My Personal Approach to Counselling: A Humanistic View of Therapy

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My Personal Theory of Counselling: A Humanistic Approach to Therapy

Much like any living organism needs the proper nurturing environment in which to grow, humans require a supportive environment to achieve positive therapeutic change (Corey, 2009). As a novice counsellor, I believe a humanistic approach to counselling is best because it focuses on the individual as a whole, not on problematic fragments of the individual. In other words, humanistic theory views people as more than just their behaviours, feelings and thoughts, and treats them as individual beings with unique experiences (Hansen, 2000).

The purpose of this paper is to present my personal theory of counselling. I will take a humanistic view of therapy, and utilize important assumptions and techniques from the humanistic theories client-centered counselling and Gestalt therapy. My goal is to formulate a theory of change that creates a warm, empathetic and genuine environment, which supports clients to become their true, authentic self.

**Philosophical Assumptions**

The philosophical element of a good theory holds that each theory has working assumptions that guide it (Magnusson, 2006). The assumptions are important to understand because they impact all aspects of that theory. In this section, I will present my philosophical assumptions by describing the nature of humans, their healthy and unhealthy functioning and finally, the nature of change.

**The Nature of Humans**

As a novice counsellor, I strongly believe in the client’s potential to reach their goals in therapy. The humanistic view states that individuals are resourceful and have the capacity to overcome their dysfunctions, given the appropriate environment (Hazler, 2001). In client-centered therapy, the therapist views the client as possessing the potential for self-directed growth (Knight, 2007). I agree with this view as it is empowering to the client to have the therapist trust that they are fully capable of handling their issues. This belief is known as organismic self-regulation in Gestalt therapy, and posits that individuals are self-motivated towards problem solving (Yontef & Jacobs, 2011). I believe that as a therapist, demonstrating this trust in clients will mobilize them towards change. Further, the client will be more confident to handle issues that occur outside the therapy sessions.

Another humanistic assumption is that individuals have the tendency to choose health over dysfunction (Yontef & Jacobs, 2011). This basic drive towards fulfillment proposes that humans instinctively maintain and enhance themselves, as they are constantly evolving (Corey, 2009). This view is also shared by Gestalt theorists who believe that people are “inclined toward growth and will develop as fully as conditions allow” (Yontef and Jacobs, 2011, p.353). I believe that holding this expectation for clients will positively influence the therapeutic relationship, and thus motivate the client in the change process, by placing responsibility for health in the individual’s hands.

Finally, in Gestalt therapy, it is theorized that humans cannot be viewed separately from their environment (Corey, 2009). There is a major emphasis in Gestalt on the relationship between the individual and his or her surrounding environment, known as the perceptual field (Yontef & Jacobs, 2011). This holistic view of Gestalt therapy proposes that the contact between the person and environment is a major factor in shaping the individual’s personality (Yontef & Jacobs, 2011). When the therapist views the person and environment as a whole, it provides the sufficient condition to discover the “combination of factors that influence who the person is, how the person acts and how the person sees the world” (Hazler, 2001, p.153). I agree that each client’s individual life situation, or perceptual field, must have a continual presence in the therapeutic process. I also support the humanistic view that each client is an individual with an individual experience of their environment, and thus each encounter between client and therapist is a unique event (Corey, 2009). In my opinion, viewing clients as individual beings with unique situations and needs allows for flexibility in the therapeutic process, and thus, for the client to move more freely towards becoming their fully actualized self.

**The Nature of Healthy Functioning**

I believe psychological health is defined by the degree to which an individual is aware of and comfortable with his or her authentic self. In humanistic terms, a healthy individual is one that has a fully integrated sense of self, is able to consciously maintain awareness of the present moment and has the capacity for creative adjustment (Yontef & Jacobs, 2011).

