

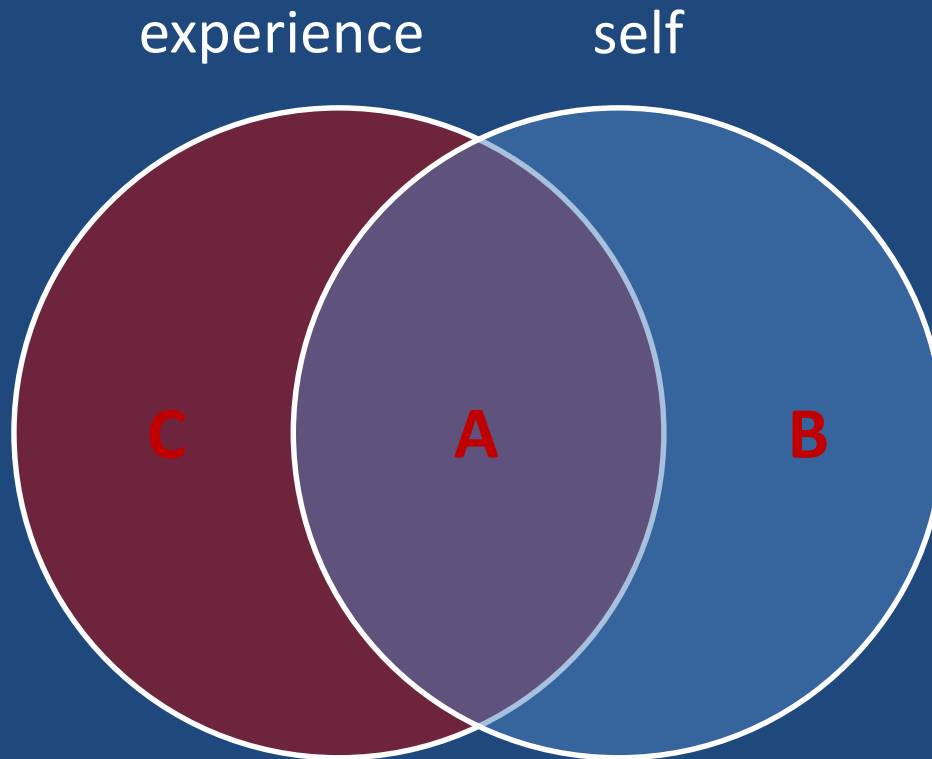
Congruence and communication of the therapist - a model and practical guidelines

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Congruence on an intrapsychic level



A: congruent = consonance of **experience** and **awareness**

B: distorted symbolization of experience

C: experience not in awareness (denied, incomplete)

Aspects of congruence

- theoretical **psychological concept** (for others only to a certain extent perceivable)
- a **relation** (experience – self – furthermore communication)
- **intra-psychic = state of being**
- to symbolize experiences accurately is a **functional quality**

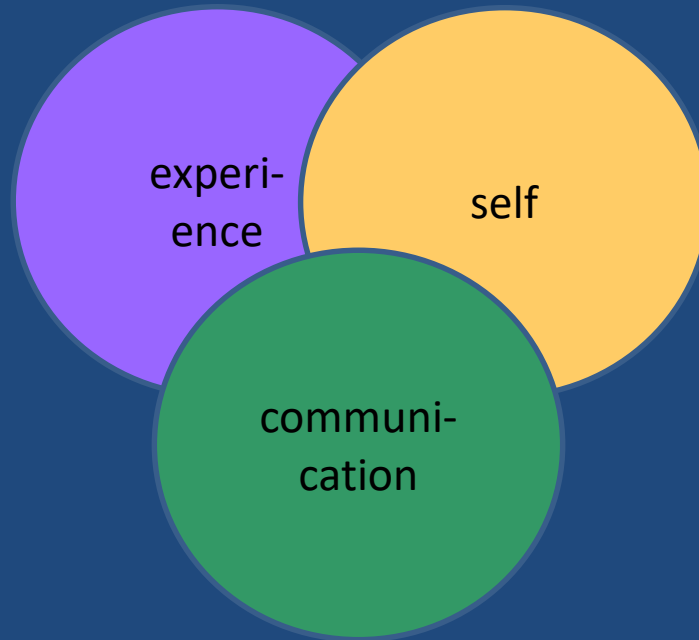
Aspects of congruence

- on a **continuum** (from less to more congruent) = not always and not in every respect – **sufficiently is enough**
- it is not possible to have all experiences present → **available on demand**
- **generalized capacity** vs. specific experience in a situation
- according to theory of therapy **starting point for the therapist**
- **therapy goal for client**

Congruence in its particular meaning in person-centered theory is not ...

