

Client-Centred? Person-Centred?

Or

You Cannot Be A Person-Centred Counsellor!

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Introduction

I have had many thoughts around what to call this...

I eventually settled on '**Client-Centred? Person-Centred?**' because that is the title of a piece written by Carl Rogers in February 1987¹ – probably the last published piece that he ever wrote...

I toyed with '**The Nutter Cats versus The Vets**' in an attempt to be 'snazzy' or to invoke intrigue, or whatever. Although I discarded this title, you might see its relevance before too long...

I thought, too, of '**Therapy? Approach?**' (again, the reasons will become clear soon) and also '**You cannot be a person-centred counsellor!**'. In fact, I couldn't quite bring myself to entirely jettison 'You cannot be a person-centred counsellor!' so it remains as a sub-title. All will become clear!

Well... A little more clear, perhaps!

My personal experience has been that

"What is the difference between client-centred and person-centred?"

and, indeed,

"Is there any difference between client-centred and person-centred?"

have, over the years, probably been among the questions most frequently asked of me by trainees, associates, professional body members and others. Sometimes I hear or read the assertion (often phrased somewhat authoritatively) that

There is no difference between client-centred and person-centred.

The questions around what is and what is not client-centred and what is and what is not person-centred just keep on coming around. In 1998 I gave an address at the BAPCA AGM in Manchester on this theme³. I had collected a range of quotes (mostly from the cctpcas e-mail network) – and the variety of interpretations of client/person-centred was, frankly, stunning. Here are just a few of them:

- ***It just seems to describe the way I work***
- ***'Non-directive' seems very often to be linked with 'person-centred'***
- ***People claiming to be PCA is the most common claim***
- ***Most people have heard of **three** core conditions. They see them as necessary, **but all too often do not see them as sufficient*****
- ***"Being nice" is person-centred***
- ***If it were simply a question of my own beliefs and others, I would unreservedly celebrate the differences. But when I hear people's **outrage** at 'person-centred' counselling...***
- ***I have **NOT** been interested in talking about what is person-centred***
- ***They work in so many ways, that we cannot understand what is "really" client-centred or person-centred therapy***
- ***I do **not** believe in the actualising tendency, but I **am** person-centred***
- ***I am client-centred because I want to be non-directive and the client-centred attitude gives me a good way to be non-directive***
- ***If client centred therapy is basically a useful way to frame being non-directive as a therapist then **it begins to sound more like a technique** to me***
- ***I have been deeply frustrated and angered at those numerous counsellors who claim to be person-centred plus a little bit of this and a lot of that. **It does the profession no good at all*****
- ***People describe the approach as a **wishy-washy sentimental kind of relating**; It is rigorous, disciplined and certainly sufficient***
- ***Dialogues happen which stem from the **lack of even a basic agreement** that our approach is built on the foundations of Carl Rogers works***
- ***If we cannot agree on such a fundamental level when we name ourselves in an approach, then what hope is there? Can we really expect CCT/PCA to be taken seriously?***
- ***Disbelief at what is 'sold' as person centred***
- ***The wonders of the approach are wrapped up in our diversity, our perspectives, and our shared positions***
- ***People calling themselves 'Person-Centred' when they are nothing of the kind***
- ***Integrity is damaged by other people using the term to mean an eclectic mish-mash with no coherent theory or philosophy***
- ***It is very important that PCC/CCT has a clear identity in the world***
- ***This approach **does** have boundaries***
- ***I don't share the concern about the need for boundaries, nor am I concerned that we reach agreement about what pca is about***
- ***There can be a combining of the purely client-determined character of these special purpose counselling experiences with pursuit of the special goals***
- ***PCA can be seen as a set of skills***
- ***Carl Rogers believed that the approach was quite definitely **not about skills, or techniques** - it was **more about a way of being*****

- 'Non-directive' skills generate a flow which the person implementing the skills goes along with ('**go with the flow**') whereas **the therapist understands more of the flow**, is IN the flow, trusts in the flow

(That was one of my contributions, by the way!)

- ***It is of fundamental importance that we can at least agree (or accept) the foundations of our approach***
- *Practice which uses a bit of TA here, a bit of Gestalt there, some relaxation techniques and the occasional psychodynamic interpretation - and calls it Person-Centred*
- ***What is my responsibility - our responsibility as a community?***
- *Differences in what is pca is not going to kill the approach*
- ***I have more concern that orthodoxy will do more damage to the approach than narrowly defined boundaries***
- ***Anyone who wants to be "called" a PCA practitioner, can be. Everybody is welcome***
- ***Anyone who intends to call himself "Person-centred" can do it***
- *I'm searching for a framework, for a reference, a centre from where all this diversity came. **Am I alone in this searching?***
- ***What alarms me slightly is the fervour with which such PCA beliefs are held***
- *A basis for a wondrous variety of understandings and perceptions*
- *Why in the world are we limiting the approach to the professions?*
- *We need to establish a foundational statement*
- *If you refrain from the core conditions you are not THEORETICALLY person-centred. You may be person-centred IN ACTION*
- *The meaning of Carl Rogers' theory is not validly open to any interpretation*
- ***It is "valuable to abandon the principle of empathy" under certain circumstances***

Get the picture?

