

Experiencing The Holidays

The holiday season is now underway. Christmas decorations on Main Streets, in front yards, and in big box stores went up mostly before Thanksgiving. The celebrations of Hanukkah and Kwanzaa add to the heightened mood of December. Our patients/clients will have different reactions to this annual barrage of pressures to buy things and feel merry.

People prepare for the December holidays in two ways.

First is material and physical: gifts are bought and wrapped, decorations and special meals are prepared. People rush around trying to do all the extra things that the holidays seem to require. Some people get exhausted in the process. The Swedes call this period one of “jul panik.”

Second is psychological preparation: considering what sort of gift would be appropriate for X but not for Y; planning on who to invite and who not to invite – depending on how everyone feels about one another. In addition, there may be the anticipations of special pleasures, as one watches another open one’s gift or attends some communal or religious holiday celebration. The general expectation is one of several days and numerous occasions of heightened, sustained pleasure of various sorts. Extra amounts of good feelings and good relationships are the universal hope – a sustained “high.”

For those who are not as well equipped to celebrate maturely, we often make allowances, because “’tis the season.” A few sturdy individuals vow to eliminate their participation in the hectic season altogether.

Some of our clients/patients are embedded in good, or good enough, families or circles of friends, and they can find enjoyment in the holiday season. Other patients/clients have worked hard in therapy to devise coping strategies for dealing with holiday difficulties without lapsing into some regressed behavior; they deserve recognition and praise for their efforts.

For some, the December holidays bring negative reactions. Some dread December and can’t wait to get past it. If family members are absent or critical, if friends are absent or self-absorbed, if poverty prevents buying extra gifts or foods, if serious illness and pain are dominant preoccupations, if alcoholism or addiction make a mockery of society’s up-beat mood, if in a few cases a local disaster or the dying of someone usurps one’s energies and attention – then the holidays cannot be celebrated the way everyone else does (or seems to). A significant majority will exist who won’t “get with the program,” and will feel left out.

For some of our clients/patients, there will be the painful reality of social isolation, and especially so at a time when everyone else seems to be getting together. Perhaps even worse is having to pretend and endure while in the company of relatives or friends who are supposed to be exhibiting holiday generosity and good will, but who are predictably critical, aloof, and ungenerous. For these

patients/clients of ours, their pain and anger will be mixed with loneliness and longing – exacerbated every December.

We, their therapists, may be almost the only persons they can feel safe or close with. While we need to maintain professional boundaries (however much we might wish to indulge in some act of generosity), we will also empathize with their struggle to maintain their self-respect at a time when nobody else seems to give a damn. It can be helpful to hint at the possibility of their finding *some* way to give *some* time or effort to *some* person or persons, or perhaps to an animal, who is also in need. Making that personal connection can be something to celebrate.

David C. Balderston, Ed.D., LMFT

New York City

Author:
Guest Author