Person-centered and existential therapies: A comparison

Lecture in Predeal, Romania,

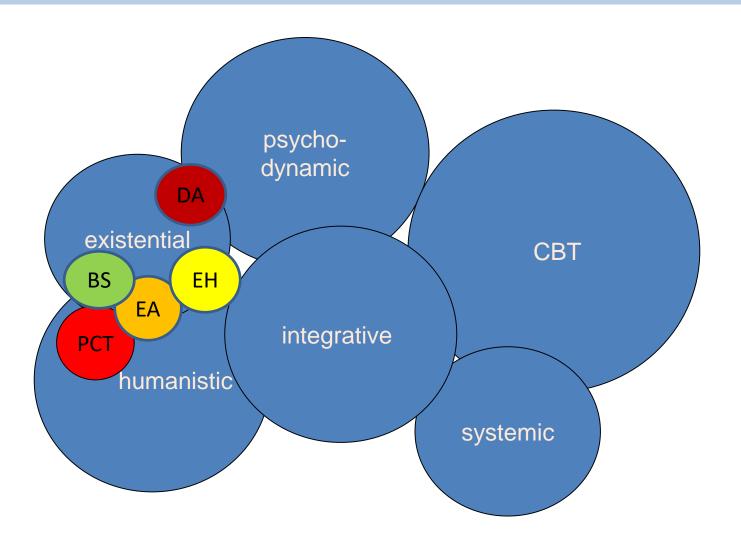
May, 18, 2013

Dr. Gerhard Stumm, Vienna

Menu

- Existential therapies
- Person-centered therapies
- Rogers' link to existential philosophy and dialogues with existential therapists
- Commonalities
- Differences
- Mutual enrichment

Paradigms in psychotherapy



Family tree of existential therapies and its proponents

(adapted from Yalom, 1980 and Cooper, 2003a; 2004)

Existential philosophy as "Home of the ancestors"

Kierkegaard Heidegger Jaspers Sartre Buber

American

Humanistic

	E	uropean tradit	Humanistic	("optimistic	Analysts ("friends of		
Existential oriented Analysts	Daseins- analysis	Logotherapy/ Existential Analysis	Approach of Laing	British School of Existential Analysis	Approach	American neighbors")	the family")
Gebsattel	Binswanger	Frankl	Laing	van Deurzen	May	Maslow	Adler
Caruso	Boss	Lukas		Spinelli	Bugental	Ch. Bühler	Rank
	Condrau	Längle		H. Cohn	Yalom	Rogers	Horney
	Holzhey- Kunz			Madison	Schneider	(Perls)	Fromm
						(Moreno)	Kohut

Humanistic

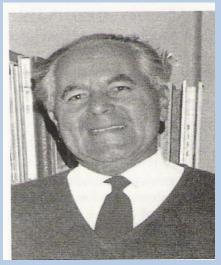
Daseinsanalysis

Martin Heidegger



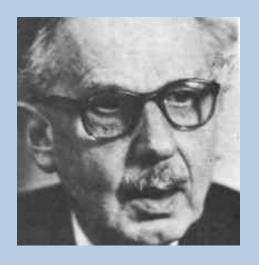
1889-1976





1903-1990

Ludwig Binswanger



1881-1966

Daseinsanalysis

- against subject-object-split
- sensitivity for ontological givens like death, transitoriness, bottomlessness, anxiety, guilt, as fundamental problem
- Being-in-the-world means we have to be and master it in our own way → call of the world, choices and future orientation
- therapy goal: openness to the world (cf. Rogers' openness to experience)

Logotherapy

Viktor Frankl



1905-1997

Logotherapy

- approach to overcome meaninglessness or lack of meaning ("existential vacuum") → "meaning-centered"
- striving for meaning as crucial motivation (Man is fundamentally free to find meaning)
- tragic triad: death, guilt and suffering
- dimensional ontology: body, psyche and spirit
- meaning: the most valuable option in a situation
- values: creative, experiential, attitudinal
- rather poor methodical repertoire

Existential Analysis (A. Längle)



- 4 basic motivations: relatedness to the world, to life, and to oneself, besides meaning
- focus on self-acceptance, emotions, authenticity, taking a stance, and a more dialogical understanding of the therapeutic relationship
- much wider methodical frame work (biographical perspective, PEA, ...)
- overlap with person-centered! (e.g. authenticity, feelings, relationship, "living with internal consent")

