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**BETWEEN FREEDOM AND DESPAIR: EXISTENTIAL CHALLENGES AND
CONTRIBUTIONS TO PERSON-CENTRED AND EXPERIENTIAL THERAPY**

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BETWEEN FREEDOM AND DESPAIR: EXISTENTIAL CHALLENGES AND CONTRIBUTIONS TO PERSON-CENTRED AND EXPERIENTIAL THERAPY

ABSTRACT

This article explores a range of contributions that existential thinking may be able to make to the theory and practice of person-centred and experiential therapy. It begins with an overview of existential philosophy and the development of existential therapies, and then goes on to look at four aspects of existential theory and practice that may be of particular value to person-centred and experiential practitioners: a phenomenological exploration of freedom and choice; an appreciation of the challenges and limitations of existence; an understanding of human being as fundamentally with-others; and an understanding of human beings as meaning-seeking creatures in a world where there are no given, ultimate meanings. On this basis, the article argues that existential thinking can provide a counterbalance to some of the implicit biases within the person-centred and experiential worlds, and that it can help person-centred and experiential practitioners develop deeper levels of empathy and acceptance with their clients.

KEYWORDS

Existentialism, existential therapy, freedom, meaning, critique of person-centred and experiential therapies, new developments in person-centred and experiential therapies, intersubjectivity

INTRODUCTION

For many years, person-centred and experiential therapists have shown a keen interest in existential ideas and therapeutic practices. Rogers dialogued with many of the great existential thinkers of his day, including Buber, Tillich and May (see Kirschenbaum and Henderson, 1990); and Gendlin (1970) examined in detail the relationship between existential thinking and his focusing-oriented approach. More recently, a number of key figures within the person-centred and experiential fields have drawn on existential ideas, concepts and philosophies in developing their approaches to therapeutic practice (for instance, Mearns and Thorne, 2000; Schmid, 2002; Swildens, 2002; Van Kalmthout, 2002; Worsley, 2001).

Given, however, the breadth of the existential domain, there is much of this field that remains un-explored from a person-centred and experiential perspective. Furthermore, most of the writings from Gendlin (1960) onwards have tended to explore the commonalities between person-centred/experiential and existential approaches – such as the challenge to scientific objectivism (Gendlin, 1970; Rogers, 1969), the emphasis on I-Thou encounters (Worsley, 2001), and a holistic, embodied and ‘process’ understanding of human experiencing (Gendlin, 1970; Rogers, 1969; Worsley, 2001) – rather than areas of difference and challenge. A third reason why there is a continuing need to explore the relationship between person-centred/experiential and existential approaches is because of the recent emergence of a ‘British school’ of existential analysis (see Cooper, 2003, ch. 7), which presents new challenges – as well as new areas of commonality – to person-centred and experiential practitioners. The aim of this article, then, is to examine several aspects of existential thinking and practice that have yet to be fully explored from a person-centred and

experiential standpoint, and to discuss the challenges and contributions that they may be able to make to person-centred and experiential approaches. The paper begins, however, with a brief introduction to existential philosophy and the therapeutic approaches that have emerged from it.

EXISTENTIAL PHILOSOPHY AND THERAPIES

Existential philosophy, at its most fundamental level, can be understood as a reaction to systems of thought that tend to de-humanise the lived-actuality of human existence. Søren Kierkegaard (1992) and Friedrich Nietzsche (1967), generally considered the fathers of existential thought, railed against nineteenth century scientific, religious and philosophical systems of belief – most notably G. W. F. Hegel's (1949) 'absolute idealism' – which tended to reduce human existences down to deterministically-related essences or bit-players within a grand historical narrative. Instead, they argued that each human being should be understood in terms of his or her individual, concrete, subjective human existence. Twentieth century existential philosophers, like Jean-Paul Sartre (1958) and Martin Heidegger (1962), developed these ideas, and incorporated into them the phenomenological method of Edmund Husserl (1960), through which they strove to describe something of this human lived-existence. Existential philosophers have described this existence in many different – and, at times, divergent - ways, but a number of common themes have tended to emerge in their writings: that human existence is unique, verb-like, freely-choosing, future-orientated, limited, in-the-world, with-others, embodied, open to guilt and anxiety, and able to choose whether to 'authentically' face these givens of existence or 'inauthentically' turn away (Cooper, 2003).