Client-centered therapy emphasizes the importance of an assimilated self-concept, where the individual has a consistent relationship with the concept of self (Raskin, Rogers & Witty, 2011). This means that a healthy functioning individual is able to symbolize experiences into their self-concept. An example of this could be a woman who prides herself on being a good mother, but one day finds herself yelling at her children as they are fighting. Instead of viewing herself a bad parent for yelling at her children, she reasons that she is still a good mother and a good person who sometimes loses her temper in stressful situations. The ability to integrate the experience of yelling at her children into her concept as a good mother creates a congruent sense of self that is open to trusting her experience (Raskin, Rogers & Witty, 2011). I believe this is important for healthy functioning because this approach encourages the individual to trust his or her capabilities, allowing for greater control over the ability to change.

In Gestalt terms, health is expressed through awareness of shifting need states. Being aware of what is actually happening in the moment creates the experience of the individual being in touch with his or her environment (Yontef and Jacobs, 2011). Gestalt therapy has a major focus on the present, where a deeper understanding of the patient’s situation in life can arise during a therapeutic encounter. Through this recognition and continual awareness in the moment, it is likely that there will be less room for maladaptive thinking (Yontef, 2007). I believe that a healthy individual will have the ability to be in the present and experience what is occurring in that moment. This will prevent the individual from remaining stuck in old patterns of dysfunction. By experiencing awareness in the present moment, there is a potential for learning, and thus attaining continual positive growth (Yontef & Jacobs, 2011). It is my opinion that encouragement of continual growth is central to healthy functioning, as opposed to remaining in unhealthy patterns of dysfunction.

Finally, it is important that a healthy individual be able to use this awareness for creative adjustment. Creative adjustment is a Gestalt term referring to one’s ability to continually balance the polarities of the figure and ground (the forefront and background) in his or her perceptual field (Rhyne, 1990). According to this approach, life is dominated by ongoing polarities such as life and death, connection and separation and so on (Yontef & Jacobs, 2011). It is important for the individual to be able to balance these polarities as they take turns in the figure, the most prominent position, within his or her perceptual field. If the client denies an emotion entering into awareness, such as the pain from death of a loved one, the individual will experience dysfunction.

The importance of awareness in the therapeutic setting resonates with me. I believe many clients enter therapy unaware of how deeply unresolved feelings affect them on a daily basis. The therapeutic setting should be a safe place to help the client to explore these feelings.

**The Major Causes of Problems**

The presence of dysfunction is usually the reason an individual seeks counselling. I believe the definition of dysfunction (in a therapeutic sense) is when an individual is fragmented, and denying who he or she truly is as a person. It is important as counsellors that we are able to recognize and be aware of the presence of these types of dysfunction in our clients. Three humanistic views of dysfunction are an incongruent sense of self, trying to be someone different from the true self, and the presence of unfinished business (Corey, 2009).

An incongruent sense of self occurs when discrepancy exists between the individual’s self-perception and the reality of their experience (Corey, 2009). This may occur when the individual denies integrating experiences into the self-structure (Raskin, Rogers & Witty, 2011). Taking from the previous example, if the mother who shouted at her children perceived this experience as proof that she was a bad mother, it would not fit into her self-structure of being a good mother. As a result, she would experience psychological tension at the incongruence between this experience and her sense of self. Experiences such as these can be threatening to the individual’s sense of self, causing more rigid organization of the self-structure (Raskin, Rogers & Witty, 2011). I believe an incongruent sense of self can be the reason behind many presenting client issues. Many people who have not had formal counselling are unaware of the judgements they place on themselves, and the psychological problems that follows. Helping the client to become aware of their incongruence can be a major step in the healing process.

A related cause of dysfunction in the humanistic view is trying to be someone one is not. This is known as the Paradoxical Theory of Change in Gestalt therapy (Yontef, 2007). It is described as denying aspects of the true self, which leads to internal conflict. In other words, “the more people try to be who they are not, the more they stay the same” (Yontef, 2007, p.17). As being an authentic, whole person is important to healthy functioning in Gestalt therapy, the denial of self causes major problems for the individual (Yontef & Jacobs, 2011). I believe this denial is a good indicator of dysfunction, as it is impossible for an individual to be fully healthy and actualized if they are denying parts of themselves, for example, the mother who denies that she sometimes loses control of her anger. I believe it is important for a healthy individual to accept and be aware of who they truly are, including any perceived negative aspects.