It seems to me that there are identifiable strands... What exactly is client-centred and/or person-centred? Do we need to become 'client-centred fundamentalists' at the expense of celebrating and welcoming diversity?

I want to add here to – and this is another theme I'll be returning to later – that this whole information-gathering exercise was prompted by a letter I received from Professor Dave Mearns. Dave was extremely concerned at the emerging evidence around complaints lodged with BAC (now BACP) against counsellors by clients. I wonder if you can guess which counsellors attracted a disproportionate number of complaints...

We'll leave that poser lingering awhile.

Let me put together three of the above quotes: *They work in so many ways, that we cannot understand what is "really" client-centred or person-centred therapy and it does the profession no good at all. What is my responsibility - our responsibility as a community?*

Perhaps we might explore our individual and collective responsibilities together.

Hmm. To return to 'Client-Centered? Person-Centered?': A few years back, I felt delighted to come across Carl Rogers quoted by Dr CH (Cecil) Patterson². Patterson wrote:

Rogers (1986) uses two terms: *client-centered therapy* and the *person-centered approach*. Later, in an article titled "Client-centered? Person-centered?" Rogers states he would like "a term to describe what I do when I am endeavouring to be facilitative in a group of persons who are not my clients." That term is *person-centered*. *Client-centered* is the term used with clients, in therapy.

Great! Now here was Carl Rogers himself clearly defining the difference between client-centred therapy and the person-centred approach! I subsequently quoted this clarification in several of my own articles...

Then... In 1998 I paid my first visit to the Center for Studies of the Person in La Jolla, San Diego, California. Dave Meador, a CSP member, was kind enough to present me with a copy of the Person-Centered Review in which 'Client-centered? Person-centered?' appeared... Shit! I felt I had somewhat misled my readers...

Carl wrote of three experiences in this three page article.

The first was a demonstration interview filmed in 1986⁴. Carl wrote of "the intensity of that relationship, the almost mystical bond that developed, the awesome process ... I let myself feel, and be proud of, my own competence as a *therapist*."

Next came Carl reading his own journal. He reflected upon a four-day intensive training workshop in Johannesburg, feeling again so much "bitterness and despair and fear and guilt ... the awful pain." Then "I let a feeling of real satisfaction creep in. My understanding and my presence helped ... I am glad that I know something about being a *facilitator*."

The third and final experience was a letter Rogers received from a person intending to attend a conference – expressing doubts due to the person-centred perspective having moved so far away from the "basic client-centered approach..."

Mulling over all three experiences, Carl wrote:

I suppose the writer of the letter would regard me as being client-centered in the demonstration interview, and person-centered in the Johannesburg group. She sees the two modes as being sharply different. For myself, I believe I am the same person, guided by the same principles, in both situations ... How can anyone split the two experiences?

Carl continued by writing that he had become aware of how 'client-centered' and 'person-centered' had, for some people, become labels for two different – even opposing – activities and that to him "This makes no sense at all." Rogers also stated that while he thought that debate around whether the learnings from individual therapy could be applied in different contexts was a valid debate, he clearly believed that it was appropriate to grow and apply client-centred principles beyond therapy.

Such issues are useful topics for discussion, disagreement, and, I hope, for new and better solutions. But to speak of a “client-centered approach” and a “person-centered approach” as though they were entities opposed to each other is, in my estimation, a sure road to futile wrangling and chaos. I wish we might deal with the substantive questions that underlie that battle of labels.

Carl Rogers quite adamantly believed that he was he (a whole person) whatever the activity engaged in. To be fair to Patterson, Carl also wrote:

Others believe that the term person-centered is more easily misused, loosely used, or misunderstood than the term client-centered. That may be, but I still would like a term to describe what I do when I am endeavouring to be facilitative in a group of persons who are not my clients.

This paragraph feels very important to me. What can be deduced from it?

First, ***there is a tacit acknowledgement by Carl Rogers that the term person-centered is more easily misused, loosely used, or misunderstood*** than the term client-centered.

Second, there is a strong implication that ***client-centred refers to therapy*** and ***person-centred refers to non-therapy applications*** of the *learnings derived from* client-centred therapy.

Incidentally (or is it so incidental?) – it seems curious, doesn't it, that when such queries as ‘Client-centred? Person-centred?’ arise the words ‘***therapy***’ and ‘***approach***’ seem to disappear... Notice the title I gave this piece?

No ***therapy***...

... No ***approach***!

Can we, then, attempt to dispel “futile wrangling” and a “sure road to chaos” and identify any of the “substantive questions that underlie that battle of labels”?