American Humanistic-existential Approach

James Bugental



1915-2008

Rollo May



1909 - 1994

Irvin Yalom



*1931

10

Kirk Schneider



*1956

American Humanistic-Existential Approach

- inaugurated by Rollo May → Bugental, Yalom
 (analytic elements; defense resp. exploration of existential givens), Schneider: existential-integrative
- subjective experience of clients, transparency of therapist, interpersonal dynamics, challenge of the client
- variety of methods: vivification, confrontation, role play, dream work, visualization, experiments, ...

British School

Van Deurzen (antecedent: Laing)

- "there is no cure for life" (life includes imperfection, dilemma, tragedy, …)
- de-pathologizing (sceptical of diagnoses
 - → life problems)
- therapy as philosophical "discourse"



*1951

Spinelli: phenomenological-existential approach

- self-concept, dialogical co-exploring
- reservation against a technical stance



Person-centered therapies

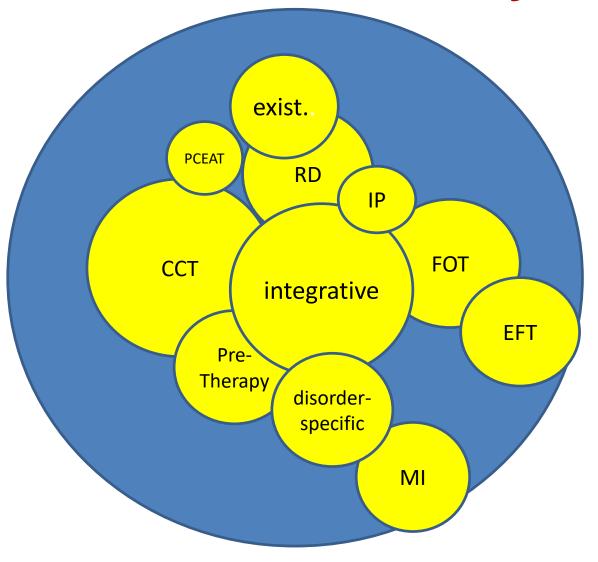


Carl Rogers (1902-1987)

orthodox/tra client-centere center orienta	ed/person- red	various sub- orientations	experiential orientation		
Classical Client- Centered Therapy (CCT) ('non- directive')	relational / dialogic orientation	interactional (interpersonal) existential disorder specific (incl. Pre-Therapy) creativity oriented Motivational Interviewing (MI)	Focusing- oriented	Emotion-Focused Therapy (EFT)	
		integrative			

Overview of person-centered and experiential therapies

Tribes of the family



Classical Client-centered Therapy (CCT)

- (principled) non-directivity (non-experiential)
- trust in the client's self-governing capacity
- ethically based non-authoritarian, no coercion and power over the client
- attitudes and their implementation as sufficient
- "non-diagnostic mindset" (Brodley)
- L. Sommerbeck: back to Rogers 1 (1951)

PCT as dialogical

- a tradition in PCA that has started with the late Rogers
- from a "de-personalized" therapist (Rogers, 1951) to one who involves him-/herself and expresses him-/herself transparently (e.g. Rogers & Sanford, 1984)
- being with and being counter to the client
- e.g. Pfeiffer, Schmid, Mearns, Cooper, (Lietaer)

Relational Depth

"A state of profound contact and engagement between two people, in which each person is fully real with the Other, and able to understand and value the Others's experiences at a high level" (Mearns & Cooper, 2005, p. xii).

- coined by Mearns (1996)
- based on the fundamental need for relating deeply (more than UPR)

Interpersonal orientation

- focus on client's relational patterns
- interpersonal reasons for incongruence
- corrective emotional (relational) experiences
- non-complementary (a-social) responses of therapist
- immediacy (Carkhuff) and meta-communication about the client-therapist interaction

disorder-specific

- mainly in the Netherlands, Belgium, Germany, Austria, Switzerland
- Swildens, Finke, Teusch, Speierer, Binder, Sachse, Greenberg
- necessary for severely disturbed clients as cornerstone for empathy and UPR
- see also Pre-Therapy later on