A third cause of problems in the humanistic view is unfinished business. This could be any unresolved issues that are lingering the background of the client’s awareness (Corey, 2009). Unresolved issues could manifest (and often do) into psychological dysfunction unless they are properly dealt with. Indicators of the presence of such issues could express themselves physically, such as crossed arms or a tapping foot (Corey 2009). I feel it is important that this unfinished business be identified in the therapeutic process to prevent it from causing further disintegration in the individual.

**The Nature of Change**

I believe it is important to continually recognize the client’s potential for change towards healthy functioning. In regards to the change process, a major theme in humanistic theory is a tendency for individuals to strive for psychological health. In client-centered therapy, self-actualization is essential to the nature of change. Individuals are viewed as continually evolving organisms, seeking to enhance themselves (Hazler, 2001). This tendency is a major motivation for clients to succeed in the therapeutic process. In client-centered therapy, the self-actualization tendency sees behaviour as goal-directed, attempting to satisfy needs (Hansen, 2000). In this sense, the therapist views the client as “self-righting” (Raskin, Rogers & Witty, 2011, p.162), and uses this knowledge to better understand the client’s motivations. I believe this is helpful to the therapist in the sense that it facilitates the therapist’s understanding of the client, and thus strengthens the effectiveness of therapy.

In Gestalt terms, this concept is known as tendency towards growth. Much like client-centered’s self-actualization, this tendency states that people are self-regulating and growth oriented (Yontef & Jacobs, 2011). Given the choice, individuals will gravitate towards psychological health rather than dysfunction. I believe that many individuals come to therapy when they are disengaged from their true, authentic self, and want to seek help in re-integrating themselves. From a Gestalt perspective, this could be viewed as an individual striving for meaning or purpose in life (Corey, 2009). I believe the counsellor should continually acknowledge this potential in clients, as it recognizes that the client is the best judge on what his or her journey to health should look like, instead of the counsellor imposing his or her own direction.

**The Counselling Experience**

**My Definition of Counselling**

Counselling is a process through which an individual seeks help from a professional to explore the issues that are causing dysfunction in his or her life. Together, the client and therapist work collaboratively to uncover issues that may be creating the dysfunction. Once these reasons for dysfunction are identified, the client and counsellor work together to create a plan of coping strategies. The overall goal of this process is for the client to develop insight into the true and authentic self, and build a sense of trust that he or she is fully capable to deal with issues, both in therapy and eventually without the help of the therapist.

**Counselling Process Beliefs**

**The counsellor-client relationship.**

I believe the most important factor in creating positive change in a client is the quality of the relationship between the counsellor and client. If the client does not respect or like the counsellor (or vice versa), I do not believe therapy will be effective. The therapeutic relationship is of the utmost importance in humanistic theory. According to client-centered therapists, it is the foundation for success (Raskin, Rogers & Witty, 2011). Rogers (1957) proposed the necessary and sufficient conditions for therapeutic change, including congruence, unconditional positive regard for the client, and empathetic understanding (Raskin, Rogers & Witty, 2011). The relationship between client and counsellor should be warm, genuine, authentic and collaborative (Corey, 2009). I fully appreciate this approach to counselling. It is my opinion that the client must feel appreciated, respected and genuinely cared about by the therapist. I do not believe that therapist neutrality is helpful for the client, as it may create feelings of mistrust or suspicion of the therapist. For a client to be able to express deep rooted emotions and share intimate, personal information, it is important that the therapist be warm and genuine to honour the trust the client is instilling in him or her. Similarly, the therapist should respect the client and value his or her knowledge and experience.

This therapeutic relationship should also collaborative. I feel it is important for the therapist and client to be equals, rather than there exist an uneven power dynamic. This type of unequal therapeutic relationship occurs in theories where the counsellor is viewed as the teacher and the client is the student, such in Albert Ellis’ rational emotive behaviour theory (Ellis, 2011). I believe this approach is disempowering to the client and hinders the development of the client’s sense of capabilities to handle dysfunction. In client-centered therapy, the collaborative relationship is crucial; clients’ perception of the therapist as accepting facilitates self-acceptance (Corey, 2009). There is no step-by-step manual for the client counsellor relationship, as every encounter is unique between two different individuals (Hazler, 2001). I believe a relationship based on mutual respect is essential to success.