From the 1920s onwards, a disparate number of psychiatrists and psychotherapists began to turn to these ideas as a basis for their clinical practice. Foremost amongst these was Ludwig Binswanger (1963), a Swiss psychiatrist, who drew on Heidegger's (1962) *Being and Time*, Buber's (1958) *I and Thou*, and Karl Jasper's (1963) phenomenological psychiatry to propose a more holistic, humanistic and relational means of understanding psychological distress. Binswanger's work came to form the basis for 'Daseinsanalytic' psychotherapy (see Boss, 1963), a Heideggerian form of psychoanalysis which is still practiced on the European continent today. In the early 1930s, the Austrian psychiatrist, Viktor Frankl, also began to develop an existentially-informed approach to psychotherapy, which drew particularly from the German phenomenologist, Max Scheler (see Frankl, 1988). Frankl's 'logotherapy' or 'Existential analysis', put particular emphasis on helping clients to find meaning in their lives, and adopted a relatively didactic therapeutic approach. In the 1950s, existential approaches to therapy spread to the United States, principally through the work of Rollo May (see May, Angel and Ellenberger, 1958), who combined the more individualistic insights of the earlier existential philosophers – particularly Kierkegaard (1980) – with a broadly humanistic outlook. This 'existential-humanistic' approach to psychotherapy has retained a high profile in the United States – and, indeed, worldwide – through the writings of some of May's highly gifted mentees, including Irvin Yalom (see Yalom, 1980), James Bugental (see Bugental, 1981), and Kirk Schneider (see Schneider, 2003). The late 1950s and early 1960s also saw the emergence of an existential approach to therapy in the United Kingdom, through the work of the Scottish psychiatrist R. D. Laing (see Laing, 1965). Laing drew on the teachings of Binswanger and Jaspers – as well as existential philosophers like Sartre and Buber – to develop a particularly phenomenological, de-pathologising account of

schizophrenia and other forms of mental distress. Drawing on Sartre (1976), Laing also explored the kinds of tangles, deceits and misunderstandings that can beset human relationships (see Laing, 1969; Laing, Phillipson and Lee, 1966). Laing, himself, moved away from an existential standpoint in many of his later writings (see, for instance, Laing, 1976) but his emphasis on de-pathologising clients and striving for an egalitarian therapeutic relationship was developed by such followers as Emmy van Deurzen (2002), who went on to found the ‘British school of existential analysis’ in the early 1990s.

EXPERIENCING FREEDOM

In attempting to put the concrete actuality of human existence back in to an understanding of human beings, existential thinkers and practitioners have placed particular emphasis on the human capacity for freedom and choice (for instance, Sartre, 1958). From an external, ‘objective’ standpoint, it may be possible to view human beings as causally determined mechanisms, but from the inside of human experiencing, choice and volition are ineradicable aspects of our being-towards-the-world.

Existential psychologists and therapists have also tried to say something about how we actually experience freedom and choice. Some of the most original writing in this domain comes from the American psychiatrist, Leslie Farber (2000), who distinguished between automatic, ‘unconscious’ willing; and deliberate, wilful choice-making. These ideas were developed by Rollo May (1969), who identified a number of elements in the experiencing of choice: ‘intentionality’: the basic human tendency to ‘stretch’ towards something; ‘wishing’: ‘the imaginative playing with the

possibility of some act or state occurring’; and ‘willing’: ‘the capacity to organise one’s self so that movement in a certain direction or towards a certain goal may take place’ (1969, p.218).