Expressive Arts Therapy

 Natalie Rogers (*1928) drawing from ",theory of creativity" by her father \rightarrow "Creative Connection"



 Liesl Silverstone (England), Norbert Groddeck (Germany)

Gerhard Stumm

21

Focusing-Oriented Therapy

Gene Gendlin



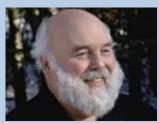
*1926

- relationship quality and experiencing
- experiencing vs. concepts

 Felt Sense as compass
- Listening, Guiding, Response
- process-directivity

Emotion Focused Therapy

 elaborated by Les Greenberg (drawing from Laura Rice)



*1945

- primary adaptive vs. maladaptive emotions
 —
 modification (transformation) of emotional
 schemata
- emotions are primary (not experiences as Rogers and Gendlin advocated)
- markers and tasks

integrative

- integration of different suborientations, above all person-centered and experiential
- diversity in theory and practice along common principles
- Lietaer, Keil, Bohart, Cooper, Stumm, ...

Rogers' links to existential philosophy und dialogues with existential therapists

- Sören Kierkegaard (1813-1855)
- Jean-Paul Sartre (1905-1980): no personal contact
- Martin Buber (1878-1965): public dialogue April, 18,
 1957 at the University of Michigan
- Paul Tillich (1886-1965): March, 7, 1965 in the studio of San Diego State College
- Rollo May (1909-1984): series of three articles 1981/1982
- Ronald D. Laing (1927-1989): meeting 1978 in London

Existential orientation of Gendlin

- familiar with Heidegger (Welt, Umwelt, Mitwelt, Eigenwelt)
- experiential = existential
- Focusing: "access to existence"
- Felt Sense is implicit, pre-conceptual and intentional (always regarding a situation or a topic → interaction with the world → felt shift = base for decisions)
- self as process ≠ concept/object
- existential encounter: "relationship comes first"

Existential orientation – Prouty's Pre-Therapy

- based on existential phenomenology
- concrete, immediate experience (phenomenon in itself)
 drawing from Sartre, Farber and Scheler



- awareness of phenomenal field (intentionality) = world, self and others → reality, affective and communicative contact = existential contact (vs. existential autism)
- existential empathy

Existential orientation (cont.)

- Swildens: Process-oriented Client-centered therapy (existential process, alibi, myth, hindrance of choice, existential phase)
- Cooper: pluralistic, integration
- Greenberg: future oriented, bundle of options, choice and responsibility, no given nature but mental ability to create meaning; importance of existential givens

Phenomenology

- starting point is "lived experience" ("internal evidence")
- "to the things themselves", like they appear
- phenomenological method:
 - 1.) "bracketing" of prior knowledge & assumptions etc.
 ("epochè") → impartiality, put aside knowledge,
 prejudices & bias
 - 2.) description of phenomena ("what appears?" = reduction, "how is it?" = construction, "is it that way?" = destruction)
 - 3.) attention for all phenomena ("horizontalization")

Commonalities of ET & PCT

- phenomenological attitude
- appreciation of subjective experience and uniqueness of every person
- experiential exploration
- process quality
- reservation against static diagnoses
- authenticity as therapy goal

Differences

- fundamentally constructive nature of Man vs.
 result of struggle between polarities
- actualizing tendency vs. permanent choices
- growth and enhancement vs. limitations
- optimistic vs. tragic side of existence
- conditions of worth vs. immanent tensions and contingency
- freedom from ... vs. freedom to ...
- tendency towards autonomy vs. innate being-with

Differences

- here and now vs. future
- self-actualization vs. realization of meaning
- self-experience vs. self-distancing and selftranscendence
- facilitation vs. challenge and confrontation

Fruitful tensions

- personal encounter and functional-professional relationship (ethical and clinical)
- phenomenological openness and clinical knowledge
- the psychotherapist as alter-ego and the Other
- non-directive pacing and responding and initiating an experiential attitude of exploring in the client
- facilitating and challenging

Fruitful tensions

- enhancing and maintaining client's capacities
- being without intention and transparent offering of one's own thoughts
- trust in the client's wisdom and supplementation with unobtrusive suggestions
- therapeutic attitudes and implementing them (via non-standardized techniques)

Mulţumesc!

Questions?

Statements

Discussion