A DEARTH OF SUDS FOR DAVEY: A THERAPIST’S THOUGHTS DURING A CHILD THERAPY SESSION

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Thus it is that imperfect human beings can be of therapeutic assistance to other imperfect human beings (Rogers, 1959, p. 215)

Introduction

My moment to moment experiences with a young client are shared here within a transcript example of a nondirective client-centered therapy session. Questions relating to the therapeutic relationship, therapist congruence, limit setting, time management, and nondirective intentions are raised in the course of commentary organized around the complete transcript of a therapy session. In the postscript, discussion of child therapy in the context of Rogerian theory (Rogers, 1951, 1957, 1959) and the concept of the therapeutic attitude of “congruence” addresses the tension that can develop between a therapist’s nondirective intention to accept the client and the reality of working with a child who is intensely engaged in a client-directed therapy session.

Doing child psychotherapy can be a daunting experience for new therapists. They can feel at sea when faced with the reality of an unstructured meeting with a young client who is not inclined to sit in a chair and discuss life problems with a counselor. Client-centered therapy, based as it is upon therapeutic attitudes that facilitate well-being and growth, readily encompasses within its holistic growth model a way to work with children (Axline, 1947, 1964, 1969; Dorfman, 1951; Ellinwood & Raskin, 1993; Landreth, 1991; Moon, 2001; Moustakas, 1997; Kaczkowski & Patterson, 1975; and Patterson, 1979). The actualizing tendency of every living organism, an hypothesized “... underlying flow of movement toward constructive fulfilment of its inherent possibilities” (Rogers, 1977, p.7), is the premise upon which a client-centered therapist can trust the client and follow the client with a respectful attitude of empathic understanding and acceptance. For
therapy to occur, Rogers postulates three necessary attitudinal conditions: congruence, unconditional positive regard, and empathic understanding (Rogers, 1957). It is my belief that when a therapist is truly present and available (congruent) in a relationship in which she is acceptant of the client (unconditional positive regard) and attentively seeking to understand the client’s communications, experiences and intentions (empathic understanding), growth is likely to occur. My aim is to accept the child as she presents herself in this moment.

The therapeutic attitude to which I am most attending in the postscript to this paper is congruence. My personal working congruence is intrinsically connected to my choice to embody a nondirective attitude in my relationships with my clients. As Barbara Temaner Brodley says: “Client-centered therapists are unique in the extent of their commitment to be of help without disempowering their clients” (1997, p. 18). When I impose, either spontaneously or thoughtfully, my personal limits upon a client’s way of being, I experience an internal struggle.

What follows is an account of what was going on in my mind during a half hour audio taped session with a boy I shall call Davey. At the time of this session, I had been working with children for almost five years and with Davey for about 18 months. This meeting was rife with controversial therapist behaviors and responses. But I believe it was a good and helpful session for Davey. It is this mixture of my mistakes, doubts and worries in the context of what I nonetheless believe to be a constructive session that makes this transcript interesting to me. Also, many issues that frequently surface in child therapy make an appearance in this session (time limits, forced ending of playtime, late arrival, late pick-up, relationships with parents, waiting room situations, limits related to play in an office space, a child’s lack of control over the environment). In particular, my thoughts and feelings during this session reveal some tension I felt between my desire to embody an acceptant, nondirective attitude towards the client and my need for limits to be placed upon this child’s activities.

This commentary is a bit confessional on my part. The lively possibilities of what might occur in any session with an active youngster require instantaneous judgment calls by the therapist. A therapist can experience self doubt. At times the reader may consider my thoughts to be overly self-critical. However, I believe that a therapist’s self-examination of her attitudes and intentions is vital to the development of a responsible way of being therapeutically present with clients. Susan Pildes has suggested that “self-criticality is the fire that is forging the therapist” (personal communication, September 15, 2002). And Jerold Bozarth writes that

The facilitative condition of congruence in person-centered therapy involves the constant exploration of the therapist’s subjectivity and consistent correction of the therapist’s “fallibility”. (2000, p.5.)
In the course of writing this commentary, I feel I’ve expanded my acceptance of myself as therapist and paved the way for me to continue to become a more reliably therapeutic presence. To some degree, I believe that it is necessary for every child therapist to re-invent the wheel and learn by his or her own mistakes. Nonetheless, I hope that allowing the light of day and the perusal of other psychotherapists to fall upon my not always well resolved quandaries will help others walk a somewhat easier path.

The Client

My sessions with the client, Davey, have been extremely satisfying to me even though I have sometimes felt plagued by questions and doubts about my work with him. There are a variety of explanations for my discomfort with this client. He was transferred to me from another therapist. The degree and etiology of his cognitive and physical handicaps was and remains unclear. The client always arrives late, and so sessions are always short. He is seen immediately before or after his brother with in-between rest time for me not feasible. Davey uses his therapy time in an intense, physically and verbally active manner. He darts into the office and is often busily engaged either on the office phone, in my purse or splashing water in the sink before I have closed the door. As strong as my affection for Davey has grown, I anticipate the fatiguing relentlessness and physicality of the rapid-fire, two-brothers-in-a-row sessions with a mild dread.

At the time of this session, Davey was eight years old. As a toddler he had been described by doctors as failing-to-thrive, and sometime later he was hospitalized for a severe, excruciatingly painful, bath related injury.