- ≠ consonance of self-concept and ideal self
- ≠ overlap of different parts of the self
- ≠ harmony of the actualizing tendency of the whole organism and the actualizing tendency of the self (as part of the organism)
- ≠ accordance of subjective reality (phenomenal field) and external reality (incl. reality of others) → it is not constituted by consensual reality or by a social contract

Congruence: Extension to the interpersonal level

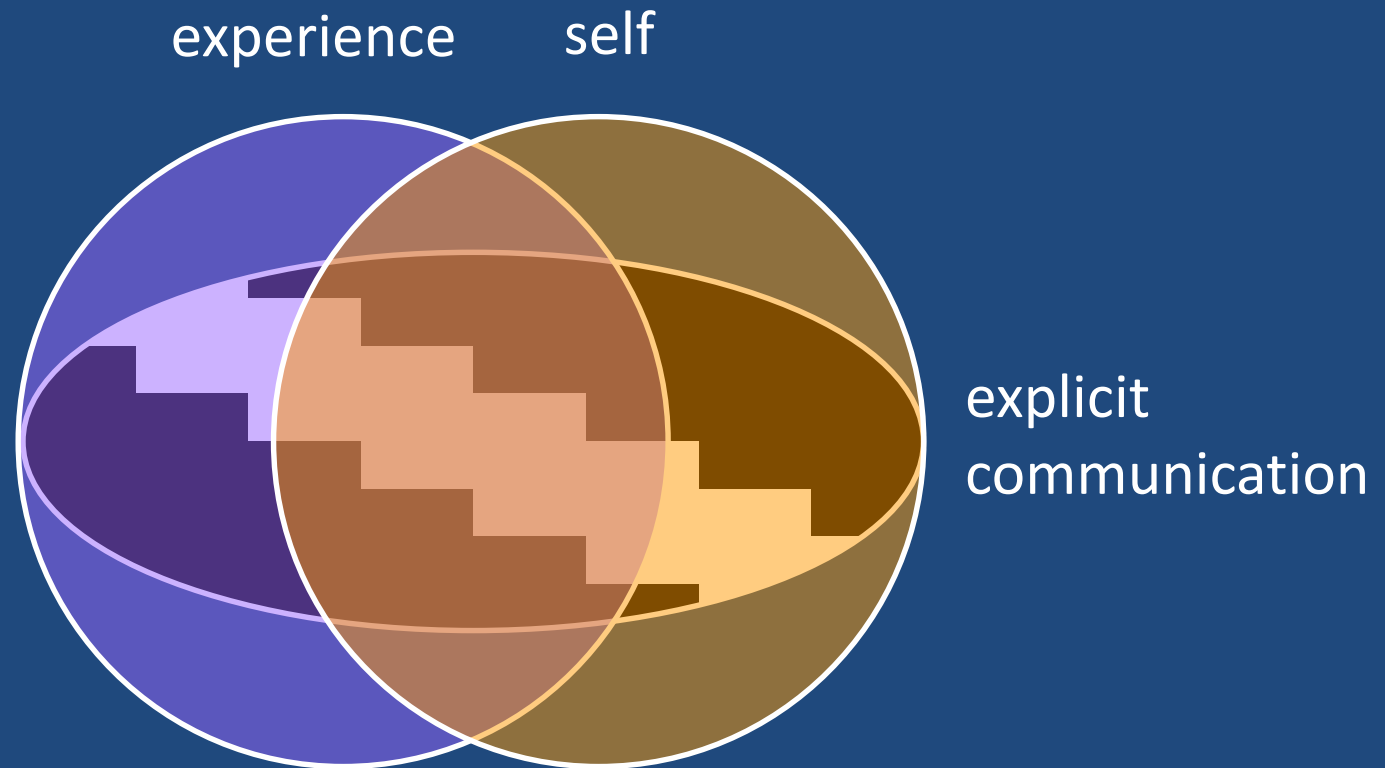


Consonance of **experience**, **awareness** and **communication** of (perceived) experiences to others