I propose and then explore the following three tenets:

- Anything ***less than*** the six necessary and sufficient conditions for client-centred therapy (Rogers, 1959) is not client-centred therapy;
- Applications of client-centred philosophy, ways of being and theory in contexts ***broader than*** one-to-one therapy are what has become known as the person-centred approach;
- Anything ***additional to*** the six necessary and sufficient conditions for client-centred therapy (in the sense of the conditions being necessary but not sufficient) is not client-centred therapy.

What follows is some history, some facts, some personal thoughts – even some feelings, maybe... The history of it all seems fairly clear to me:-

The History Of Us All

Client-Centred Therapy

What appears to be a popular conception is that Carl Rogers and associates experienced, developed and researched client-centred therapy over a period of a couple of decades or so – ‘the Chicago years’, if you will. Client-centred therapy was very much about one-to-one counselling work, and included the development of rigorous theoretical frameworks - including, for instance, in depth client-centred personality theory and research into therapeutic processes and outcomes.

Alongside this profound and radical practical, theoretical and research work, Carl Rogers and associates engaged with developments around the importance of our being authentic as therapists, and experiencing and then offering unconditional positive regard and empathic understanding to our clients.

Person-Centred Approach

The popular conception continues along the lines that Carl then moved to California and over another couple of decades or so *additionally* furthered his work, moving towards broader applications of the philosophy, principles, attitudes, theories and processes identified through the developing of client-centred therapy – applying them to, for instance, education, encounter groups and communities (both national and international). Somewhere along the way, the term ‘person-centred approach’ began to be used in an attempt to embrace and include this branching out from the one-to-one focus of client-centred therapy into more far reaching, broader applications of what had been learned – from *a way of being with a client* to *a way of living*, almost.

Having stated at the beginning that the words ‘therapy’ and ‘approach’ seem to be dropped every time a client-centred/person-centred debate arises, can we be clear about what the words mean? **Therapy** is one-to-one counselling work – yes? An **approach** is something that approaches something else, or gets closer to it, or comes near... It is not the thing in-itself – for instance, an approach to living is not life itself. To approach can also mean to be similar in character to, to draw near. In other words, the person-centred approach comes near to client-centred therapy – is similar in character to client-centred therapy - but it is not client-centred therapy in-itself.

The person-centred approach ‘does exactly what it says on the tin’ – it is an approach to something (small or large groups, education, organisations et cetera) that has as its central focus the person or persons. It *approaches* (and is derived from) the central tenets of client-centred therapy – it *comes near to* the central tenets of client-centred therapy – **but it is not client-centred therapy**.

Having said that the person-centred approach ‘comes near to’ client-centred therapy, it might also be seen as a *departure* from client-centred therapy, in that the principles, values, beliefs and practices ‘departed from’ the narrow focus on one-to-one therapy and began to be applied in more far reaching ways...

... Yet these central principles, values, beliefs and practices nevertheless had and continue to have a great deal in common.

With no disrespect intended (and honestly – I mean no disregard), let us, for the purpose of illustrating the seemingly popular conception, generate two somewhat gross caricatures:-

The Nutter Cats Versus the Vets

With apologies to the *Rochester Rookies* and the *Ohio Oh-Highoes*, whom I pass by for now, the *Chicago Mobsters* – spearheaded by the *Vets* (veterans) might say that Chicago was where Carl did his ‘real work’ – his academic, thorough, research-based development of client-centred therapy – the foundations of it all.

*When you're a vet you're a vet all the way
From your first Q-Sort test academia holds sway
When you're a vet you stay a vet...*

Then, the *Vets* would say, Carl went ‘bonkers in the nut’ and swanned-off to crazyville... (Here I apologise to the *Wisconsin Wastrels*, also passed by for now.) The *California Hippies*, spearheaded by the *Cats*, indignantly assert that, on the other hand, Carl turned his back on all that ‘square’ stuff, man, and involved himself with the peace movement and other far out and groovy, cosmic projects.

*Some mad cats from Cali
Came down to our alley
Well we say 'That's cool – but just stay away from me and my mob
Images flash, defences clash - and green-eyed envy comes flying
Client... person... community... Fight!*

As over-the-top as these caricatures are, I have certainly witnessed a kind of ‘mobsters’ *versus* ‘hippies’ schism from many who have engaged in the ‘client-centred therapy *versus* person-centred approach’ debate. Yet how accurate is this seeming either/or (either client-centred/Chicago or person-centred/California)? Indeed, might our apparent history in fact be a popular ***mis***conception?