The therapy room, which is fairly large, is intended for both child and adult clients. Wall to wall carpeting extends into the closet and under a sink. In the course of this session, Davey and I crisscross the length of the therapy room several times. With some children, I am more likely to remain seated as the child moves around the room. With Davey, when he was younger, I stayed in close proximity to him because he seemed endlessly to be stumbling, spilling, splashing and requesting things from me. Our physical closeness became something that, apparently, he appreciated and still does. Over time, Davey has physically grown and developed and been given glasses. Consequently, at the time of this session, his physical coordination and eyesight were much improved. He now seldom stumbled. I had become more comfortable about letting him go alone over to the sink to play with the water or to play with the office telephone, which I disconnected for his sessions. However, when I stayed back to give him space, he frequently requested that I come be close to him.

The Session

This 25 minute session is of typical length for me and Davey. Almost every statement I make is printed in the transcript with a question mark at the end. In actuality, most of these therapist remarks were made with an intonation of open-
ended possibility, an expression of my wish to tentatively check my understanding with him; these statements, on the audio tape, do not sound literally like interrogatory questions. I have fallen into a pattern of responding to Davey in almost a line by line fashion. This was not intentional and it is frequently not the way I work and respond with other clients, children or adults. It has been my experience that Davey appreciates my close verbal following, and, indeed, when I sometimes slack off, he tells me to "Say it." In relationship terms, this "Say it" is a far cry from the way Davey spoke to me a long time ago, at our initial session, when in flatly stated words directed towards the wall (but I believe meant for me) he said, "You shut the fuck up." At the time of the session that follows below, based on my sense from many previous meetings with Davey, I was fairly confident that he was not addressing me when he began this session with the words "Stupid bitch." Rather, he had already launched himself into the therapy session in his own Davey-like style of enacting a dramatic dialog.

What follows is the complete session, transcribed from audiotape. Interspersed within the transcript is commentary upon my thoughts as remembered a few days after the session, and as they relate more generally to my work with Davey and other children.

Client 1: Stupid bitch
Therapist 1: Yeah?
   C2: I'm gonna kill that bitch. That bitch
   T2: That bitch?
   C3: Yeah, that bitch. The son of a bitch.
   T3: Son of a bitch?
   C4: Yep

   T4: You're ... that's who you're mad at, that son of a bitch? You mean they did something you didn't like?

The above question from me was somewhat ingenuous. It is a sign of my nagging worry that another therapist might successfully initiate a more therapeutic verbal exchange. Davey, like many children, does not choose to connect within-session material with real-life activities. As he has developed interpersonally over the past many months, he is now more likely to spontaneously mention an upcoming school field trip or the family's new car. But when he does so, it does not usually seem to connect with the rough, more determined feeling words and behaviors of his therapy sessions. My question was perhaps motivated by awareness of being recorded, and a product of a self-conscious hope that the work being recorded could appear to be more relevant or meaningful than might otherwise be, or appear to be, the case. In terms of client-centered theory, it is not necessary for me to interpret Davey's self-expressions or for Davey to talk about his problems in order for him to grow and become better able to handle whatever it is that beleaguer his existence. According to the theory, a relationship in which the client perceives herself to be empathically acknowledged and received is in itself catalytic
to personal growth. In this instance, when I attempted to attach Davey’s statement to his real world reality, I was momentarily outside of client-centered theory. Davey has suffered extensively in his young life and from time to time I become concerned; I sometimes worry that his hurt-filled play is perhaps not a re-enactment of past trauma, but instead a description of current mistreatment of him. These worries can distract me and lead me to momentarily doubt my therapeutic approach. I can wonder, “Am I doing enough for this client?”

C5: Yeah, son of a bitch

T5: Son of a bitch.

C6: Where is that son of a bitch?

T6: That son of a bitch, is he down here in this box?

C7: Yeah

T7: The one you’re looking for? (Davey grabs a light skinned baby doll and heads toward the sink.) I better get my coat out of the way. You’re gonna kill that son of a bitch. (I am, as an afterthought, responding to Davey’s statement in C:2)

Since Davey plays with the water during almost every session, moving my jacket away from where it hangs beside the sink has become a ritual. It might be nice to remove the jacket from the closet in advance of the session, to eliminate at least one remark or action of mine that expresses my concerns about the water play. However, there is no other logical place for my coat, and, if, in advance preparation for the session, I toss it onto the less used end of the couch it evokes questions, and, possibly, some anxiety, from Davey.

C8: Son of a bitch. (I laugh.)

It seems possibly inappropriate for me to have laughed at this juncture. Historically, my pleasure in Davey’s bad language has been obvious to him. At times it has been a game between us, such that when I have not responded to his use of curse words, he will stop, turn to me and tell me to “say it.” Our complicity is perhaps meaningful to him, and, since it is genuine on my part, I continue to share my overflowing acceptance or pleasure in this matter. My laughter here was not directed at Davey, but rather in concert with or in expression of my enjoyment of the vehemence with which he uses foul language. The laughter, as an expression of my enjoyment of Davey’s language may indicate an endorsement of his behavior on my part. This is perhaps problematic if it leads the client to speak outside of session in a manner that will be punished. However, it is my experience that many individuals enjoy and appreciate the freedom to use strong and insulting language, language that is full of negative feeling. Based on my experience as a parent and as a counselor working in elementary schools, I am confident that using foul language, with the blessings of a significant other, not only does not increase the likelihood of a child misusing language in a socially inappropriate setting, but even assists the child in using appropriate language at school and in more formal settings. The laughter is perhaps a risky business, in that it might be misconstrued by the client as laughter aimed at him instead of with him. Twelve months ago, Davey’s school
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requested that he be medicated for his recalcitrance. He was not medicated. Nonetheless, at the time of this session, reports from school and home are that his behavior has become ever more satisfactory; he is less oppositional and more cooperative. I have received no reports that his social comportment has worsened. My overt support of Davey's strong language still gives me pause, though perhaps less so now; it has become a part of our historical relationship, an expression of our mutuality and joy in his feelings of being powerful.