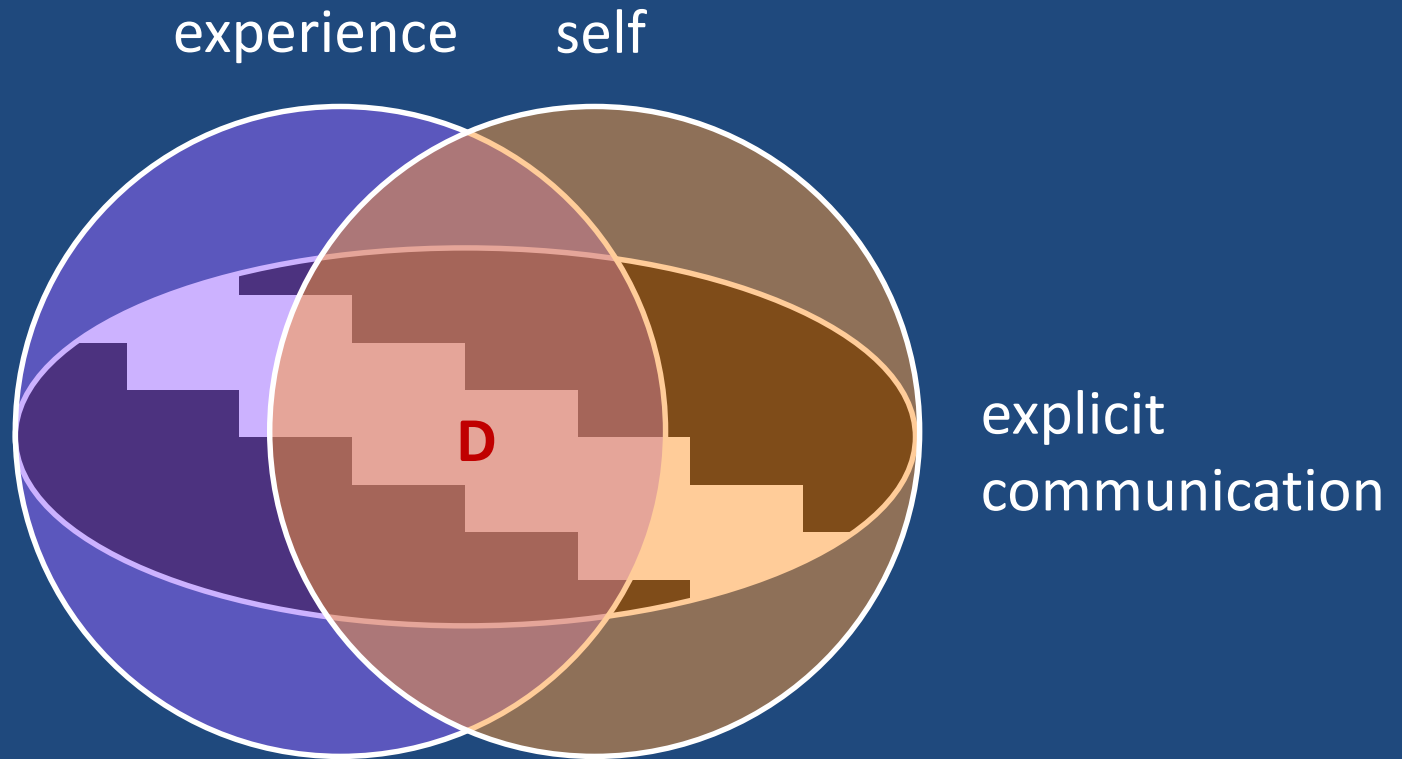
Transparency

- Via (explicit) communication congruence (in the meaning of inside = **to be**) becomes a transparent **behavioral phenomenon** (outside = **to do**)
- **Ability of the therapist** to communicate in such a way that the client receives the congruent message, above all unconditional positive regard and empathic understanding, not necessarily verbally
- **Ongoing background melody** = autonomous body language

