Person-centred and Experiential Therapies: a remarkable variety

Keynote Lecture in Prague

April, 27, 2014

Gerhard Stumm, Vienna
• Pluralistic tradition in PCT
• Overview of Person-centred and Experiential Therapies
• Characteristics of the members of the family
  - theoretical essentials
  - practical perspectives
  - my own impressions
  - references
• Identity aspects
• Discussion on variety and impact
Paradigms in psychotherapy

- Psycho-dynamic
- Existential
- Humanistic
- Integrative
- Systemic
- CBT
- PCT

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Person-centered Therapies

Carl Rogers
(1902-1987)
Pluralistic tradition in history of PCT

- psychoanalytic roots: Otto Rank, Jessie Taft (“relationship therapy”), Frederick Allen, Virginia Robinson, (Elizabeth Davies), (Karen Horney)
- cathartic and expressive aspect: play therapy, (Psychodrama)
- pragmatism: James, Dewey
- phenomenology: Snygg, Combs
- Gestalt psychology: Wertheimer, Köhler, Koffka
- Humanistic psychology: Maslow
- organismic theories: Goldstein, Angyal
- encounter philosophy: Buber
- existential philosophy: Kierkegaard, Sartre, Tillich
<table>
<thead>
<tr>
<th>orthodox/traditional client-centred/person-centred orientation</th>
<th>various sub-orientations</th>
<th>experiential orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classical Client-Centred Therapy (CCT) (‘non-directive’)</td>
<td>interactional (interpersonal)</td>
<td>Focusing-oriented Therapy</td>
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<tr>
<td>relational / dialogic orientation (incl. Relational Depth)</td>
<td>existential</td>
<td>Emotion-Focused Therapy (EFT)</td>
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<td>disorder specific (incl. Pre-Therapy)</td>
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<td>creative (Expressive Arts)</td>
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<td></td>
<td>integrative</td>
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<td></td>
<td>(Motivational Interviewing)</td>
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**Overview of Person-centred and Experiential Therapies**
existential.

Pre-Therapy

disorder-specific

CCT

PCEAT

RD

IP

FOT

EFT

MI

integrative

Tribes of the Family

CCT=Classical Client-centred Therapy
PCEAT=Person-centred Expressive Arts Therapy
RD=Relational Depth
IP=Interpersonal

FOT= Focusing-oriented Therapy
EFT= Emotion Focused Therapy
MI= Motivational Interviewing

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Classical Client-centered Therapy (CCT)

• trust in the client’s self-governing and growth capacity (actualising tendency)
• ethically based → non-authoritarian, no coercion and power over the client
• (principled) non-directivity (non-experiential)
• “non-diagnostic mindset“ (Brodley)

 method: core conditions and their implementation & perception by the client are sufficient for constructive change of the client → relational climate counts
Classical Client-centered Therapy (CCT)


PCT as dialogical approach

• a tradition that has started with the late Rogers
• from a “de-personalized” therapist (Rogers, 1951) to one who involves and expresses him-/herself transparently (e.g. Rogers, 1980)
• from therapist as “alter-ego“ to being the “other“ → being with and being counter to the client → “two-person-centred therapy“ (co-presence)

Dave Mearns (*????)
Mick Cooper (*????)
Wolfgang Pfeiffer (1919-2011)
Peter Schmid (*1950)
Relational Depth

• term coined by Dave Mearns (1996)
• “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 Other’s experiences at a high level” (Mearns & Cooper, 2005, p. xii).
• based on the fundamental need for relating deeply (more than need for UPR)
• method: spontaneous and active participation of the therapist to foster an intense meeting and connection with the client → more than actualising core conditions → self of the therapist as “developmental agenda”

Critique of RD

• Sue Wilders: missing unintentionality → directive

• Keith Tudor: depreciation for “superficial” experiencing → offending the principle of horizontalisation (all phenomena are equally to be regarded positively and unconditionally)

what is depth and what is surface? → diagnostic expertise
## Existential

<table>
<thead>
<tr>
<th>Existential</th>
<th>Humanistic/person-centred</th>
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<tbody>
<tr>
<td>- struggle between polarities:</td>
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<tr>
<td>limitations and tragic side of existence (e.g. death, transitoriness) and potential</td>
<td>growth and optimism</td>
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<td>- freedom to ...</td>
<td>freedom from ...</td>
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<tr>
<td>- permanent choices</td>
<td>trust in the actualizing tendency</td>
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<tr>
<td>- immanent tensions and contingency (“there is no cure for life“)</td>
<td>conditions of worth</td>
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<tr>
<td>- future bound</td>
<td>here and now</td>
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<tr>
<td>- meaning</td>
<td>self-actualisation</td>
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<tr>
<td>- challenging/confronting</td>
<td>facilitating</td>
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Existential

• **Rogers:** interested but not exploiting fully potential
• **Gendlin:** experiential = existential
• **Swildens:** Process-oriented Client-centred therapy → if the existential process is stuck, CCT is not sufficient, specific interventions according to disorder und therapeutic phase are required
• **Cooper:** pluralistic, integration of dialogical/existential aspects
• **Greenberg:** future oriented, bundle of options, choice and responsibility, no given nature but mental ability to create meaning; importance of existential givens