T8: You got him.

C9: Yeah, you little son of a bitch. (I laugh again.) (Davey yells) SON of a bitch. (then in a smaller voice) No, I ain't say "son of a bitch." (and back in his original voice) Yes you did.

T9: Is he going to be punished for saying "bitch"?

C10: I'm saying "son of a bitch."

T10: He likes to say it, but he gets in trouble when he says it?

When, in C9, Davey speaks in a smaller voice, as if play acting, I attempt to respond to the duality of his expression. My first response, T9, is clumsy at best as I empathically guess or (in a more social work type modality) inquire if Davey gets punished in his home life. In T10, I manage a little better to acknowledge his pleasure in his rough language and also the tiny voice that sounds more frightened and apologetic.

C11: (speaking to the doll) I will KILL your black mother fucker ass. I will kill you.  

T11: You're gonna kill his ass.  

C12: I will KILL you.  

T12: Mother fucker ass

With the phrase in T12, I am going back to make more full my previous response which included the intention to kill but not the insult of "mother fucker." This was probably unnecessary. In the past, Davey has pointed insufficient responses out to me by repeating the part I omitted, and if I still didn't respond, ordering me to "say it." So he would probably have returned to the words if he wanted me to acknowledge them.

C13: Listen, you  

T13: You're really mad at him. He's in trouble.  

I am responding to the threat in Davey's tone and the placating tone of his other, smaller voice.

C14: I'm gonna kill you, you hear me, I'm gonna kill you. Here bitch. Come here bitch. Come here bitch. I'm gonna KILL you. I'm gonna KILL you. I'm gonna HOLLER AND HOLLER AND HOLLER LOUD. I'm gonna kill you. (He hunches
over the doll between his legs with the doll's bottom up in position for being spanked.)

T14: Oh, you're gonna really give him a whippin', huh?

C15: (Davey grabs a capped baby bottle as if to give it to the baby doll)(then in a different more placating voice) No, no, no, no, no, no, I don't want a bottle. I don't want a bottle. I don't want to be a baby. No, I want to be a baby. (The cap of the baby bottle is in the way of Davey putting the nipple in the doll's mouth.)

T15: Here, want me to get the nipple out for you? ... No, You got it. Okay.

C16: (heading towards the sink) No, no.

T16: Davey, should I pull your sleeves up? Do you want us to keep your arms dry?

C17: I don't want to get my new clothes dirty.

T17: No, shall I roll your sleeves up?

C18: I don't want to get my new clothes dirty.

T18: No, you don't want to get your new clothes dirty. May I help?

I observe myself, in my work, routinely offering help to children. "Want me to get the nipple out for you? Should I pull your sleeves up?" Later in this session, Davey says he needs some clippers, and I go looking for scissors without even asking him if he is asking me to do so. Some of these offers are, perhaps, a hindrance to the client's self-direction, a violation of the client's frame of reference, or, at the least, over solicitous. Simultaneously, they are an expression of my wish to be helpful when I perceive that a child's intention is thwarted by an obstacle. For example, here, Davey clearly intended to put the nipple into the baby's mouth. However, it was a new baby bottle, the nipple was capped, and it was not clear to either him or me exactly how the cap could be removed.

My offers to help would be problematic if they were in fact manipulations rather than clear statements of my limits. An example of a line of thought that I might mentally pursue, though not during this session is, "Would you like me to tie your shoelaces?" What is going on in my head when I ask that question? Obviously, I want the child's shoes tied. In that sense it is a dishonest request and would be better stated as "I would like to tie your shoe laces", or "Please, I want you to stop what you are doing and either tie your shoe laces or let me tie them." Fuller disclosure would be, "I am worried that you might step on your stray shoelace and stumble and be hurt" (knock your head on the edge of the chrome arm of the chair, the radiator, the edge of the toy box, or the toy truck, etc.) More likely, I am thinking, "I am afraid that if, in the unlikely event you stumble and fall because of your shoe laces, then, in the even more unlikely event that you get hurt doing so, I will appear irresponsible to your parents, the doctors and my peers." Most likely, "I am worried that if I let you leave the playroom with your shoe lace still untied, you will be reprimanded for the untied lace by a parent, in my presence, and I will feel sad for your embarrassment and unsure about how to handle the waiting room
situation in a manner that is true and therapeutic for both you and your parent.” If that is the full mouthful of my thoughts, then, perhaps one of the following is the best thing for me to say. “Davey, I’m worried about your untied shoelace; may I tie it?” or “Davey, I want your shoelace tied. Shall I tie it, or would you prefer to do it yourself?” I don’t want merely to ask him to tie his shoe lace because he might not be able to do so, and that raises the possibility of him feeling ashamed or embarrassed. In this session, as Davey began playing with water in the sink, I became concerned about his shirt getting wet. Even though it is the middle of the cold weather season, I am not really bothered for Davey’s comfort or the state of his shirt. I am more concerned that his mother will be displeased (and that he might be reprimanded after our session). My on-going work with Davey might be easier on both of us if I raised the question with his mother. I might let her know that he is likely to get wet when he is with me and encourage her to bring a spare shirt for him. In truth, this is a Pandora’s box I don’t want to open. I don’t want to be told that she doesn’t want him to get wet when he is with me or that he shouldn’t be “playing” with me (as opposed to discussing his misbehavior). This particular mother is really unlikely to say either of those things. But, this particular mother is over-extended and leads a frantic life trying to take care of four children. In my presence, she has always been kind and respectful to my client. But it is stressful for her to get to sessions. She always arrives late with several children in tow. I don’t want to add to her responsibilities in getting the child to therapy. It would be best, I think, if I could just relax a little more about the water play.