Like the existentialists, Rogers places great emphasis on the human capacity for freedom, and the centrality of choice to the process of psychotherapy and personality change (see, for instance, Rogers, 1961; Rogers, 1977; Rogers and Freiberg, 1994). In recent years, however, person-centred and experiential writers have tended to neglect this dimension of human experiencing (though see Finke, 2002; Worsley, 2001). In Rogers’ writings, too, there is a tendency to leave unexplored the actual phenomenological experiencing of choice. More significantly, perhaps, some of the core concepts within a person-centred understanding of human being can be seen as neglecting, if not negating, the role of choice in the process of personal change. The notion of ‘growth’ (Rogers, 1961), for instance, and the widespread appropriation of biological and naturalistic metaphors to articulate this process (Finke, 2002), tends to portray human development as a spontaneous, automatic process, rather than one that also involves agency, choice and active decision-making. Potatoes in a basement bin, for instance, do not *choose* to send their sprouts upwards. Similarly, Rogers’ (1959) notion of actualisation as an ‘inherent’ ‘motivation’ tends to suggest that human beings are impelled along a particular path; without the capacity to choose between self-neglect and self-maintenance, self-destruction and self-enhancement. Of course, Rogers’ theory does allow for the possibility of a movement towards self-destruction and self-alienation, but the attribution of this movement to an external factor – conditional positive regard – betrays an even more a-volitional sentiment at the heart of his thinking. As Rollo May writes: ‘If you conclude that the trouble lies in the fact

that human beings are so susceptible to influence by their culture, so obedient to orders that they are given, so pliable to their environment, then you are making the most devastating of all judgements on...human beings. In such a case we are all sheep, dependent upon whoever is the shepherd' (1990, p.244).

Existential and person-centred/experiential views of freedom and choice also contrast in that, from the former perspective, one could argue that it is simply not possible to make generalised statement about the kinds of choices that people should make: whether, for instance, it is better for them to follow their own instincts or conform to the demands of others, symbolise felt-experiences or leave them un-symbolised. This contrasts, somewhat, with the person-centred and experiential fields, in which certain ways of being – for instance, ‘an increasing trust in one’s organism’ or ‘increasingly existential living’ (Rogers, 1961) – tend to be associated with more mature levels of development. Mearns and Thorne (2000) write here of a ‘tyranny of growth’, in which experiences that are perceived as forward moving and ‘growthful’ tend to be valued over those that are seen as restraining or socially mediated. In contrast to this, existential therapists like Emmy van Deurzen (2002) have written of the ‘dilemmas of existence’, arguing that, at all times, we are pulled between the poles of various dualities, neither of which are intrinsically right. At some times, then, it may be better to conform to the demands of others, and at other times it may be better to follow our own instincts. Here, the only certainty is that choices are difficult, fraught and uncertain – there is no guarantee that if we ‘go with the process’ everything will work out for the best, or that if we do what is best for ourselves, it will also be best for others. From an existential perspective, then, human development is not like stepping

aboard a conveyor belt, but like coming to a series of crossroads, each of which forces us to make a particular choice as to how to proceed.

Following on from this, a further contrast between existential and person-centred/experiential views of freedom and choice is that the former tends to place a greater emphasis on the more discomforting aspects of this experiencing. Whilst Rogers (1961) equates the experiencing of freedom with the 'good life', existential philosophers like Kierkegaard (1980) and Sartre (1958) have also highlighted the ways in which freedom can bring with it such feelings as anxiety, guilt and dread. This is for a number of reasons. First, as Yalom puts it, 'alternatives exclude' (2001, p.148). That is, in choosing one thing, we are unavoidably choosing *against* something else, and there is always the anxiety-evoking possibility that we may reject the better alternative. Second, the more we experience ourselves as free, the more we are likely to feel responsible for the course of our lives, as well as for the impact that we may have on the lives of others. From an existential perspective, then, an increased acknowledgement of our freedom may also bring with it an increased openness to such feelings as regret, remorse and guilt, as well as an awareness of our ethical responsibility to respond to the call of the Other (Schmid, 2002). Third, the more we experience ourselves as free and as beings who can choose who we want to be, the more we may come to perceive that there is nothing solid or certain at the core of our identity: that we are essentially a hollow 'nothingness' (Sartre, 1958) that chooses and creates its own essence.