On the one hand, the origins of many of the broader applications of client-centred therapy – that is, the origins of the person-centred approach - can be traced back to the Chicago years. The University of Chicago Counseling Center received a lot of money for working with vets (ha!) – veterans returning from the Second World War. These vets wanted practical experience with clients, yet arrived as groups in Chicago for just six-week blocks. What to do with them? We don't want to turn away either these people or the income they generate – yet six weeks just isn't long enough to train people to work with clients. Hmm... Maybe if we were to put them together we might see if they can enrich themselves through working with each other – that might provide a solution of sorts to our dilemma... And that, according to Carl, was effectively the first encounter group.

Way back...

... In Chicago.

Then the University of Chicago asked the Counseling Center to work with overseas students, and 'integration groups' were formed. This was, according to Carl, his first engagement with international peace efforts.

Way, way back...

... In Chicago.

Then again, Carl talked very fondly¹ of the organisation of the University of Chicago Counseling Center, and one can see the origins of the person-centred approach as applied in organisations and institutions.

Way, way, way back...

... In Chicago.

On the other hand, although Carl is often perceived as engaging in the more broad ranging applications of the person-centred approach in his later years (his intercultural and peace efforts, for instance), he *never* abandoned one-to-one client-centred therapy. Carl Rogers conducted filmed demonstration client-centred counselling sessions right up to the end of his life.

Not so long ago...

... In California.

(And yes, many of the videos - both Carl talking about the Chicago years and filmed counselling sessions from the mid-1980's - are available, at a cost, from me in UK/European format, or from CSP – Center for Studies of the Person - in American format!)

(Sales pitch over.)

Client-Centred is Person-Centred, isn't it. (Carl said so!)

So: are the titles 'client-centred' and 'person-centred' interchangeable? Perhaps our reading of Carl Rogers himself may confuse us...

Carl at times spoke and wrote of how he, as an individual with deeply embedded philosophies, attitudes and beliefs (et cetera), was *he* – *Carl Rogers* – whether in one-to-one therapy or when facilitating an international peace gathering. Indeed, Carl is on record as writing that he *didn't care very much* about differentiating between client-centred and person-centred², because *Carl was being Carl* wherever he was and whatever he was doing. Fair enough – just as *I am me* whether I am sat writing this article, facilitating a training group, or being with a client or supervisee. I still hold, at my core, my client-centred beliefs and ways of being. In other words, there is a kind of *person-centred essence* which goes beyond the detail of the activity engaged in.

Client-Centred is *not* Person-Centred, is it. (Carl said so!)

However, Carl also wrote and spoke (many times, and over the same periods) of the *differences* between client-centred therapy and the broader applications of the approach³.

He said, for instance, that there was a difference in commitment between one-to-one therapy and other kinds of relationship – that in other relationships he has needs too, whereas in therapy there is a sharp focus on the world as the client perceives and experiences it. Carl also wrote of differences between one-to-one therapy and group work, stating what perhaps seems obvious: for instance, that in group work any facilitator offering of unconditional positive regard and empathic understanding is somewhat diffused – and therapeutic process tends to unfold more slowly⁴. In other words, I can authentically strive to respectfully enter (understand and empathise with) the private world of an individual in one-to-one therapy. In a group, I cannot genuinely respect and enter as deeply the private worlds of all community members, individually, at one and the same time.

You might also be interested to know that when asked in 1986 about group therapy, Carl replied that *he didn't do group therapy* – he did one-to-one therapy and he facilitated groups⁵. Whatever occasion brought a group together, Carl was willing to work with them. In such groups, *Carl would be Carl* – which included his beliefs and philosophies and values and his congruent, respectful, empathic way of being. He was also clear that he engaged with such groups as a person-centred facilitator, not as a client-centred therapist...

Client-Centred Therapy/Person-Centred Approach

As I write, my ideas crystallise: it seems to me that there are two main issues here. One is distinguishing between client-centred therapy as a one-to-one counselling activity as compared with broader applications as an approach - such as in education and groups and communities. The other is about what happens in therapy. Aha!

I think it possible to be very clear about the difference between client-centred therapy and broader applications of the tenets and practices arising from client-centred therapy – that is, the person-centred approach. It was the very advent of broader applications that led to the term 'person-centred' being coined. If I am facilitating a student-centred group I will not state that what I am doing is client-centred therapy - I remain, though, deeply steeped in the person-centred approach when facilitating a training group – applying, for instance, congruent, respectful and empathic ways of being in a learning context. Conversely, if I am therapist for a client I will not describe what I am doing as student-centred learning!

We can identify other differences, too. Carl Rogers (client-centred mobster and vet, 1959) formulated six necessary and sufficient conditions for client-centred therapy – one of which was that one person, whom we shall call the client, is incongruent, being vulnerable and anxious (condition two)...

Now let us suppose that a group of experienced client-centred therapists choose to come together for a weekend encounter – and you are one of these many experienced practitioners...

Are you going to assume that for the whole weekend you are the only relatively congruent person present and that all of your peers are relatively incongruent? I'm sure as hell not going to assume that!