C19: I don’t want to be no baby. I don’t want to be a baby.

T19: No, you don’t want to be a baby.

C20: (original voice) You’re going to get killed. That’s today.

T20: Now the other one (I’m referring to Davey’s sleeve.)

C21: (little voice) No, don’t put this in my mouth (putting bottle to baby’s mouth)

T21: Oh, the baby’s saying, “no, don’t do it.” Is it on? (I am referring to the cap of the baby bottle Davey has filled with water) Wait, here, just a second. (I tighten the nipple and cap back onto the bottle so that the full eight ounces of water don’t pour out over the wooden toy box and onto the carpeting.)

C22: No, no.

T22: There.

C23: No! no! No, no, no, no.

T23: He’s saying “no” but you’re giving it to him, huh?

C24: (little voice) Why you giving it to me? (then to me in his original voice) Hold this bottle (Davey wants me to prop the bottle in position for the baby’s mouth.)

T24: M-hm. (I reach to hold the bottle but Davey takes it over again.)
C25: This is my baby.

T25: That's your baby. You're giving him a bottle.

C26: (in a little voice) Why you giving me a bottle? Don't put it in my mouth hard.

T26: The baby wants you to be gentle with him?

C27: I don't want feet on the table. (He has the doll laying on the table.)

T27: Yeah, he wants to be able to put his feet on the table? Baby doesn't want to be in trouble all the time, does he?

The second part of T27 is an empathic guess. I have a feeling building within me that Davey, in his life, can never for long stay out of trouble or free of punishment or reprimand.

C28: My hair is wet. (He rubs his forehead.)

T28: Is your hair wet? Did it get splashed? (I touch Davey's hair and it seems dry to me.) No, I see, your forehead got splashed.

C29: I wanna, I wanna cup. He's gonna waste this. (Davey pours bottle water into a plastic glass.)

T29: M-hm, m-hm.

C30: Gonna put some. (his placating voice says:) No, no. I don't want you to wash my hair. (then in an ordering voice to the doll) Lay back. Turn around. (then speaking to me) [I'm] Cleaning his hair. (He grabs the liquid soap dispenser and holds it toward me.) That's shampoo.

T30: Yeah You're gonna give his hair a wash, huh.

C31: (to me) Give me a towel.

T31: Is the Kleenex okay for a towel?

This is my physical laziness responding. The box of tissues is right beside me. To get a towel for Davey, I must get up from my seat and go find one. I usually am sure to have a towel at hand in advance of our sessions. But, invariably, Davey uses one in the water, like a wash cloth, and then asks for another. I would like to have a full supply of nice towels available for him, but, if I did, I predict he would use them all and I would not have sufficient places in the office for hanging all of them to dry after the session.

I have wondered, should a therapist unquestioningly accept and execute orders from a child, the way I tend to do? In general, I am comfortable doing so. In Davey's case, again, he and I have our history. He used to order me to throw into the waste basket papers he had ripped into pieces. I would do so, from time to time saying, "You want me to be the person who takes this over to the garbage can." On another occasion I might say, "I'm going to bring the trash can over here by us," and set it down within easy reach. As time has gone by, Davey frequently throws things away himself and still sometimes "orders" me. At this point, it feels fine to
me, except that I do get weary, and sometimes I will just say so: “Davey, I'm tired. I don’t want to walk over to the trash. I’ll throw it away later.”

C32: No, give me a BIG towel.
T32: You want a real towel. *(I get up to get one.)*
C33: *(little voice)* Don’t clean it.
T33: Here you go. Got a blue towel for you.
C34: Yeah, blue. Put it around her *(audio is unclear; maybe “her” or “here”).*
T34: His head? Oh, there.
C35: You big son of a bitch. *(then the little voice says)* When my hair gonna be dry? *(big voice)* I gotta go to work. I called your mother. Whenever I get through with your hair. *(little voice)* Why you curling (or cutting?) my hair? T35: He says why are you doing that to me?

C36: *(little voice)* No, no! I did put ... I put my head back. I put it back. *(He washes the baby in the sink) (then to me in his regular voice)* I’m gonna use all of this soap.
T36: Yeah, it’s okay. You’re gonna take the top off so you can pour out all of it, huh?
C37: *(Davey hands me the soap bottle.)* Why don’t you open it up.
T37: Is it too tight? *(I open it.)* There.
C38: I need a towel.
T38: I’ll use a Kleenex, okay? *(I am referring to my mopping up the top of the wooden toy box, not to the towel Davey wants.)*
C39: Yeah. *(He takes the towel and wraps it around the baby. Davey is using the closed wooden toy box as his work surface and wants to pour baby bottle water into the soap dispenser. He looks askance at me.)* Is it okay?
T39: M-hm. You’re trying to keep it in the bottle right?
C40: Yeah.
T40: It’s okay. *(He pours.)* ... I think we better not use the rest, it’s pretty full now.
C41: *(to me)* Wipe up the table. Clean that up.
T41: Okay, I will. You want me to clean up the wet part on the toy box *(I inadvertently let out a sigh.)*