**Roles of the client and counsellor.**

As aforementioned in humanistic theory, the roles of the client and counsellor are essential in obtaining therapeutic goals (Corey, 2009). The client and counsellor both have important roles in the therapeutic process. A major role of the counsellor is to demonstrate unconditional positive regard for the client (Raskin, Rogers & Witty, 2011). This includes demonstrating warmth and acceptance towards the client, regardless of what the client says or does. I believe this type of nonjudgmental acceptance is crucial for a successful relationship.

The counsellor should also be congruent, meaning he or she is constantly integrating the client’s experiences into awareness (Raskin, Rogers & Witty, 2011). A similar approach is taken in Gestalt therapy, where the therapist’s main goal is to bring the client’s awareness into the present moment (Corey, 2009). I believe this is an important role for the counsellor because it supports the client in experiencing what is happening in the present moment, and allowing them to become aware of their process, or way of reacting. Being present is essential for a therapist, as emphasized in both Gestalt and client-centered approaches (Corey, 2009). I believe that a fully present therapist will be able to effectively support the client in his or her own discovery of self-awareness.

The client plays an important role in the therapeutic process as he or she is directing the therapy, following the belief in the non-directive attitude of client-centered therapists (Witty, 2007). I believe that when the therapist controls the direction of therapy, the client may lose valuable moments of experiencing awareness in the present moment. Too much control from the therapist may block the client’s process, or take the therapy in a direction that is not necessarily best for the client. This approach supports the trust in the client’s ability capabilities.

**Session length, duration and number of sessions.**

In agreement with the non-directive approach, I believe the client should decide how long the therapeutic process should last. In Gestalt, the therapy can be long or short term, as the range of modalities is diverse (Yontef & Jacobs, 2011). The most important factor in deciding when to end therapy is the client’s perception of when he or she feels ready to move on (Corey, 2009). I believe that ideally, therapy should run somewhere between ten to twenty sessions, once a week for an hour per session, as effective, short-term approaches to counselling presently appear to be desirable in terms of time commitment and expense for clients (Blashki et al., 2009). However, in following the humanistic approach, I would be open to shortening or lengthening this process, based on the individual client’s needs.

**Emphasis on the past, present and future.**

In terms of the past, present and future, I believe the present is the most important of these three themes. The present moment is when the client is able to engage in meaningful work, and experience and identify important feelings that can facilitate the healing process. There is a major emphasis on the present in humanistic theory. It is theorized that in the present, the client is able to do the best work in self-awareness (Corey, 2009). Gestalt therapy emphasizes the here-and-now, where many importance pieces of information pertaining to the client’s life situation will come up (Yontef, 2007). For example, as a client is speaking of her relationship with her mother, she may continually tap her foot. The therapist might ask her to bring her attention to the behaviour of the tapping foot, and explore the feelings that are associated. Refocusing the attention from the past and bringing her awareness into the present may reveal valuable information on feelings and reactions she was unaware of.

The past may arise and is acknowledged in Gestalt therapy, yet the therapist’s focus is to bring the past into the present moment (Yontef & Jacobs, 2011). For example, when a client is telling a story from the past, the therapist might ask, “describe the situation as if it is happening right now” (Corey, 2009). This way the client is able to bring any unfinished business into the present. In Gestalt therapy, it is not the past that affects us, but rather our views and unresolved feelings around the memories (Yontef & Jacobs, 2011). Phenomenology, in Gestalt terms, helps the client to analyze their typical way of thinking so they can discern between what is being felt and perceived in the present moment, and what is residual issues from the past (Yontef, 1993). I believe the present is where the richest therapeutic work can be done, as the client is fully allowed to be him or her authentic self.

**Emphasis on beliefs, emotions and behaviours.**

In my opinion beliefs, emotions and behaviours are all interrelated and should play an important role in the therapeutic process. I believe that to fully understand and have unconditional regard for the client, it is important to consider all three areas.