However, I *will* engage in such a person-centred encounter nevertheless striving to maximise my congruence, unconditional positive regard and empathic understanding – for some of the time, at least. It is probably further true to say that at such a gathering my own 'internal balance' will not be the same as when I am offering therapy.

When offering therapy my commitment to the client is uppermost – at a person-centred encounter I will allow myself to experience a considerable commitment to me, too.

So... My belief is that I cannot omit a necessary and sufficient condition for client-centred therapy (i.e. condition two, client incongruence) and yet maintain that the encounter is still client-centred. Where would such modification of the necessary and sufficient conditions end? Can I do away with two persons being in contact yet claim with integrity that client-centred therapy is what I am doing – on my own, with no-one else?

Can I remove the condition of my being congruent yet maintain that I am client-centred? Blissfully unaware of all that is going on within me – yet nevertheless client-centred?

Or can unconditional positive regard or empathic understanding be removed, yet it be maintained that client-centred is still what it is? I don't fully accept you and/or nor do I strive to understand your world as you do or get in touch with how you are feeling – but hey – client-centred, or what!

Or can I remove the condition of the client perceiving (at least to a minimal degree) my unconditional positive regard and empathic understanding... Just because you have no idea that I am respectful and empathic with you doesn't mean that this isn't still client-centred, huh?

***Of course I can't omit any of the necessary and sufficient conditions
yet maintain with any integrity that I am client-centred!***

Carl Rogers wrote and spoke passionately about *completeness*, about organisms reacting as *an integrated whole*. If client-centred therapy is viewed as organic, then to *remove* any of the necessary and sufficient conditions for client-centred therapy is for client-centred therapy to be *incomplete* – to lose an essential ingredient of a meaningful, integrated, organised, congruent whole. Client-centred therapy would cease to be "fully functioning" if a necessary or sufficient condition were to be removed – be it contact, client incongruence (linked, I might add, with the depth of client-centred personality theory), therapist congruence, unconditional positive regard and empathic understanding, or the client perceiving the therapist's unconditional positive regard and empathic understanding (further linked with client-centred research into and discoveries about therapeutic process and outcomes).

Can we agree on this? That to *remove* a necessary and sufficient condition is for client-centred therapy to be incomplete? Can we, then, also agree that:

- ***Client-centred therapy* is one-to-one counselling work founded on the six necessary and sufficient conditions.**
- **The term *person-centred approach* is used to describe the broader applications of client-centred theory and practice in contexts *other than* one-to-one therapy?**

I sure hope so!

Agreeing that client-centred therapy is one-to-one counselling work founded on the six necessary and sufficient conditions and that the term 'person-centred approach' is used to describe the broader applications of client-centred theory and practice in contexts *other than* one-to-one therapy is entirely in harmony with our factually accurate, shared history.

It seems to me that the remaining debate, then, is about *additions* to the six necessary and sufficient conditions for client-centred therapy, rather than *subtractions*.

You *Cannot Be* A Person-Centred Counsellor!

Client-Centred 'Plus'?

I guess that we've all come across or heard of or seen advertisements for the therapist/counsellor who describes herself or himself as 'Person-Centred/Eclectic' or 'Person-Centred/Humanistic' or 'Person-Centred/Integrative' or 'Person-Centred Egan' – whatever. What does this mean? I guess, too, that the same applies to descriptions like 'the counselling relationship is based on the core conditions but I incorporate techniques from other approaches when helpful and appropriate' or 'the core conditions oil the cogs and wheels of useful aspects of other approaches' – and so on.

I have some evidence. I went through the 1999 Hampshire Association for Counselling Resources Directory. The 89 entries between them list 191 'styles of counselling' on offer – an average of over two per therapist. (My personal favourite, by the way, offers "Humanistic, Psychospiritual, Gestalt, Bioenergetics, Reichian, Biodynamic Bodywork, and Core Process".)

Only 22 counsellors (just under a quarter) identify one single, core approach. Of these, ten were Psychodynamic and three were Person-Centred. Three out of 89... Actually, that's not fair – because one person identified herself as a client-centred therapist. That's better! Four out of 89. We're doing well, aren't we? (The remainder, by the way, were two 'Eclectic', two 'Integrative', two 'Humanistic', one Cognitive-Behavioural – and one person who apparently had no approach at all.)

We may, in fact, be able with reason to discount 'Eclectic, Integrative, Humanistic and None', as we cannot be too clear about what these titles actually mean... Which leaves just 15 out of 89 (16.85%) counsellors identifying themselves as working within a single core approach.

Client-Centred/Person-Centred/'Rogerian'?

Only one person identified as client-centred only, three as person-centred. That's four, as I said. Or 17.39% of the 'person-centred' grouping. Yes, 19 people out of 23 (82.61%) identified themselves as person-centred/client-centred/'Rogerian' (Carl Rogers hated that term) *plus other approaches*. Necessary *and sufficient*?

So how many approaches did these so-called 'person-centred' counsellors offer between them?