The proportion of my responsiveness that is taken over by my concerns for preserving the dryness of the child’s clothes, the carpet, towels, my clothes, is poignant to me. In the best of all therapy spaces, the therapist could relax and enjoy a child’s experience of freedom. Such a work space has simply not been available for me and Davey. This raises an interesting question: in physical terms, what kind
of space offers the most therapeutic potential. I believe it is possible to do highly effective, nondirective client-centered work with children in a compromised space with only the barest of art or play materials available. But it seems obvious here, with Davey, that a more water-proof, child-proof space would allow freer reign for the client’s self-expression and ease of mind for a therapist who is struggling with limits while wanting to maintain unconditional positive regard for the child. Apart from the therapist simply relaxing and ceasing to worry about the water damage, how could this be handled more therapeutically, in a manner that would be more freeing for both the therapist and the client? The way I work with Davey is, clearly, significantly compromised. In almost every session, he feels drawn to the water. I have experimented with variations of compromise between us: spreading out a plastic drop cloth, having us fill a plastic tub with not too much water, placing the tub on the drop cloth, requesting that we keep the water at low volume of flow, requesting that we not play with water at all because it gets the carpet wet, and so forth. With these different solutions, each time it has been my sense that Davey’s disappointment increased and my concern was not abated.

Some therapists (Axline, 1969; Landreth, 1991; Moustakas, 1997) have suggested that the limits set in play therapy are an important part of the therapy because they anchor the therapy to the real world. I am more inclined to say, as Dorfman (1951) and Raskin and Ellinwood (1993) have intimated, that limits that arise are for and about the therapist — they assist the therapist in remaining acceptant and attentive to the client. In the ideal, I would prefer to set no limit upon my young clients. I believe that ideal therapy would provide freedom in relationship and maximize openness for the client’s choices, possibilities and creativity. Ideally, it would be best if the child could truly be and express whoever he or she is at that moment in the presence of a congruent therapist who is fully experiencing unconditional positive regard and empathy for the client.

The limits or constraints placed here upon Davey, in terms of his water play and the manner in which I seem to nag him, are a result of my personal limitations in the physical and interpersonal contexts of our work. Confusion is added because our limits are not completely clear to either of us. How full is too full before the water overflows its container? Yes, Davey can play with the water; it’s okay to splash a little, but not a lot, or not deliberately? It’s okay to spill but not to flood. It’s okay for Davey to write in my appointment book, but only on this page, not on that page. I hate to set limits, I hate to burden the client with my insecurities, but I must because I am who I am in this moment. I set the limits or express my concerns within the context of our relationship, wanting to maintain my personal comfort in the interest of maintaining my positive regard for the client. If the limits I set are anchoring the therapy to anything, it is anchoring it to our relationship, Davey’s wishes and relationship with me and mine with him.

C42: (Davey returns to the sink with the water still running, and speaks in his strong original voice) Look at this soap.

T42: Oh yeah, look at that.

C43: I made it fuller.
T43: Yeah you made it full right?
C44: Look.
T44: I see. It’s all orangey down here.
C45: It’s all orange.
T45: Yeah, you made more soap, didn’t you, Davey. You made it more full.
C46: I made it full of soap.
T46: Uh-huh.
C47: Whoa, this is a lot of water.
T47: A lot of water in there?
C48: (little voice) I don’t want to get a haircut. That hurts. I don’t need a haircut. (then to me) I want some clippers. Can I have some clippers?
T48: You want to cut his hair. We need something you can clip with? Let’s see. (I look around) Oops, I know where they are. Just a sec. (I hold out scissors) Can you clip with these? Will those do?
C49: Yeah. (to baby) You’re gonna get your hair cut. (Water is still running in the sink. He brings the dripping baby out and around over the wooden toy box.)
T49: Davey, have you got new glasses?
Where did that question of mine come from? I blurted it out from nowhere. As if Davey has not already been impinged upon enough in what is supposed to be nondirective client-centered therapy, I send him off on yet another detour away from his own intentions.
C50: Yeah
T50: Yeah? (Davey bangs the baby on the toy box as if to get water out) You’re shaking it out, huh. Giving it a good shake? (He keeps shaking the baby. I laugh a little) There. (Davey takes off his glasses)
C51: (to baby) Hold your head back. (then to me) Watch my glasses.
T51: I’ll watch your glasses. Shall I hold them? They got splattered with water, huh? (Davey is rubbing his eyes).
Davey, did you get soap in your eyes? Did you get soap in your eyes? Are you okay?
C52: I got the glasses from the doctor.
T52: Yeah, you went to the doctor and the doctor said these will be your new glasses?
C53: Yeah, that’s dirty ...(indecipherable) killed the glasses I’m got to get another pair.
T53: Oh yeah?
C54: All about you.

T54: You mean it’s my fault? Did I mess ‘em up too much?

I thought, “Maybe Davey is angry with me because I blurted out a question imposing upon his play and his concentration.” If so, at least I do not further impose upon his time and direction by questioning him about that. In a later reading of the transcript, I think maybe he was telling me about why he had to get new glasses.

(Davey crosses the room heading over to a different toy box.)

C55: Oooh, a queen.

T55: Oh, you found a crown.

C56: A queen.

T56: A queen, huh. (He puts the crown snugly on his head, upside down.) Oh boy. Looks like King Davey?

T57: Queen.

C57: Queen!

C58: Queen.

T58: Queen Davey?

When I said “... King Davey”, I was certainly being slow on the uptake. At one level, I believe I went ahead and said the wrong word, “king,” as a test because I was surprised by Davey’s use of the feminine word. I regret my use of the word “king,” I wonder if Davey was making a statement about who he is. I wondered this at the time, but chose, after already having misspoken, not to impose further upon him to explain himself. Meanwhile, I felt badly for having imposed “king,” when he had said “queen.”