Emotions are important to explore since they are central to healthy functioning (Yontef & Jacobs, 2011). When a client feels safe to fully express emotions, there is an opportunity for learning. For instance, if a client suddenly feels a wave of anger after discussing a seemingly neutral topic, such as visiting a friend, there may be important information to explore pertaining to the client’s unfinished business. In client-centered therapy, emotions facilitate goal directed behaviour (Raskin, Rogers & Witty, 2011). Exploration of these emotions is important for identifying motivations in the client’s behaviour, and for encouraging self-awareness in the client.

In terms of behaviour, in Gestalt therapy, there is an emphasis on physical behaviours in the present moment. Bodily movements may reveal issues arising for the client in that moment (Yontef, 2007). It is important for the therapist to pay close attention not only to what the client is saying, but also their physical movements. I believe that there is a strong relationship between emotions and physical behaviour, and that unexpressed emotions will often manifest physically. By being a present and observant therapist, I would use the client’s physical behaviours as indications of emotional issues that are arising in the moment. By discussing what I notice, it would be my intention to bring the client’s attention to feelings that may be outside of his or her awareness (Yontef & Jacobs, 2011).

Beliefs often stem from the client’s perceptions of events and thus provide meaningful insight into the client (Knight, 2007). For example, a client may create anxiety by worrying about what might happen or, ‘futurizing’ about an upcoming event, such as giving a speech. Futurizing is an indicator that the client is not aware in the present moment (Yontef & Jacobs, 2011). Fears about the future may lead to further anxious feelings and may even have a negative impact on future performance, such as the actual presentation of the speech. I agree with the Gestalt approach, which encourages the client to stay in the present moment, and work through the anxiety he or she is presently experiencing, in order to mobilize the nervous energy and prevent further negative impact from the anxious thoughts (Yontef & Jacobs, 2011).

**Change process including resistance.**

The process of change in my theory will largely depend on the individual’s goals. In following the principled non-directiveness of practice from client-centered therapy, I believe the client should mainly be the one to direct the course of treatment (Raskin, Rogers & Witty, 2011). By allowing the client to have direction of the therapy sessions, it acknowledges his or her capability to problem solve, and honours the fact the client, not the therapist, knows what are the most important issues to work on. As the therapist, I will be present to support and facilitate the client’s journey.

In the initial stage of therapy, I would allow the client to discuss whatever he or she is comfortable sharing. The first session is not for diagnosis, history-taking or determining the length and course of treatment (Raskin, Rogers & Witty, 2011). Instead, it is to provide the client with space to just be. I would be sure to answer any of the client’s questions in a supportive manner, without judgement, as is emphasized in client centered therapy (Corey, 2009).

Moving into the next phase of therapy, I would incorporate the Gestalt techniques of encouraging the client to stay in the moment, and explore the feelings associated with the issue we are discussing. I believe it is important that the therapist be fully present and prepared to gently remind the client to stay with a feeling and describe what is coming into awareness (Yontef & Jacobs, 2011). During the middle phase of treatment, I will also incorporate unconditional positive regard towards the client as a major method of facilitating client change (Kensit, 2000). This type of positive regard for the client allows the individual to overcome psychological distress (Lemoire & Chen, 2005). I believe this is crucial to creating an environment where the client feels safe and able to work on his or her issues. As a counsellor, I will strive to let my clients know that any issues they bring into the therapy session will not be met with a judgemental attitude. Unless the therapist is willing understand and unconditionally accept a client, I do not think the therapy will be very effective. In my experience, judging and shaming people is not an effective approach to encourage change. I believe that if a client perceives that the therapist is fully accepting of, and genuinely likes the client, the client is in a better position to move towards health.

Resistance is important to address in therapy. In Gestalt therapy, resistance happens when a client wants to deny a part of the self that he or she feels is threatening (Yontef & Jacobs, 2011). For example, a woman may avoid expressing anger towards her husband, because she was taught at a young age that nice girls don’t get angry. As a counsellor, I would encourage the client, when ready, to explore these feelings in the moment. Expressing this anger may be very healing for the client.