A stunning ***forty-nine*** other approaches were identified as being incorporated into their practice by these 19 'person-centred' counsellors. The other approaches were: 'Integrative' (10), Psychodynamic (6), Transactional Analysis (5), 'Eclectic' (4), Gestalt (4), 'Humanistic' (4), Cognitive (2), Transpersonal (2), and one each for Behavioural, Bodywork, Brief Therapy, Cognitive-Behavioural, 'Comparative Psychodynamic', Egan, Existential, 'Holistic', Jungian, 'Provocative', Solution Focussed and Stress Management.

As I'm sure everybody knows, we have an amazingly well trained counselling crew in Hampshire. We have many therapists who have undertaken *thorough, in-depth training* in a variety of approaches to counselling, don't we? So many counsellors who have each completed so many diploma courses ...

I mean – it couldn't *possibly* be the case that someone's simply read a book or undertaken a 'comparative study' or attended a weekend workshop and then 'incorporated an approach into their counselling style' – could it?

Let me be even more provocative (someone actually advertises themselves in the HAC Directory as offering 'Provocative Counselling' along with their person-centred approach – so who knows? You might even find this therapeutic!): What does 'Eclectic' really mean? What does 'Integrative' really mean? I'd hazard a guess that many counsellors identifying themselves as 'Eclectic' or 'Integrative' have no real understanding of what these words mean. And what about 'Humanistic'? What does that mean? I put it to you that the majority of counsellors described as 'eclectic', 'integrative' or 'humanistic' in fact offer a 'pick'n'mix' mish-mash of a variety of approaches cobbled together willy-nilly with little or no thorough, in-depth training in all of the approaches identified, and with little if any internal consistency.

Stronger stuff still: such people who include as a part of their 'repertoire' the descriptions client-centred or person-centred not only have little understanding of client-centred therapy and/or the person-centred approach, they actually commit a grave injustice to those of us who *are* client-centred therapists.

Let us be absolutely clear about a couple of things. Do we or don't we have an obligation to clients to be clear about what it is that we are selling to them? (Remember – most of the people in a directory are working privately and charge a fee...)

If counsellor advertising were to fall within the Trades Descriptions Act, what would the law make of someone selling something when they don't even know what it is?

Let us be clear about another thing: any person using techniques and methods from approaches other than client-centred therapy is not *adding* in any way to client-centred therapy – they are **detracting** from it. Carl Rogers, to quote just one person who had something of an influence in the development of client-centred therapy, said that anyone who thinks it 'professional' to introduce different techniques for different clients at different times goes a long way towards destroying the possibility of a therapeutic relationship⁶. Strong stuff from Carl, too, eh? Let me provoke you even further:

Look beneath the surface, and I believe that almost inevitably you will find one of two things.

Either:

- (1) The counsellor who introduces techniques from other approaches does so when the client and/or the therapist and/or the counselling feels 'stuck' and the importing of a technique is aimed at usefully moving the client and/or the therapist and/or the counselling on; or

Or:

- (2) The counsellor believes the technique to be helpful in-itself (often because they have experienced it as helpful to themselves) and so has incorporated it into what they offer to clients.

Again I stress my view that *neither* of the above do not add anything at all to client-centred therapy – rather, they *both* demonstrate a fundamental misunderstanding of and lack of belief in the fundamental philosophy, principles, beliefs and practices of client-centred therapy – they demean client-centred therapy in a most tragic and regrettable way.

Again: Client-Centred or Person-Centred?

There has been a trend of late for those who work within the client-centred conditions (Rogers, 1959) as both necessary and sufficient to identify (or revert to identifying) themselves as **client-centred therapists**. They do so mainly to distance themselves from the apparent rise in those counsellors who use an eclectic mish-mash of approaches and techniques 'held together' by the core conditions – and who then describe themselves as 'person-centred'. All too often, it seems, there are those who think that 'person-centred' means 'anything goes'...

First of all let us dismiss the '*I use the core conditions as a foundation and build in other things around or on top of them*' stance: hogwash! One of the central, fundamental themes in client-centred theory is around wholeness – take away anything from the whole and there is no longer a whole, you are left with something incomplete, partial. It was Carkhuff who in 1968 called conditions three, four and five (congruence, unconditional positive regard and empathic understanding) the 'core' conditions...

If conditions one, two and six are missing, clearly there is something lacking. Yet remember that Carl Rogers stated that all six conditions were both **necessary and sufficient**. If I simply select three conditions and then engage in any number of additions, how can I with any **integrity** claim to be client-centred?

I for one have no intention of renaming myself either 'purist' or 'classical' client-centred. No! Rather, I hope that we can celebrate what and who we are and what we offer – a potential for enrichment and growth founded upon all six necessary and sufficient conditions.

Stuck or Schmuck?