THE LIMITATIONS OF EXISTENCE

From an existential perspective, then, the more an individual acknowledges their freedom, the more they may be likely to experience such feelings as anxiety, guilt and emptiness (Kierkegaard, 1980; Sartre, 1958). For existential therapists such as van Deurzen (2002), however, such feelings are not only corollaries of freedom, but ineradicable aspects of human life. Life, as van Deurzen states, is hard, tough, rough and unfair, filled with crises, disappointments, injustices and failures (1998; 2002). It is, she continues, an 'endless struggle where moments of ease and happiness are the exception rather than rule' (1998, p.132). This position contrasts somewhat with the more optimistic outlook of the person-centred perspective, which holds that it is possible for human beings to move towards a 'good life' (Rogers, 1961). This, as Rogers makes clear, is not a state of unending happiness, but there is little mention of the anxieties, struggles, and discontentments that may continue to beset this way of being.

As Swildens (2002) notes, Rogers also tends not to acknowledge the unavoidable limitations of human existence. Indeed, he explicitly states that such issues as death and loneliness were no subjects to be dwelled upon. In contrast, existential philosophers and therapists have put great emphasis on the fact that human freedom runs up against unavoidable 'limitations', 'boundary situations', or 'givens' (Cohn, 1997; Heidegger, 1962; Jaspers, 1932; Sartre, 1958). Heidegger and Jaspers place particular emphasis on the boundary condition of death: the fact that our being is a being-towards-demise, ending, not on the summit of actualisation, but over the cliff top in the abyss of annihilation. For Heidegger, however, the key point here is not that we will one day die, but that, at some level of consciousness, we have a knowledge

that our lives are rapidly and unavoidably hurtling towards that demise. Hence, we can not help but be anxious in the face of the limited possibilities that we have available, and experience guilt and regret for the possibilities and potentialities that we did not – and may never – actualise

For Heidegger (1962), another given of existence is ‘thrownness’: the fact that we are born into a particular social, historic and economic context that is not of our making or choosing. Hence, existential philosophers have argued that we can not determine our beginnings, can not determine our endings, and throughout our lives are rocked and swayed by a ‘huge tide of accident’ (Jaspers, 1932).

From an existential standpoint, then, individuals who experience intense and enduring feelings of anxiety, regret or helplessness may not necessarily be suffering from some form of pathology. Rather, they may be very much in touch with the realities of their – or human – life (Laing, 1965; Spinelli, 1994). Here, again, there is something of a contrast with the person-centred and experiential fields, which retain elements of a more medical worldview, by tending to associate such experiences as anxiety or self-alienation with psychological maladjustment and a lack of congruence between the self-concept and experiential field (Rogers, 1959). Existential thinking, then, throws into question many our assumptions about what is ‘dysfunctional’, ‘impaired’, ‘abnormal’ or ‘maladjusted’. Could it be, for instance, that individuals who experience ‘difficult processes’ (Warner, 2001) are actually more aware of the uncertainties, contingency and fragilities of human existence than those who are functioning ‘optimally’?

INTERSUBJECTIVITY

Yalom (1980) suggests that another given of human existence is that we are inexorably alone. Existential philosophers, however, have tended to place greater emphasis on the fact that we are inextricably intertwined with others (for instance, Buber, 1958; Heidegger, 1962; Marcel, 1949; Merleau-Ponty, 1962).

Buber (1958), for instance, argues that the 'I' never exists in isolation, but is always related to an Other, and that this relationship can take one of two forms: an 'I-It' form and an 'I-Thou' form. In the I-It attitude, the Other is experienced as a thing-like object: an entity that can be categorised, analysed and broken down into essences. By contrast, in the I-Thou attitude, the Other is beheld, accepted and confirmed as a unique totality. For Buber, such an I-Thou attitude requires a meeting with the Other as they are in the present – with the true otherness of the Other – rather than a self-reflexive encounter with one's own expectations and/or needs. For Buber, such an I-Thou encounter also requires the I to take the risk of fully immersing itself in the relationship, of allowing it to be affected and changed in ways that it could not predict.