Experience, self and communication: a model

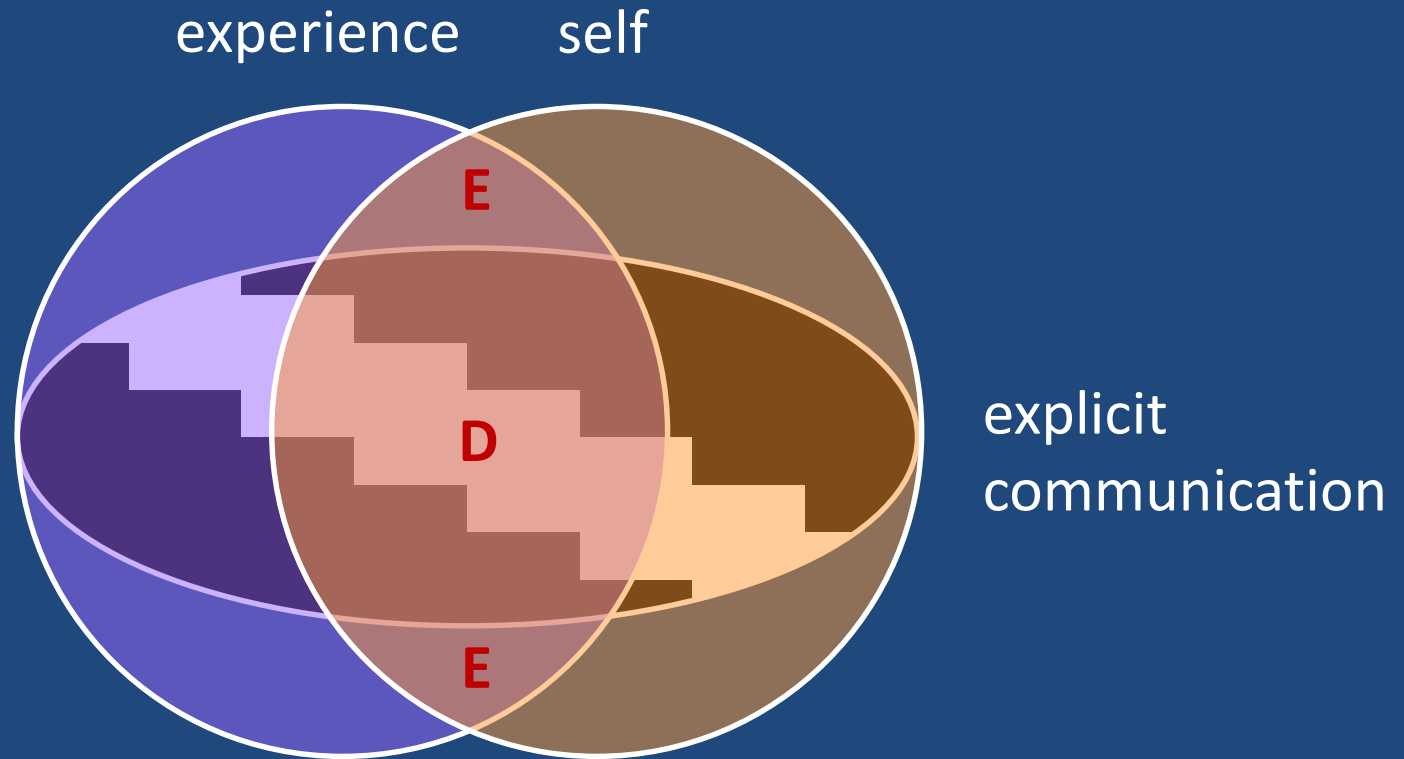


Experience, self and communication of the therapist: segments of the model



