

CLIENT-CENTERED AND FOCUSING:
ONE WHOLE THERAPEUTIC METHOD

I.-2. The etiology of illness

I.-3. The factors in therapy that enable the reorganisation of the self-concept, enable change and movement

II. The attitude of the therapist

III. Résumé

PRAXEOLGY

I. Höger's pyramid

II. Specific interventions on 5 different stages

II.-1. Stage 1

II.-2. Stage 2

II.-3. Stage 3

II.-4. Stage 4

II.-5. Stage 5

THEORY AND PRAXEOLGY

I. Wolfgang Keil's attempt to connect „the two methods“ in theory

THEORY

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Rogers

For constructive personality change to occur, it is necessary that these conditions exist and continue over a period of time:

1. Two persons are in psychological contact.
2. The first, whom we shall term the client, is in a state of incongruence, being vulnerable or anxious.
3. The second person, whom we shall term the therapist, is congruent or integrated in the relationship.
4. The therapist experiences unconditional positive regard for the client.
5. The therapist experiences an empathic understanding of the client's internal frame of reference and endeavours to communicate this experience to the client.
6. The communication to the client of the therapist's empathic understanding and unconditional positive regard is to a minimal degree achieved.

Höger's¹ Pyramid

- 1. The level of the Therapeutic Relation**
(versus other possible kinds of relations, for example mother/child, lawyer/client...)
- 2. The level of the Characteristics of the Therapeutic Relation**
(i.e. Theory of Therapy, Principles of Therapy...)
- 3. The level of the Classification of the Therapeutic Interventions**
(i.e. Guiding, Confrontation...)
- 4. The level of the Concrete Intervention**

The Five Stages

Stage1	The client has open access to his/her experiencing when he/she wants to (in attunement with the therapist)
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Stage2 The Felt Sense of the client that is not yet there needs to be triggered by the therapist

Stage3
trigger

The Experiential Response of the therapist as a necessary
for the experiencing of the client

Stage4 Specific aspects of the self of the client had no possibility to develop – (Re-)Filling“ is asked for – (Re-)Building out of the therapist's experiencing in accordance with the client

Stage5 It is the therapist's duty to establish contact to the client and therefore to enable contact to himself/herself

Stage 1 – OPEN ACCESS TO EXPERIENCING

The aim and at the same time the end of therapy is reached, when the client is able to be consistently congruent in view of her own empathy and unconditional positive regard and in concordance of her therapist's congruence, empathy and unconditional positive regard – which usually is the case within the late phase of psychotherapy.

Stage 2 – THE FELT SENSE THAT IS NOT YET THERE, BUT NEEDS TO BE TRIGGERED

Mostly verbal interventions to activate the process will make it possible to bring forth experiencing out of non-experiencing.

Guiding/Leading Steps are now appropriate.

Stage 4 – THE EXPERIENCIAL RESPONSE OF THE THERAPIST AS A NECESSARY TRIGGER FOR THE EXPERIENCING OF THE CLIENT

A direct immediate „answer“ of the therapist addressing the client from his/her experiencing in touching / contacting way – so the client has the possibility for his/her own experiencing.

Stage 4 – BLOCKED ACCESS TO EXPERIENCING (RE)FILLING - (RE)BUILDING

Specific aspects of the Self of the client had no possibility to develop by lack of empathic understanding in early childhood or later.

The resonance of the therapist is „motherly“ in two aspects = a „holding“ quality and a pedagogic quality.

Stage 5

The therapist's duty is to establish contact to the client and therefore to enable contact for the client to himself / to herself.

THEORY AND PRAXEOLOGY

„The two methods“ in theory

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„The two methods“ in praxeology

Stage I

No differences

Stage II

there to

Triggering the Felt Sense which is not yet
reach a therapeutic level

Stage III

Response / Congruence

Focus is on the how

Stage IV

(Re)filling / Containing / Holding a function

Most therapeutic methods

would use

verbally or „bodily“

Stage V

Contact function

Most therapeutic methods would use as

well