C59: (to baby) You gotta be washed.

T59: That’s gotta be washed, huh. Shall I pull your sleeves up again for you?

C60: (indecipherable, maybe:) Leave them.

T60: They’re okay, actually. Now, huh? You’re fine.

C61: (The water is running.) I’m cleaning his black ass. Hey, black ass. (to the light skinned baby doll) His ASS. His black mother fucker ass.

T61: His black mother fucker ass.

C62: I’m gonna wash you, bitch. ... (then strongly) Stop calling me bitch.

T62: M-hm

C63: Stop calling me bitch.

T63: Doesn’t wanna be called that?
C64: Mrs. White, I'm on my way. I need to hurry. I'm on my way. (Mrs. White is probably one of Davey's teachers. Davey frequently pretends to address or telephone a teacher or the parent of a classmate.)

T64: Yeah?

C65: I need to hurry up

T65: Davey, I think we have ten more minutes, okay?

My "okay?" was unnecessary. I was informing him that ten minutes remained in our allotted time. If, in fact, a child communicates to me that she or he wants to stop early I honor the request. I might say that "We still have ten minutes if you want to use them. But are you thinking you'd rather stop now for today?" If the child's parent is not waiting in the waiting room, this can create a slight problem for the child and me. Usually, when this happens, the child chooses to resume play in the therapy room with me. Some therapists request that parents remain available in the waiting room. However, in the interest of preserving confidentiality, given the possible insufficieny of our office sound proofing, I encourage parents to step out for coffee or an errand and return by a certain time. For an initial session, I prefer the opposite -- that parents remain available in case the child wishes to stop early in the course of the first session, something that does occur from time to time.

C66: Mrs. White's waiting for me.

T66: Mrs. White's waiting for you? (Davey is washing at the sink.)

C67: Gotta wash the towel off. (He keeps washing.) I'm not leaving.

T67: No?

(Davey keeps washing and speaks indecipherably.)

C68: He's dry.

T68: Yeah?

C69: He's more than dry.

T69: I'm going to get the phone away from the water. It's right here if you need it.

C70: I'm cleaning it (He's referring to the towel, which he puts in the water).

T70: You're cleaning it. Okay.

C71: I can use all the soap can't I?

T71: M-hm, you can use as much of that soap as you want. You filled it, right?

C72: Thank you, Kathy. I can use all of it?

T72: Yeah, you can use it all.

The soap and its dispenser have a history for Davey and me. About a year ago, Davey wanted to use lots of soap, or lots of lotion; whatever was available, he wanted to use it all. This was an issue for me because I was then left with the job of
replacing supplies. My solution back then was to give up and not keep soap or lotion in the office. Instead, in preparation for Davey, I would keep a bottle of bubble blowing solution with only an inch or so in the bottle. I would hide larger supplies behind things high in the closet. That way he could completely empty the contents without me being completely out of bubble solution. So, for many months, there was a dearth of suds for Davey. More recently, replenishing supplies has become easier, and so I have been more willing to restock this sort of supply. Davey was thrilled the first time he stumbled upon the new soap dispenser. Still, I don’t keep the soap dispenser completely full, so that when Davey wants to use it all at once, my entire supply is not depleted. On this occasion, for whatever reason, he experienced the supply as plentiful or managed to make the supply more plentiful.

C73: *(He keeps washing the towel.)* These drawers stink.

T73: Oh, his drawers stink? Why? Did he make a mess of them?

C74: It’s all empty. It’s empty. *(Davey is referring to the soap dispenser.)*

T74: It’s empty now, it’s all gone?

C75: I’m going to clean this bitch. I’m going to clean this bitch.

T75: You’re gonna clean this bitch?

C76: I’m gonna rinse her *(the towel)* out. *(He’s still busy at the sink)* It’s gotta get dry ... *(He keeps rinsing the towel.)*

I’m gonna wash the dishes. Where’s the dishes? I’m gonna wash the dishes.

T76: Let’s see.

C77: All done.

T77: They might be in here, Davey. They’re in one of the toy boxes. Look in here.... Is that where they are? See the dishes? *(He looks in the toy box. I come over to look with him.)* Oh, yeah, there’s some dishes. Here. Here’s some dishes.

*(Davey heaves up the whole box of dishes to dump in the sink.)*

With the above exclamation, “Oh wait,” I was expressing my tiredness, my awareness of the time, and more water worries. I am realizing that when he gets the whole boxful of dishes wet, I’ll have the whole boxful to dry and clean up later. When later arrives, I frequently do what Davey did, and take a short cut; I dump the wet dishes back into the box and go home.

C78: I’m gonna wash these mother-fuckers.

T78: You’re gonna wash these mother-fuckers? *(He washes dishes for awhile.)*

C79: Washing these dishes.

T79: Yeah, you’re gonna wash them. You wanna just put them up here to dry... when you’re done? ... Okay, Davey, five more minutes.

C80: I’m not leaving.
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T80: You're not leaving? You don't wanna leave, right? You wanna keep going. But we get five more minutes, all right? *(He keeps washing.)*

C81: I'm cleaning dishes.

T81: Yeah, you're really busy, huh. Lots of dishes.

C82: Later. *(*still washing*)... I'm busy right now.

T82: Yeah, pretty busy. *(He keeps washing)* ...lot's of dishes. *(He spills some dishes out of the sink onto the carpet.)*

C83: Pick up my dishes.

T83: Davey, is it okay if I pick them up later? *(He nods.)* ... Cause you're too busy, right. You can't take time to pick them up because you don't have much time left. *(He keeps washing dishes for awhile.)*

C84: I'm cooking.

