrontation and relational attunement promote lasting change in patients with suicidal ideation (Schechter et al., 2019). Participants' recognition of the therapist as a trusted other echoes Rowe's intersectional psychodynamic work, in which clients reconstruct identity in part through the safety and challenge offered in the therapeutic dyad (Rowe, 2023).

These findings are also supported by research that emphasizes the broader social and systemic dimensions of identity formation. As Petriglieri asserts, identity is not merely discovered but fabricated through ongoing negotiation with societal expectations, roles, and relational histories (Petriglieri, 2020). Participants in this study often reported shedding internalized scripts imposed by early caregivers or social institutions, such as the need to be perfect, compliant, or emotionally unavailable. In parallel, the work of Wijaya et al. emphasizes the importance of contextualizing identity within cultural frameworks, noting that psychodynamic theory must increasingly account for multicultural perspectives and diverse identity trajectories (Wijaya et al., 2024). This contextual framing enriches our understanding of how identity shifts in therapy are shaped not only by intrapsychic dynamics but also by broader cultural and institutional forces.

Moreover, the longitudinal nature of identity transformation highlighted in this study reinforces the value of sustained therapeutic engagement. Unlike short-term interventions that focus primarily on symptom alleviation, long-term psychodynamic therapy creates a developmental container for clients to engage with the deeper, often unconscious, aspects of their personality structure (Seiler, 2025). This is particularly salient for individuals navigating complex identity transitions, such as those described by Malark in the context of sexual, religious, and existential dilemmas (Malark, 2017). Through consistent therapeutic presence and relational repair, participants in this study were able to explore and ultimately revise long-standing internalized identities that no longer served their growth.

The results also suggest that long-term therapy allows for the emergence of multiplicity and complexity within identity. Participants often described feeling less rigid and more fluid in how they defined themselves. This aligns with

the theoretical assertions of Katzman, who argued that one of the hallmarks of successful psychodynamic treatment—particularly with narcissistic clients—is the capacity to tolerate internal contradiction and uncertainty (Katzman, 2018). Similarly, Schruijer and Curşeu traced the historical divide between social psychological and psychodynamic approaches to group dynamics, ultimately advocating for a more integrative view of identity as co-constructed within group and interpersonal settings (Schruijer & Curşeu, 2014). Participants' reflections on changing roles in family and social contexts further illustrate this dynamic, underscoring identity as both intrapersonal and relational.

In addition, the study's findings resonate with the notion of identity transformation as a developmental achievement. As highlighted by Seiler, the psychodynamic approach is uniquely suited to support individuals through life transitions and aging processes, offering a framework to explore and affirm evolving aspects of the self (Seiler, 2025). Participants' narratives about increased self-continuity, purpose, and inner coherence mirror the outcomes described in research on older adults benefiting from psychodynamic interventions. The capacity to hold one's story across time and find meaning in adversity reflects an advanced stage of identity integration that long-term therapy is well-positioned to facilitate.

Finally, the emerging theme of relational learning—where participants transfer insights gained in therapy to external relationships—supports the argument that psychodynamic therapy fosters not only intrapsychic change but also behavioral and relational transformation. Kirkland and King's music therapy study with adults experiencing concurrent disorders demonstrated that experiential and process-oriented approaches can lead to shifts in interpersonal functioning and self-perception (Kirkland & King, 2019). Similarly, participants in this study reported translating therapeutic experiences into real-world changes, such as setting clearer boundaries, communicating more openly, and taking responsibility for their emotional lives.

This study, while rich in depth, is not without limitations. The participant sample was limited to individuals from Germany, which may influence the cultural and systemic dynamics that shape identity experiences. While efforts were made to include diverse participants in terms of gender, age, and socio-economic background, the findings may not generalize to populations from different cultural or therapeutic contexts. Additionally, since the data collection relied exclusively on self-reported interviews, there is potential for recall bias or social desirability influencing

participant narratives. Furthermore, the study focused exclusively on clients who had engaged in therapy for at least two years and who were willing to reflect deeply on their experiences; those who discontinued therapy or had more defensive structures may not be adequately represented.

Future research could explore identity shifts in psychodynamic therapy across different cultural and therapeutic settings, including group or institutional therapy environments. Comparative studies between short-term and long-term psychodynamic interventions may help clarify the specific contributions of extended engagement to identity transformation. There is also a need for longitudinal mixed-methods designs that incorporate both narrative interviews and standardized identity or attachment measures. Such approaches could enhance the validity of the findings and provide a more comprehensive understanding of change processes. Moreover, future research might investigate identity shifts among individuals with more diverse clinical presentations, including those with severe dissociative, psychotic, or somatic symptomatology.

Clinicians practicing psychodynamic therapy should prioritize the cultivation of a secure therapeutic alliance that can serve as a base for deep identity work. Reflective interventions that facilitate narrative reconstruction and emotional insight are essential tools for fostering change. Therapists should also remain attentive to the cultural and systemic contexts influencing their clients' identities, integrating multicultural sensitivity into their formulations. Given the profound transformations observed in long-term therapy, practitioners should advocate for increased access to extended treatment for individuals whose difficulties are rooted in chronic developmental trauma or early attachment disruption. Lastly, psychodynamic training programs should emphasize identity formation as a developmental and relational process, encouraging therapists to approach the therapeutic relationship as both a diagnostic and healing space.

Authors' Contributions

Authors contributed equally to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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