D: congruent and fully transparent

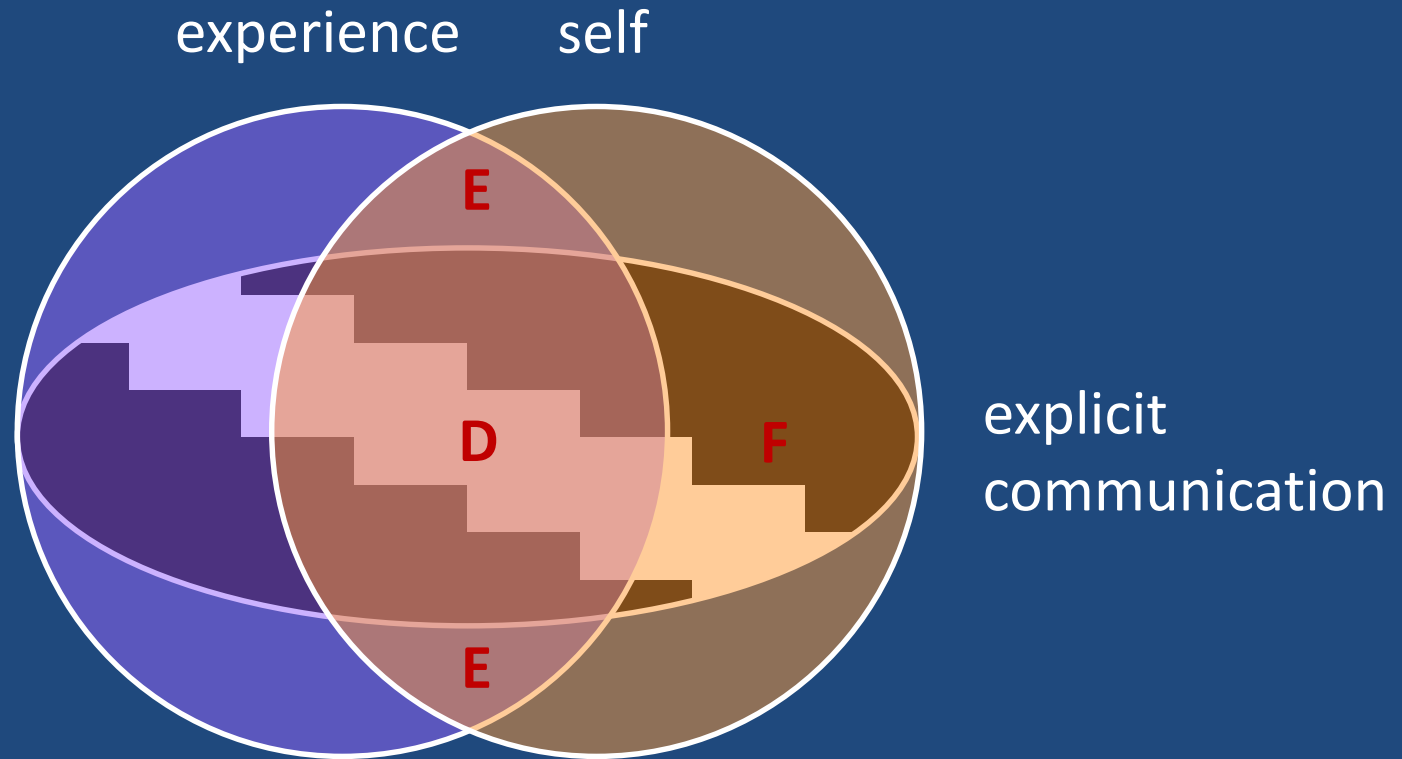
Experience, self and communication of the therapist: segments of the model