Clearly there are parallels here between Buber's (1958) notion of the I-Thou attitude and Rogers' (1957) conception of the ideal therapeutic relationship; and, despite the efforts of some commentators (for instance, Friedman, 1985) to emphasise the differences between the two, much of this would seem to be relatively spurious (see Anderson and Cissna, 1997; Schmid, 2001). With respect to the theory and practice of person-centred and experiential therapies, however, it is useful to highlight two areas of contrast. First, for Buber, the I-Thou relationship requires the I to fully hold on to his or her otherness in the face of the Thou, for without difference, no true dialogue or

encounter could take place. Such a position, then, lends support to a more dialogical conception of person-centred therapy (see, for instance, Schmid, 2002) than one in which the therapist is a reflecting mirror, or ‘neutral’ presence, to the client. Second, for Buber (1988), the need for positive regard is not understood as ‘a secondary or learned need, commonly developed in early infancy’ (Rogers, 1959, p.208) – as Rogers and his group construed it in some of their most dubious theoretical speculation (see Standal, 1954, p.29)ⁱ – but as the most basic human yearning. He writes:

The human person needs confirmation because man [sic] as man needs it.... Sent forth from the natural domain of species into the hazard of the solitary category, surrounded by the air of chaos which came into being with him, secretly and bashfully he watches for a Yes which allows him to be and which can come to him only from one human being to another. It is from one man to another that the heavenly bread of self-being is passed. (1988, p.61)

In contrast to Buber, other existential philosophers have taken a more sceptical view towards human relational possibilities. Sartre (1958), in particular, has tended to portray relationships as inherently conflict-ridden, unfulfilling and frustrating, and is well known for describing hell as ‘other people’. For Sartre, we have an inherent tendency to ‘it’-ify others, and because we know others are viewing us as objects too, human relationships become a battle of objectify-or-be-objectified. Such a battle, according to Sartre, takes on even more ominous proportions in ‘loving’ relationships, where we strive to possess the love of another, yet want that love to be freely given. Here, then, there is a strong contrast with Rogers’ (1961) more optimistic view of the possibilities and potentialities for human relating.

Some of the most interesting attempts to develop Sartre’s work on interpersonal relationships has been undertaken by Laing (1965; 1969; Laing et al., 1966). In discussing the aetiology of schizophrenia, for instance, Laing argued that a key factor

was the individual's experience of being de-personalised and 'petrified' (i.e. turned into an object) by those around him or her, and having his or her experiences denied. Indeed, for Laing, it was the denial that any denial was taking place that frequently drove an individual most forcefully towards their own inner, phantasy world. From a person-centred and experiential perspective, however, perhaps the most valuable aspect of Laing's work is his exploration of interpersonal perceptions and 'meta-perceptions' (Laing et al., 1966): the realm of 'social phenomenology'. Meta-perceptions are an individual's perceptions of the way an other perceives him or her, and Laing argued that a disjunction between an individual's meta-perceptions, and the actual perceptions that others hold of him or her, could lead to a significant breakdown in interpersonal – and intrapersonal – well-being. If, for instance, I perceive you as confident and self-assured, but you think I perceive you as relatively vulnerable, then my attempts to 'knock you off your pedestal' might be perceived by you as a deliberate assault on your greatest vulnerabilities. If you then respond with anger and aggression, I may then interpret this as your confidence-expressing-itself-as-arrogance, with the result that I may try and knock you down further, to which you defend more, *ad infinitum*. Whilst the experiential approaches to therapy, then, have done much to help us understand the nature of human experiences, Laing's interpersonal phenomenology promises to take this a step further: towards understanding the complex, interpenetrative relationship between one person's experiences and those of another.