T84: You're cooking.

C85: *(indecipherable)* I want a lot.

T85: You want a lot.

*(Davey starts arranging wet dishes on the wooden toy box.)*

C86: I'm giving you a plate, and a little one.

T86: A little one

C87: *(He keeps working)* I don't have no time left.

T87: No, only a couple of minutes.... You're trying to get it done....

C88: A fork

T88: You set the table for us?

C89: For the kids.

T89: For the kids.

C90: M-hm, m-hm... knife.

T90: You don't have enough knives to go around?

C91: *(working)* *(indecipherable)*... a fork. *(He works.)* *(indecipherable)* I got four kids.

T91: Four kids, yeah. One more minute, Davey. *(He keeps working.)*

C92: Now we've got a couple of minutes.

T92: Yeah, you wish you had more time.

C93: I'm leaving in two minutes.
T93: Davey, I know you want to take a little more time but we’re out of time. It’s time to go.

C94: I’m going to put these things up.

T94: We don’t have time.

C97: I’m leaving. Wipe off the table.

T97: Yeah, I’ll wipe it off, okay?

C98: Right now, I’m going.

T98: Yeah, you put them away. All right. Now you’re really set. Queen Davey, gotta take the crown off. You want to see it before you take it off?

I wanted to mend my previous use of the word “king” by now addressing him as “Queen Davey.”

C99: (He doesn’t take me up on the suggestion he look in the mirror.) I’ll take it off. Tell Mrs. White I’m on my way.

T99: Okay you want me to tell her? (I pretend to dial the phone.) Mrs. White? Mrs. White, Davey’s on his way right now. He’s coming. Yeah, bye bye. (I hang up the phone.) (then to Davey) I’ll see you in two weeks … that’s right, two weeks.

C100: Good night.

T100: (I laugh because it is really daylight.) Good night. (Davey heads over to the other toy box.) Come on, Davey. Time to go. (He pulls out a bag of blocks he has previously played with by slinging it over his shoulder when pretending he’s going to work.) You got the bag here, huh … I know you don’t want to stop, do you. But it’s time now, come on.

C101: My mom’s not here. (I open the door to the waiting room.)

Is the Session Over?

T101: Hm, you’re right, she’s not here. You’ve got better ears than I do.

C102: Shut the door.

T102: Keep it closed till she gets here? (Davey turns pages in my date book.)

C103: I’ll be here on the fifteenth.

T103: Oh, okay, oh (Davey is starting to write in my date book.) thank you, that’s in two weeks?

C104: Yeah.

T104: Okay. So I’ll see you on the Wednesday in two weeks.
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C105: Yeah, on Wednesdays, Wednesdays.

T105: Okay. Yes, I see you on Wednesdays. Davey, I like it when I see you on Wednesdays. It’s nice.

This last remark by me is an expression of my affection for Davey. This probably would not have slipped out of me if I had not been surprised by his mother not being on time to retrieve him at the end of the session. Davey and I are suddenly together in the therapy room but no longer “in session.”

C106: Next Wednesday, March 3rd.
T106: March the 3rd
C107: Yep, the 24th
T107: And the 24th. You like to come here don’t you.

This was an unnecessary empathic guess or interpretation.

T107a: (Davey marks in the date book, and then erases one of his marks.)

You’re gonna erase that and put something else?

C108: On March 8th, March 8th.
T108: Okay, March the 8th
C109: March the 8th
T109: You’re putting a circle around that day?
C110: Can’t be here on March the 8th.
T110: No? Not that day or yes that day?
C111: That day, March the 24th. Okay, the 24th?
T111: Yeah. Okay
C112: Call me back.
T112: Call you back? You want me to confirm that appointment?
C113: Tomorrow or today.
T113: Tomorrow or today?
C114: In two weeks
T114: Okay
C115: I can’t be here for the two weeks.
T115: No?
C116: I’m off for today.
T116: All right. Well we finished for today, right?
C117: Tomorrow, I won’t be here. I’m off.
T117: M-hm. You’re off tomorrow so you can’t be here?
C118: Let me show you. *(He rips off a receipt form from a tablet.)* I’m off on the 24th.

T118: Oh you’re gonna write it for me so I’ll keep track.
C119: Yeah.

T119: Make it easier for me.
C120: *(He hands me the paper.)* The 24th.

T120: There’s your mom. Okay, thank you. This will help me remember, on the 24th right? On the 24th.
C121: Okay. On the 9th

T122: Okay. Thank you, Davey. Here you go. She’s here.

Davey cannot read and is barely learning numbers. The date of the current session is March 8. As this dialog progressed, I assumed he was all mixed up about the numbers and dates and I decided not to correct him about the date of our next meeting. I don’t really know whether or not he has any sense of time or “Wednesdays” when he is away from me and involved in his real life. Davey and I had only recently dropped down to meeting every other week instead of weekly. It crossed my mind that it might have been more considerate for me to respond more as an educator, with accurate corrections to what he was laying out as our plan for future sessions. But I thought not and instead stayed with his assertive authoritative bravado. Correcting his confusions about times and names of days might have left him feeling less in control and less on top of the ending of our current session. I know of course that he has no control. And in fact, he was not a party to our new arrangement to meet every other week. I expect, however, that by easing up pressure on his mother to bring him in every week, I will see him just as frequently as in the past, since late arrivals and absences have been incessant. Later, checking my date book more carefully, I discovered that Davey’s stated date for us had been quite close, only two days off, from when our next meeting would be. March 24 was a date I had circled in my book for a different purpose. Perhaps Davey had noticed that the 24th was circled, and so that is the date he hit upon, approximately two weeks from this session.