D: congruent and fully transparent

E: congruent but selective

Experience, self and communication of the therapist: segments of the model

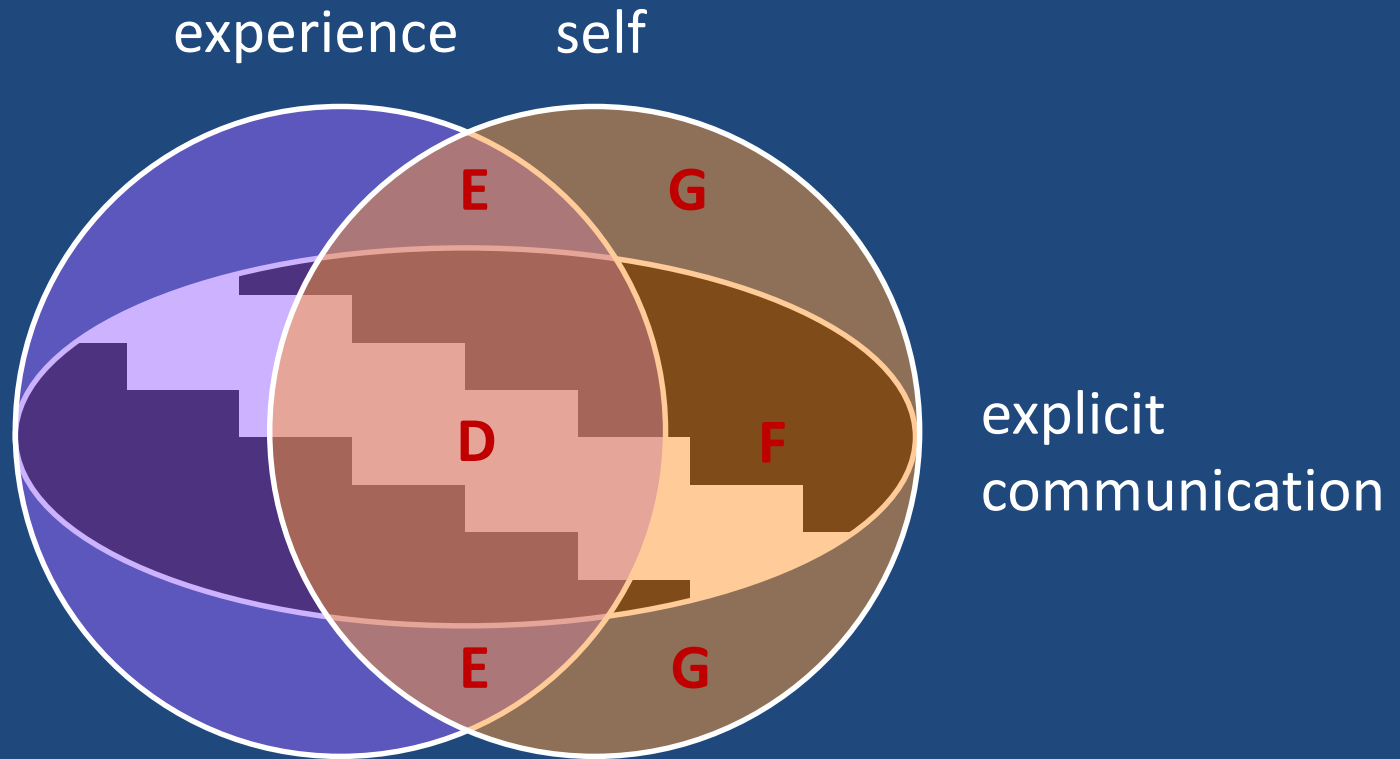


D: congruent and fully transparent

E: congruent but selective

F: communication of distorted symbolization