For existential philosophers such as Heidegger (1962), however, our intertwinement with others go beyond the purely dyadic level, towards the societal and cultural spheres. Such a radical intersubjectivity is rooted in Heidegger's understanding of

human being as fundamentally tool-using and practically engaged in its world. For Heidegger, our being is not first and foremost a private, internal experiencing, but an in-the-world *doing*, in which the tools we use are an integral part of our existence. At the level of immediate experiencing, for instance, the keyboard that I am typing on is not something separate and distinct from me, but an integral part of my typing-these-words-here. Only when I press the wrong key or focus specifically on the keyboard does it become something distinct from my personal 'I'. Given, then, that this keyboard has been constructed by people other than me, my existence-at-this-moment is inextricably infused with the existence of others. More importantly, however, my very thinking about these ideas – indeed, my thinking in general – is based on the socially-constructed tool of language. At every moment of my being, then, the sociocultural world that I inhabit is also inhabiting me – I am inseparable from my social environment.

Such a radically intersubjective position challenges the idea that an individual can ever fully be 'themselves': autonomous, independent and with an entirely internalised locus of control. Indeed, along the lines of Holdstock (1993), it raises the possibility that the very notion of a discrete and individual 'self' – a concept at the heart of much person-centred thinking and practice – is actually the product of a particular Western discourse. More broadly, however, Heideggerian thinking – and the social constructionist movement that has emerged from it (e.g. Gergen, 1999) – challenges person-centred and experiential therapists to acknowledge that *all* our beliefs and assumptions are ultimately part of a particular worldview – the 'discourse of person-centred and experiential therapies' – and not reified truths about how things 'actually' are. Such an understanding, then, calls on person-centred and experiential therapists to

reflect on our assumptions and biases. Within the experiential therapies, for instance, there is a tendency to assume that it is helpful for people to access and symbolise their ‘emotions’, ‘feelings’ or ‘felt-senses’ (Gendlin, 1996; Greenberg, Watson and Goldman, 1996). More fundamentally, there is an assumption that there are such ‘things’ as emotions or felt-senses to be accessed and symbolised. The radically intersubjective position outlined above would not necessarily question the tremendous therapeutic potential of such assumptions, but it would encourage us to be mindful of the fact that such assumptions are exactly that, and not fixed and unalterable truths about the human conditionⁱⁱ. The value of such an awareness is that we can then be more careful about imposing these assumptions upon clients who may have very different worldviews. It allows us, for instance, to be more accepting of, and less directive with, a client who says that he doesn’t feel it is right for him to ‘get in touch’ with his emotions; or who, indeed, feels that it is not useful to think about himself in these terms.

MEANING, MEANINGLESSNESS AND AUTHENTICITY

Alongside these characteristics of human existence, existential philosophers, most notably Heidegger (1962), have also argued that human beings are fundamentally future-orientated. That is, our way of being is not caused or determined by events in our past, but directed towards goals and possibilities in our future. In understanding how a client experiences his or her world, then, existential therapists may be as concerned with helping clients explore their future possibilities and meanings as they may be with helping them explore their pasts (cf. Bohart, 2001). Indeed, Frankl’s logotherapy is specifically concerned with helping clients discover the meaning of their lives, and of the particular situations that they encounter. In contrast to Frankl,

however, many existential philosophers (for instance, Camus, 1955; Sartre, 1958) and therapists (for instance, Yalom, 1980) have argued that there are no given, external or ultimate meanings in our lives to be discovered – only personal meanings that we can create for ourselves. For if we are free, then we must also be responsible for the life-meanings that we construct; and if we are beings-towards-death, then all our projects and meanings must be transitory and passing; and if we are inextricably immersed within a sociocultural nexus, then all the meanings we have ascribed to our lives are ultimately only social constructions, with no extrinsic or final meaning or value.

For Heidegger (1962), this latter realisation – that we are ‘interpretation all the way down’ (Dreyfus, 1997, p.25) – brings with it feelings of anxiety, dread and unsettledness. It is as if we suddenly realise that our whole world is nothing but a stage set and we are merely playing a part: absorbed in a world of empty constructs and roles that only give the illusion of some ultimate meaning-motivating action (Dreyfus, 1997). Heidegger describes our being-in-the-world at those moments of realisation as ‘authentic’: for whilst we have not stepped out of the sociocultural nexus of meanings, we have understood it for what it is. Here, it is interesting to note that Heidegger’s concept of ‘authenticity’ is rather more specific than Rogers’ (1957) concept of ‘congruence’ or ‘genuineness’. It is not just about being true to one’s existence, but about being true to the feelings of anxiety and dread that arise from an acknowledgement of one’s fundamental meaninglessness and nothingness.