Take, for example, the client who feels stuck. First, in my experience it is often the therapist who feels discomfort with the seemingly stuck client – so much for client-centred! It is all too often the counsellor's inability to stay with the being stuck, the counsellor's lack of respect for the client's apparent lack of movement, the counsellor's failure to deeply empathise with and understand the client's apparent inertia which results in the therapist feeling a need to 'help the client to move on'. You may have noted my use of words like 'seeming' and 'apparent'. There's a saying I quite like about seeing long silences or prolonged periods of seeming lack of movement as 'pregnant pauses' – *because at the end of a pregnancy something is born...*

I realise and acknowledge that I am trying to write with some force and that you may also have noted my use of words like 'inability' and 'failure'. Let me say here that I do not lack compassion for those who 'dive in' and 'rescue' clients who seem stuck. My belief is that counsellors who do so are well meaning and have a genuine concern for the health of their clients. I also believe with just as much passion that counsellors who rescue or move on clients through the use of imported techniques and methods do a grave injustice to client-centred therapy – and I wish that they would call themselves something else!

Second, client-centred therapists have beliefs around the *rights* of clients to autonomy and self-direction – how does introducing a technique to 'move someone on' respect these rights? Incidentally, 'moving a client on' in this way also means that unconditional positive regard has been thrown out of the window, too...

Third, and linked with point two, another fundamental client-centred belief is that human beings have within them vast resources and potential for growth (linked with a belief in the actualising tendency).

Stagnation or Growth?

One criticism – or even accusation – aimed at those who retain their trust in the necessary and sufficient conditions is that doing so represents stagnation and leaves no potential for growth – I have heard it said that such 'purists' are 'stuck in the 1950s'.

So – is it possible to grow, to realise potential, while retaining our trust in the 1959 conditions as both necessary and sufficient?

Remember, it was Carl Rogers himself who wrote that if we weren't so narrow-minded we might learn something from scientology!

Two persons are in contact. Hmm ... Colin Lago and Pete Sanders, amongst others, have been looking at the communicating and perceiving of the 'core conditions' via electronic media – who knows the future of on-line therapy! VRT – virtual reality therapy!

One person, whom we shall call the client, is incongruent ...
And another, whom we shall call the therapist, is congruent in the relationship ...

Clearly we have but 'scratched the surface' of all there is to know about psychological and organismic functioning or being. Who would dare to contend that there is little left to learn about 'what makes us tick'? I am quite a fan of Dr. Susan Greenberg – at the 'cutting edge' of psychological research. I feel tremendously excited and not a little hopeful that ongoing psychological discoveries would seem to be entirely in accord with client-centred personality theory. (For example what has been learned of our processes of experience and perception – how we each create our own worlds around us – is entirely congruent with statements within the Nineteen Propositions formulated so long ago by Carl Rogers, and what has been learned of the functioning of neural pathways would seem to fit well with ideas around symbolisation in the self concept and the notion of personal constructs.)

I really believe that this bodes well for all of our futures. Incidentally, I am not so convinced that ongoing psychological discoveries bode so well for other schools of counselling – remember that Sigmund Freud believed that it was only a matter of time before the actual physical structures of the id, ego and superego were discovered in the human brain. Sorry Siggy – you are the weakest link. Goodbye! One of my visions for the future is a closer working harmony between client-centred therapy and psychological research and discovery. Stagnant? I don't think so!

Another seemingly contentious area is 'spirituality'. There are some who maintain that Carl considered including spirituality as a 'new condition'. I think that we need to take great care with this one. Carl Rogers is on record, many times, as saying that during truly deep and profound moments with clients he experienced a kind of altered state of consciousness – something transcendental or even almost mystical. Carl was very specific about his using the word 'spiritual' in a non-religious context – ditto transcendental and/or mystical.

Open-minded to the end, Carl maintained that the boundaries of our knowledge were ever expanding. He noted with accuracy that even physicists, cosmologists and other scientists were beginning to embrace more fluid views of our universe. The death of Helen Rogers also served to challenge some of Carl's long held beliefs – he was an ardent non-believer in any afterlife up until his wife died, Carl reluctantly conceded the possibility of some other existence ... Again, unknown and uncharted territory.

To return to 'conditions', Rogers saw no reason why such altered state of consciousness or transcendental connections with being experiences could not fall within the realms of unconditional positive regard – and/or empathy.

Speaking of empathic understanding, can anyone claim to know all there is to know about intuition? Towards the end of his life, Carl became much interested in his more intuitive moments. Once again, there are those who allege that Carl considered intuition as an additional condition. Not so – intuition could come under the umbrella of empathic understanding.