Experience, self and communication of the therapist: segments of the model



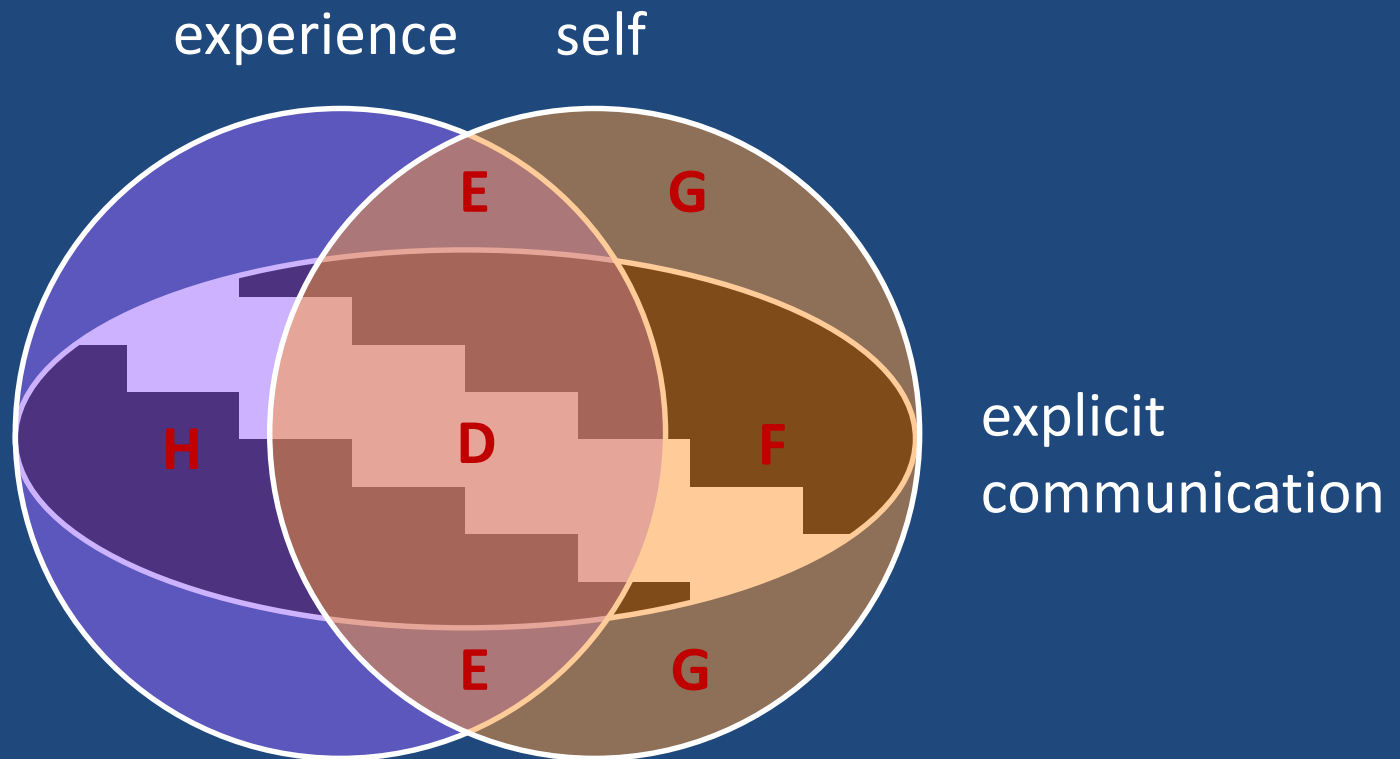
D: congruent and fully transparent

E: congruent but selective

F: communication of distorted symbolization

G: inauthentic (selective, distorted)