Furthermore, from a Heideggerian perspective, human beings do not start off as congruent wholes only later to fall in with the social world. Rather, in our thrownness we are intrinsically and inherently fallen into the social world, and can only later gain some authentic awareness of it.

DISCUSSION

In this article, I have argued that person-centred and experiential therapies, like all therapeutic practices, are permeated with certain assumptions and biases. In particular, I have argued that there is a tendency within the person-centred approach – and, to some extent, the experiential ones – to adopt a relatively optimistic perspective on the human condition: a belief that human beings can actualise their potential and grow towards a fully-functioning ‘good life’. As biases go, this is by no means an un-therapeutic one, and there is plenty of evidence to suggest that a therapist’s optimism and hope for the client is a key element in the successfulness of the therapy (Snyder, Michael and Cheavens, 1999). Nevertheless, from a person-centred, phenomenological standpoint, such a bias can also lead to difficulties in the therapeutic work. First, it can mean that therapists are less able to fully accept, and empathise with, certain aspects of their client’s experiences: in particular, feelings such as hopelessness, despair, confusion, emptiness, meaninglessness, interpersonal frustration and dread. There is no suggestion here that person-centred or experiential therapists will be dismissive or critical towards such feelings, but there may be a tendency to see them as less-than-optimal, pathology-related ways of being that are in need of ‘working through’. Second, it can mean that therapists have implicit assumptions about the direction in which clients should be moving in. Third, and this is something I have particularly witnessed in trainee counsellors, it can mean that therapists become frustrated, anxious or disturbed when their clients do not appear to be improving and moving in the ‘right’ direction. In this article, I have also suggested that the discourse of person-centred therapy may tend to de-value clients’ affiliative

needs – particularly the need for confirmation from others – such that these experiences may also receive less confirmation from person-centred therapists.

Existential thinking, then, may be an ideal source of balance to some of the biases that can emerge within the person-centred and experiential approaches, leading to a more accepting, empathic, phenomenological and non-directive way of working; and also one that is more in keeping with the contemporary postmodern zeitgeist (e.g. Lyotard, 1984). First, it provides a philosophical framework in which a therapist can *truly* accept and validate a client's more discomfiting feelings – as well as his or her need for interpersonal confirmation – perceiving these as intelligible, meaningful and entirely valid ways of experiencing the world that are no less mature or healthy than such feelings as optimism, autonomy or creativity. Put another way, it can help therapists to fully accept their clients as they are *now*, rather than as who they might be once they have 'worked through' their difficulties. Second, it can help person-centred and experiential therapists move away from a position of knowing which direction – albeit at the most general level – that clients need to move in, towards a genuine stance of 'un-knowing' (Spinelli, 1997); in which there is a deep respect for, and empathy with, the client's struggles and uncertainties in the face of the dilemmas of existence. Here, then, the therapist *genuinely* does not know whether it is better for the client to trust their own intuition or listen to the voice of others, change or stay as they are; and whilst the therapist may have their own ideas about which direction a client should move in, they recognise these as part of a particular sociocultural discourse, rather than as an 'objective' and reified truth. Moreover, in being faced with the most unanswerable of questions – 'What is the meaning of it all?' – existential thinking reminds person-centred and experiential practitioners of the limits

of their knowledge and techniques, and the fact that we are all novices in the face of life's mysteries. Finally, Laing's (Laing et al., 1966) interpersonal phenomenology can help person-centred and experiential therapists move further away from a pathologising perspective, by construing psychological difficulties in terms of clashes of interpersonal praxis, rather than as internal – or externally-caused – pathologies of functioning.