I would continue with my approach of supportive facilitation and unconditional positive regard until the client decides it is time to end treatment. As aforementioned, the client is the one largely to determine the duration and course of treatment (Corey, 2009). I would honour the client’s wishes and encourage discussion of ending treatment at that time.

**Interventions.**

When intervening with a client, I will use a combination of Gestalt therapy’s active approach, with client-centered therapy’s warmth and genuineness.

Gestalt therapy is more active in its approach to interventions than is client-centered therapy (Yontef & Jacobs, 2011). Interventions used in Gestalt therapy that I would like to incorporate into my practice include experiments, focusing, exaggeration, reversal exercise, and the empty chair technique.

Gestalt therapists use experiments to facilitate in the client’s self-awareness (Yontef, 2007). Types of experiments range from relatively simple, such as asking the client to breathe deeply, to more active experiments, such as asking the client to respond to something in the opposite way they usually would (Corey, 2009). For example, a patient who feels he is taken advantage of by his wife might be asked to respond to her next request by saying “no”. The purpose of this would be to allow the client to experience an alternate method of approaching a situation, hopefully with a better outcome than previously used methods. I believe this is a good method to allow the client to experience different ways of coping with difficult situations. I also like the fact that it gives the client the option to use experiments in later situations on their own, outside the therapeutic process

Another important part of the intervention emphasized in Gestalt therapy is focusing. Focusing means bringing awareness to the present (Yontef & Jacobs, 2011). An example of this could be encouraging the client what they are aware of in the moment by asking, “Tell me what you are experiencing right now” (Yontef & Jacobs, 2011). I believe this is an important intervention to use, because often clients will become caught up in telling the story of their experience, and less on the emotions that accompany it. By bringing focus onto the emotions, there is more opportunity to do deeper work. Focusing is central to Gestalt therapy, as it encourages awareness in the moment (Rhyne, 1990). I believe this is a very useful method as it encourages the client to fully experience emotions in the moment, and avoid denying their true self. This exercise takes courage from the client, as some feelings in the moment can be extremely intense and at times, frightening. Yet I believe that fully experiencing these feelings will allow the client to return to their integrated, authentic self.

Exaggeration is another Gestalt intervention I would like to employ in practice. This is when the therapist asks the client to exaggerate something, such as a bodily movement, in order to become more aware of their behaviour (Corey, 2009). An example of this could be asking a client who frequently frowns to try wearing an exaggerated frown while talking, in order to become aware of how it may emphasize negativity while she is speaking. I believe this awareness-raising exercise will give clients a better insight into themselves, and the subtle messages they covey which they may be completely unaware of.

Another intervention I am interested in using is reversal exercise. Here the therapist will ask the client to try the reverse of something they normally do (Corey, 2009). For example, if a client is usually timid and quiet on first dates, the therapist may ask him to pretend that he is confident and talkative while on the date. This method is a type of experiment which can allow the client to experience something they may be fearful of (such as first dates). This exercise may also allow the client to integrate denied parts of their authentic self (such as the fact that he actually is a talkative, outgoing man once he gets over his shyness) (Corey, 2009).

Another valuable intervention is the empty chair technique (Yontef & Jacobs, 2011). In this technique, the client faces an empty chair, and is asked to imagine someone they have conflict with is sitting there, and to express the feelings and thoughts that arise (Corey, 2009). I believe this is a very powerful intervention, which can allow the client to release feelings that he or she has felt unable to communicate to the appropriate person. It also works well in situations where it is not possible to fully express the feelings to the person, such as instances of confronting one’s boss, or a loved one that has passed away.

Finally, in light of all these valuable techniques, I will strive to constantly demonstrate the core conditions of client-centered therapy: congruence, unconditional positive regard and empathetic understanding (Corey, 2009).

**Success.**

In my view, a successful therapeutic outcome largely depends on the client’s perception of success of the outcome, which is also true in client-centered therapy. The definition of success for a client varies for each individual. As I see each client as a unique individual, it is difficult for me to come up with a specific list of criteria for successful therapy. However, the one common theme, and most important criteria would be positive feedback from the client

It is also important to me that beyond therapy, the client is able to symbolize experiences, and accept them as congruent with their self-concept, as in Gestalt therapy (Corey, 2009). I believe facilitating the client’s process in learning the skills to deal with problems is one of the most important elements in the therapeutic relationship. Although it is clearly important to help the client to deal with the present existing issues, I would like to see my clients leave my office with a new set of skills to handle life’s inevitable ups and downs.