Experience, self and communication of the therapist: segments of the model



D: congruent and fully transparent

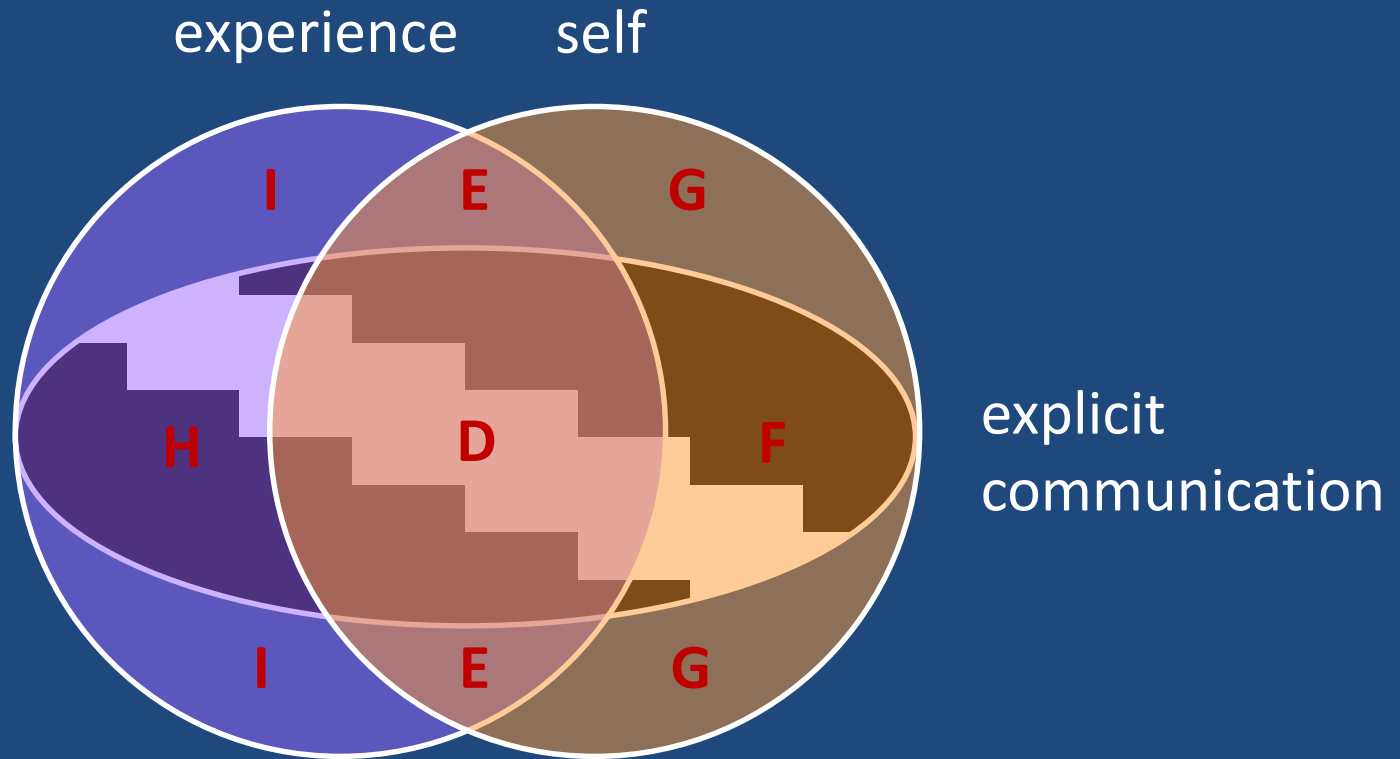
E: congruent but selective

F: communication of distorted symbolization

G: inauthentic (selective, distorted)

H: autonomous body language (no awareness)

Experience, self and communication of the therapist: segments of the model



D: congruent and fully transparent

F: communication of distorted symbolization

H: autonomous body language (no awareness)

E: congruent but selective

G: inauthentic (selective, distorted)

I: implicit processes (unaware, cannot be observed from the outside)

Expressions from frame of reference of therapist

Why?

- **Being present** to the client in a holistic way
- Transcending alter ego relationship → **dialogic quality** and (existential) **equality**
- **Use of the self of therapist** (expert for own experiencing) (≠ expert for the client)

Expressions from frame of reference of therapist

When?

- Persistent experience of not understanding and/or not valuing the client
- spontaneous responses
- on demand = questions and requests of the client
- to avoid confusion of the client
- many more reasons → overall: fostering trust of clients and engaging in experiential exploration

Brodley (2011); Mearns & Thorne (2007)

Guidelines for T-frame responses

How?

- in line with philosophy that **client is expert for themselves**
- **keep track with client** and anticipate if **relevant**
- **sporadic and non-systematic** (check motives and intentions) → “facilitative, non-exploitative, non-intrusive, non-dominant” (Wyatt, 2001; p. 230)
- use **language that conveys your own experiencing**
- avoid responses that may be construed as facts or comments about the client

Guidelines for T-frame responses

How?

- **personal style and subjective perspective** (instead of stressing own qualification or professional role)
- **tentative emphasis**
- **make clear** what made you bring in your frame of reference

acc. Brodley (2011), Cain (2010), Mearns & Thorne (2007)

Guidelines for T-frame responses

- technically speaking no limit (but ethical and personal boundaries!)
- nurtured by care, discipline, and self-control →
“disciplined spontaneity”
- consider vulnerability of clients and power issues - self-determination of clients as “compass”
- in reverse: therapist might not be present enough for the client

Conclusion

- very important aspect in theory of therapy
- **model**: map serves for illustration and clarification of and attention to different aspects
- crucial is **client's perception of a basic reliability**
- congruence of therapist (as intra-psychic phenomenon) **as much as possible - a never ending story/process**
- **transparence better selective** according to a number of guidelines (optimum instead of a maximum!)

Historical sketch

- Rogers (1957; 1959): Congruence as state of therapist = **intra-psychic** concept; **in accord with oneself**
- Rogers (1962): client's perception of therapist's congruence = **hide nothing and be transparent for the client**
- Rogers & Sanford (1984): **explicit communication of therapist's experiencing**

Techniques?

- Finke (2004) - following Carkhuff - distinguishes three typical techniques to implement the therapy principle “congruence”:
 - self-disclosure
 - immediacy
 - confrontation
- But, as it is an inner state, operationalization of congruence in behavioral terms is problematic! → background melody rather than systematic techniques

Interplay with other core conditions

- congruence = unconditional positive self-regard
→ entering the world of the client without reservation
(= UPR)
- Congruence is internal (and external), UPR external
openness
- congruence increases self-understanding and as a
consequence empathic understanding of clients →
congruence of therapist is upper limit of empathic
capacity!