Person-centered and existential therapies: A comparison

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Menu

• Existential therapies
• Person-centered therapies
• Rogers’ link to existential philosophy and dialogues with existential therapists
• Commonalities
• Differences
• Mutual enrichment
Paradigms in psychotherapy

- psycho-dynamic
- existential
- humanistic
- integrative
- systemic
- CBT
- PCT
- EA
- EH
- BS
- DA

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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

<table>
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<tr>
<th>Existential oriented Analysts</th>
<th>European tradition</th>
<th>American Existential-Humanistic Approach</th>
<th>Humanistic Psychologists („optimistic American neighbors“)</th>
<th>Humanistic Analysts („friends of the family“)</th>
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<td>Caruso</td>
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<td>Spinelli</td>
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<td>Condrau</td>
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<td>(Moreno)</td>
<td>Kohut</td>
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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

Rollo May
1909 –1994

James Bugental
1915–2008

Irvin Yalom
*1931

Kirk Schneider
*1956

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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, ...
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“

Spinelli: phenomenological-existential approach

• self-concept, dialogical co-exploring

• reservation against a technical stance
Person-centered therapies

Carl Rogers
(1902-1987)
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<th>orthodox/traditional client-centered/person-centered orientation</th>
<th>various sub-orientations</th>
<th>experiential orientation</th>
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‘levels of interventiveness’ (according to M. Warner, 2000)

Overview of person-centered and experiential therapies

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Tribes of the family

exist.

Pre- Therapy

disorder-specific

CCT

RD

IP

FOT

EFT

MI
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 → „Creative Connection“

• Liesl Silverstone (England), Norbert Groddeck (Germany)
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)
- 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
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 neurosis: loss of Felt Sense → structure bound
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
• **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 self-transcendence
- 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)
Mulțumesc!

Questions?

Statements

Discussion