Interpersonal orientation

• van der Linden, van Kessel, Lietaer
• reason for incongruence: interpersonal level
• exploration of the client’s relational patterns is primary (vs. self-exploration)

method:
• non-complementary (“a-social“) responses of therapist
• meta-communication about the client-therapist interaction

goal: corrective emotional-relational experiences
disorder-specific

• mainly in the Netherlands, Belgium, Germany, Austria, Switzerland
• differentiated clinical knowledge & “disorder specific understanding” is thought to be necessary, especially when working with severely disturbed clients as cornerstone for empathy and UPR

Teusch, Speierer, Binder, Greenberg, also Prouty’s Pre-Therapy

Hans Swildens (*1924)  
Jobst Finke (*1937)
Pre-Therapy

• work with contact impaired people (psychotic, autistic, dissociated, dementia, mentally retarded, brain injury, …) = pre-experiencing, pre-expressive

• method: contact reflections of concrete client behaviour and his environment: Word for Word, Facial, Body, Situational, Reiterative Reflections to develop or restore awareness of phenomenal field (world, self and others) → contact functions: reality, affective & communicative contact
Pre-Therapy


Creative Therapy

- **Expressive Arts Therapy** by Natalie Rogers
drawing from theory of creativity “by her father
**specific method:** “Creative Connection”: dancing,
(Authentic) movement, music, sound, drawing,
painting, journal writing, meditation, ... as
channels of the healing process → intermodal approach

- Liesl Silverstone (England)
- Norbert Groddeck (Germany)
five steps: Felt Sense, “invitation to action”,
reflecting the product, felt shift, transfer

Natalie Rogers (*1928)
N. Groddeck (*1946)
Expressive Arts Therapy

Focusing-Oriented Therapy

- Experiential therapy
- relationship quality and experiencing
- Felt Sense as compass: “whatever is said and done must be checked against the concretely felt experiencing“ (= direct reference, implicit, pre-conceptual, intricate) → felt shift
- self as process ≠ structure bound
- Listening, Guiding, Response (more than 6 steps-modell)
- process-directivity (Focusing “instructions“ = invitations)

Gene Gendlin (*1926)
Focusing-Oriented Therapy


Emotion Focused Therapy

- elaborated by Leslie Greenberg (drawing from Laura Rice), Robert Elliott, Jeanne Watson (former: process-experiential)
- combination of PC, Gestalt, Focusing, existential
- emotion theories & dialectic constructivism
- emotions are primary (not experiences, as Rogers and Gendlin have assumed): „You can’t leave a place before you haven’t arrived there“
- primary adaptive vs. maladaptive emotions
- modification (transformation) of emotional schemata
- markers and tasks (process-directive)
Motivational Interviewing (MI)

- focus is on the motivation for change (“80% Rogers”), clients are always motivated for something (natural process)
- humanistic philosophy
- dealing with ambivalence (change vs. resistance)
- empathic listening → change talk (urgency, ability & commitment for change)
- motivation-centred, change-centred, problem-centred, directive in terms of facilitating change

• The questions are: what is integrated? How systematically is this done? On what level? Consistent?

• first vs. second order integration: integration of elements of different suborientations, above all person-centred and experiential vs. integration of elements of other schools

Germain Lietaer (*1939)  
Art Bohart (*????)  
Mick Cooper (*????)  
Wolfgang Keil (*1937)


# Identity aspects

<table>
<thead>
<tr>
<th>Lietaer</th>
<th>Schmid</th>
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<tbody>
<tr>
<td>- focus on the experiencing self</td>
<td>- image of the human being</td>
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<td>- moment-by-moment empathy</td>
<td>- fundamental “we“</td>
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<td>- personal presence</td>
<td>- client comes first</td>
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<td>- egalitarian-dialogic stance</td>
<td>- therapist is present</td>
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<tr>
<td>- core conditions are crucial</td>
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<tr>
<td>- holistic image of human being</td>
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<td>- self-agency &amp; self-actualising</td>
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<td>- self-determination &amp; choice</td>
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<tr>
<td>- pro-social nature of humans</td>
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<tr>
<td>- autonomy &amp; interconnected</td>
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## Identity aspects

### Sanders
- primacy of AT
- core conditions are necessary
- non-directive attitude (at level of content)
- autonomy & self-determination
- equality of therapist and client
- non-directive attitude throughout (also at the process level)
- core conditions are sufficient
- holistic perspective

### CCT (e.g. according to Merry)
- AT (metapsychology, motivational theory)
- self, organism (theory of personality)
- conditions of worth, defence, incongruence (theory of disorder)
- core conditions, condition 6, non-directive (theory of therapy)
Impact of pluralism

• Pluralistic stances in theory and practice, heterogeneity and discourse are signs of an elaborated and living approach → fully functioning approach

• Diversity is a counter-position to fundamentalism

• Diversity allows to throw light on person-centred shadows

• There is a wide range of clients & therapists = different types of persons with specific characteristics → advantage of a broad variety of methods is to benefit from different styles

• PCE = a number of tribes that have more or less in common, but enough to fit under one tent! → political perspective → “United we stand, divided we fall”!

Gerhard Stumm
Thank you!

Questions?
Comments
Discussion