Without doubt, then, existential thinking challenges certain aspect of person-centred and experiential therapy – particularly at the more optimistic, individualistic and medicalised end of the spectrum. In this article, however, I hope to have shown that person-centred and experiential therapists can gain much from continuing to engage with existential ideas (as, undoubtedly, the reverse is also true). More specifically, I believe that existential ideas can play a significant part in the development of a radically accepting, radically de-pathologising and radically humanistic form of person-centred therapy, in which clients are genuinely accepted and confirmed for who they are, *as they are now*, with all the struggles and difficulties and dilemmas that they confront. Ultimately, then, existential thinking does not undermine the person-centred project, but has the potentiality of deepening and furthering it. Perhaps this is because, despite the divergences in philosophical and psychological opinion, both approaches are fundamentally committed to understanding human beings in the most dignified, respectful, and validating way possible.

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ⁱ Drawing on behaviourist – and highly mechanistic – assumptions, Standal (1954) argues that the infant develops a need for positive regard because he or she comes to associate perceived differences in the experiential field of another – identified through such affiliative behaviours as smiling, cooing, and fondling – with the satisfaction of more ‘primary’ needs, such as the need for food, warmth, liquid and relief from pain.

ⁱⁱ This, then, is a very different reading of the relationship between existentialism and psychotherapy to Gendlin’s (1970), who equates the existentialist concept of existence with ‘gut sentinence’ or ‘bodily-felt experience’, and thereby adopts a more modernist reading of existential ideas.

Person-Centered and Experiential Psychotherapies seeks to create a dialogue among different parts of the person-centered and experiential tradition, to support, inform, and challenge each other and to stimulate their creativity and impact in a broader professional, scientific and political context. The aim of the journal is thus to encourage, and disseminate worldwide, new work on person-centered and experiential therapies, including philosophy, theory, practice, training and research. The journal will not give preference to any parts of the Person centred and experiential supervision is an appropriate environment to discuss and deepen insight on challenging professional issues, to unleash the internal resources of the supervisee-practitioner through reflective elaboration, and to integrate new skills into professional practice. Aims and goals. Callifronas and Brock [16] presented their thoughts on supervisory. aim, goals and tasks from a person centred view. They argued that the aim of a person centred supervisor is to work for the personal and professional development of the supervisee and unleash her/his internal resources, thu Person-centered therapy, which is also known as client-centered, non-directive, or Rogerian therapy, is an approach to counseling and psychotherapy that places much of the responsibility for the treatment process on the client, with the therapist taking a nondirective role. Purpose. His therapy has also been applied to persons suffering from depression, anxiety, alcohol disorders, cognitive dysfunction, and personality disorders . Some therapists argue that person-centered therapy is not effective with non-verbal or poorly educated individuals; others maintain that it can be successfully adapted to any type of person. World Association for Person-Centered and Experiential Psychotherapy and Counseling (WAPCEPC). c/o SGGT Office, Josefstrasse 79, CH-8005 Zürich, Switzerland. Non-directivity in client-centered therapy. Person-Centered & Experiential Psychotherapies, 5(1), 36-52. CrossRefGoogle Scholar. Brodley, B. (2011a). Reasons for responses expressing the therapist's frame of reference. Between freedom and despair: Existential challenges and contributions to person-centered and experiential psychotherapy. Person-Centered and Experiential Psychotherapies, 2(1), 43-56. CrossRefGoogle Scholar. Cooper, M. (2004). Existential approaches to therapy. In P. Sanders (Ed.), The tribes of the person-centred nation. An introduction to the schools of therapy related to the Person-Centred Approach (pp. 95-124). Ross-on-Wye: PCCS Books. Google Scholar. Cooper, M., & McLeod, J. (2011). Person-centred therapy is actualising its potential in creative and original growth, forging new pathways and understandings by Mick Cooper Psychodynamic therapists are cold and aloof, cognitivebehavioural therapists are not interested in the relationship and gestalt therapists boss their clients around as with most orientations in our field, numerous myths and stereotypes also exist about the person-centred approach. Between freedom and despair: Existential challenges and contributions to person-centred and experiential therapy. Person-Centered and Experiential Psychotherapies, 2(1), 43-56. 13. Worsley, R. (2001). Process Work in Person-Centred Therapy: Phenomenological and Existential Perspectives. Basingstoke: Palgrave. 14. Levitt BE.