My own intuitive moments are of great interest to me too. I have sometimes been able, but only with the benefit of hindsight, to form a tentative, personal theory through carefully watching or listening to tape or video recorded sessions. It seems like I absorbed, almost at a subliminal level, lots of little clues. It seems like these subliminal clues have kind of gathered and collected until they became strong enough to ‘punch through’ into my conscious awareness. I recall one male client, for instance, who spoke of his hurt and rejection at being ignored the day after a ‘one night stand’. At one point, I made a comment about his one night lover being another man. Both he and I were shocked – where on earth had this come from? After a stunned silence, he said something like “wow! You’ve just saved several weeks of therapy! I wasn’t ready to admit that to myself yet – never mind you!” When I listened later to the recording of this session, I realised that the client had been very careful, on a few occasions, to use non-specific gender terms. I had definitely *not* been consciously aware of this at the time. My best guess is that at some level I had dimly ‘clocked’ the client’s use of neutral gender terminology and that at some point this just kind of ‘popped up’ – seemingly from nowhere at the time – into words. As I said – at the time I was as startled as the client. I have to say, though, that at other times I have been unable to fathom the origins of my intuition.

Stagnant? No room for growth?
I don’t think so!

It seems to me that there will always be room to discover more about the process of therapy too – in fact, if we acknowledge that there is a great deal more to learn about the self, then how much more there has to be to learned about how two selves engage in an interpersonal encounter.

It seems to me that we can look at each and every one of the six necessary and sufficient client-centred conditions and see more than enough potential for development and growth ... And what of the gestalt of the conditions? (Whoops! I unwittingly introduced a word from another approach because I felt stuck and wanted to move this article on. Perhaps I might abide for a while with my stuckness ...)

Applications of the Person-Centred Approach in Therapy?

You cannot be a person-centred counsellor. Okay?

Either the person-centred approach arose out of client-centred therapy, or client-centred therapy has become a significant part of the person-centred approach. They are *not* one and the same thing. Of course I can be one and the same person engaging in different activities - but the activities remain precisely that: *different*.

It seems to me that part of our current confusion is that some of the principles, philosophies, beliefs and practices of client-centred therapy informed and guided broader applications – the person-centred approach...

What has now happened, I think, is that some of the principles, philosophies, beliefs and practices of the person-centred approach have kind of ‘been turned around’ and reapplied in therapeutic contexts.

There can probably be no clearer example of this than **Natalie Rogers**, daughter of Carl. As I understand it, Natalie applies fundamental client/person-centred tenets to working with various arts media in a therapeutic setting. Some people have expressed feeling stunned that Natalie – *daughter of Carl* – Rogers experienced a real anxiety that she would not be accepted – indeed would even be shunned – by certain groups of people because her work was not person-centred...

Yet once again it all seems pretty clear to me. Natalie does **not** describe her work as client-centred therapy. Nor does Natalie describe herself as offering person-centred counselling. Natalie is very clear when she describes her work as Expressive Arts Therapy. No problem – it ‘does exactly what it says on the tin’!

In AD 2000 I arranged for Susan (Director of CSP – the Center for Studies of the Person) and Joachim Schwarz to visit the UK and offer their person-centred sandtray workshops. Many people at the time engaged in debate along the lines of ‘Yes – but is it really person-centred?’

Let me stress once again: Susan and Acki describe their work as Person-Centred Sandtray therapy – **not** as client-centred therapy or person-centred counselling. Again, their work ‘does exactly what it says on the tin’ – that is, they apply person-centred thinking and practices to sandtray work.

The main objection I heard as regards working with sandtrays in a person-centred way was that the introduction of methodologies derived from anywhere other than the client (i.e. methodologies from an external locus of evaluation) cannot be in accord with beliefs about human beings having *within themselves* vast resources and potential. My own concern, for what it is worth, is that my direct experience of sandtray is that it tends to focus predominantly on what has already been symbolised within my self-concept. In other words, I have my doubts as to whether sandtray work (person-centred or otherwise) connects as meaningfully with my organismic valuing processes which have yet to be symbolised (but which are nevertheless available to awareness) or, indeed, the actualising tendency of my whole being – rather, it may serve to maintain and enhance my **self**-actualising only.

However, person-centred approach principles and practices can be applied to working with sandtray – just as they can be applied in education, groups and communities. And if people experience trainee or student-centred learning as helpful – great! If people attend a meaningful encounter group – great! If people feel enriched through engaging in a community guided by person-centred attitudes – wonderful! If I learn something of me through undertaking sandtray work – boffo! And if I grow through expressive arts – magnificent!

It’s just that I want my client-centred therapy to be client-centred therapy...

And it seems to me that the application of client-centred therapy and/or person-centred approach principles in clearly defined therapeutic settings is very different indeed to the one-to-one counsellor or therapist self-identifying as client-centred when she or he is nothing of the sort.

So far you've heard from me – my thoughts, my interpretations and expositions of client-centred theory and principles and philosophy and practices and... You might listen to me, you might not. You might agree with me, you might not. You might be influenced by me, you might not.

If you won't listen to me, might you find it within yourself to listen to clients?

After all, aren't clients our *raison d'être*, our reason for being?

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