**Contextual Factors**

I believe it is important that a good theory address diversity within clients. Both client-centered and Gestalt therapies are able to work with a diverse group of clients. The core conditions of client-centered therapy are considered universal (Corey, 2009) and therefore are applicable in many different contexts and languages. The emphasis on the non-directive approach also facilitates applicability to many different counselling situations (Corey, 2009). Gestalt therapy’s emphasis on awareness in the present moment allows for applicability to different contexts (Yontef & Jacobs, 2011). Consistent with my view of clients as being unique individuals, it would be contradictory to subscribe to a step-by-step process of treatment for every client. Many classic theories of psychotherapy were created by Caucasian, middle- to upper-class men (Corey, 2009), which in my opinion narrows their scope of applicability to a diverse range of clients. It is important to me to continually research and re-evaluate my theory of counselling to integrate current findings in the field.

**Reflection**

**Weaknesses of My Theory**

As with Gestalt therapy, my approach requires focused attention, which may be demanding on the counsellor (Corey, 2009). As with client-centered therapy, my theory also requires a high level of sensitivity and a naturally warm approach, which may not be comfortable or natural for some therapists. Furthermore, the non-directive approach may not work in every situation, such as highly resistance clients, those who are mandated to be in therapy, or those who simply benefit from being explicitly pushed in therapy.

Furthermore, this theory may not work well with some clients who have a difficult time expressing emotions, as required in Gestalt (Yontef & Jacobs, 2011). Some exercises, such as the empty chair technique, may be a challenge for some who have trouble expressing disappointment in important people in their lives, such as their parents, because of strict cultural beliefs that parents should never be challenged (Corey, 2011).

Finally, because the client and counsellor must have mutual respect for one another, there may be some instances of having to refer a client to another counsellor when the two simply lack this mutual respect. While this is the best option for both parties, it may lead to some frustration and confusion in the client as to why he or she is being referred on. In this instance I would make sure to explain to the client that I will not be able to effectively help him or her based on my area of specialty, and would be happy to find a more appropriate counsellor to address his or her specific needs.

**Why I am Drawn to this Theory**

I am drawn to this theory because this approach comes naturally to me. I believe the relationship between the client and counsellor is very important in facilitating client change. The warm, authentic approach of client-centered therapy seems logical to me. Also, I value the empowering aspect of this approach. Gestalt and client-centered therapists are not the all-knowing experts in the therapeutic relationship (Yontef & Jacobs, 2011). Instead, the patient’s experiences and knowledge are highly valued. I believe this trust and faith in the client’s abilities is crucial to a positive outcome in therapy.

I also believe in continually checking in with my biases. An example of this occurred when I began to examine my beliefs around women working in the sex trade. Initially I held a narrow-minded view of sex workers. However, as I began to research this topic, and speak with women working in this area, I realized how my judgements were holding me back from creating a positive working relationship with these potential clients. For me, examining my biases takes courage, as it is difficult at times to admit that I can be judgemental towards certain things because I pride myself on being an open and accepting individual. However, this type of ongoing awareness work has helped me to become a more open and accepting individual.

I believe my humanistic theory based on Gestalt and client-centered therapy is a good theory for a novice counsellor such as myself. It is important to fit they type of therapy with the therapist, and in this case, I feel very closely aligned with this theory.

**Conclusion**

In conclusion, I have presented a humanistic theory of counselling based on assumptions and techniques from client-centered and Gestalt therapies. My theory values the quality of the client-counsellor relationship, the importance of awareness in the present moment, and warmth and unconditional positive regard.

I realize that as I continue to evolve as a counsellor, my values and views will most certainly shift. I also place great importance on current empirical research in the field of counselling. I believe being a good counsellor is taking the responsibility to constantly keep up on the latest research and continually examining my own values and beliefs, in order to provide the best support I can to my clients.

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