C123: Where’s my coat?

T123: *(to his Mother)* Is Davey's coat out there?

Mother1: I think it’s in the car.

C124: I left something.

T125: *(to Mother)* Okay, in two weeks.

Mother3: Okay, thank you.
T126: All right. See you, Davey.
(The youngest brother slips past me and into the therapy room.)
(to youngest) Come on, Ronny.
Mother4: Come on, Ronny.

T127: Oh, Ronny, yeah, I know, you wish you could have a turn, don’t you? Bye bye. (I lead Ronny out with my hands on his shoulders.)
Ronny1: Can I have a piece of paper?
T128: (I hand him several sheets of paper.)
Ronny2: Can I have another one?
Mother5: No, you don’t need it.

C125: On the 8th.

T129: This is spare, last year’s flyers. He can have them.
Mother6: Oh, okay.

I bit my tongue after I spoke in T129. I hoped that the mother did not feel contradicted or overruled by me in front of her son, Ronny. My wish was to extend the therapy room permissiveness into the waiting room to this little boy. I also want to be as therapeutically present as I can manage for the mother as well as for Ronny.

C126: On the 8th.
Ronny3: Can I write on it?
Mother7: Yes, you can write on it.
T130: Yes, you can write on it.
Oldest brother1: Can I take that?

C127: On the 8th

Three times Davey has said, “On the 8th.” But either I did not hear him, or I could not attend because I was responding to other family members.

T131: You can take that, sure.
Oldest brother2: What is it?
T132: It’s a brochure for a store. (His mother has gone down the hall and out to the elevator and is calling Davey.)
(to Davey) Your mother is all the way to the elevator. Off you go.
C128: Off I go.


C129: The 24th.
T134: Okay, I’ll remember. *(big smile and wave from him)* Bye bye.

In my practice, the waiting room scene, with its hellos and goodbyes, is frequently chaotic. Sometimes this is because parents want to talk about the child. I try to invite evening phone calls to give parents a chance to talk to me if they so choose. In the case of Davey’s family and several other families, it is what I feel to be the neediness of all the children (and sometimes their parents) that renders the beginnings and the endings so demanding. Davey’s younger brother routinely tries to slip into the therapy room. There is no money for him to have counseling. Ideally, the two older boys would be seen by separate therapists, the younger child would be left at home and not have to wait around while his brothers enjoy what he hankers for and cannot have. If there were more time, the youngest child could be given his own session. I attempted once to do a family session, but the two children who meet with me individually were visibly anxious and confused by this endeavor. They both cherish their individual time. If the office suite were larger or if the mother did not find it so stressful to bring the children to counseling, if the family was not always late, if the older brothers could be seen on separate days... None of these preferred options are available without further stressing the boys’ mother. And she, after all, is central to the healing that is occurring. Though it can be difficult, I think it is a good idea for a therapist to try to extend the therapeutic attitudes into the waiting room and to the child’s family.

**Postscript**

More than two years have passed since the recording of this meeting. In recent sessions, Davey rarely swears and rarely speaks with either a placating or a cruel voice. He sometimes goes for months at a time without bathing the baby; but dishes are frequently washed, and he often seems to mimic the voices and accents of his school teachers. He gives me lots of failing marks on the schoolwork he assigns me.

In our sessions, the limits upon Davey’s activities remain confusing at times. Weekly we need to check with each other about how we will proceed. Since writing the preceding commentary, I have been less anxious about soaking the carpet, having supplies depleted, or sending Davey out to his mother with a wet shirt and untied laces. This is probably due to two factors, my increasing self-confidence as a therapist and Davey’s ever-developing physical and emotional maturity.

Part of what has helped me to more consistently feel integrated and whole as I work is my growing awareness of what it means to be in relationship with a client and my acceptance that dilemmas will arise eternally. I have come to understand, particularly with the spontaneous zaniness that can occur with certain clients, that I can be only who I am. Being a therapist seems to require endless, immediate judgment calls. I now worry less about making the “right” decision and instead accept that the moments and the relationship are fluid and in process. My job is to do my best to maintain an acceptant stance of seeking to be present and following in relationship with the client.
Therapist Congruence in the Child Therapy Context

Over time, several factors have aided my arrival at a more confident sense of myself in my work with clients. Two perhaps rather incidental developments affected my relationship with Davey rather directly. The first was a consequence of a change of staff therapists with whom I was sharing office space. In my first year or so of working with Davey, I shared the space with therapists who had more years experience than I did. I had been concerned that these therapists would be disapproving of whatever physical office damage I allowed to occur in session. Over time, I became the senior therapist using this particular office and felt more solely responsible for the space and, also, more free. Around the same time, I stumbled upon a book, Difficult Moments in Child Psychotherapy (Gabel, Oster & Pfeffer, 1988). Reading this collection of anecdotes by experienced therapists, my self-consciousness and confusion was eased. In comparing my own reactions to the unexpected with those of more experienced clinicians, my trust in myself as a responsible and compassionate therapist increased.

It is my belief that the time the child and I spend together in a relationship that is facilitated by Rogers' necessary and sufficient conditions will assist the child to muster her own resources for dealing with the stresses of her real life existence, whether or not, within the therapy, she expresses problematic feelings or articulates her own self awareness. Rogers, in 1977, quoted himself from 1940:

The aim is not to solve one particular problem but to assist the individual to grow, so that he can cope with the present problem and with later problems in a better integrated fashion. (p. 6)

In 1951, Rogers described counseling as perhaps serving as an opportunity for a client to make decisions for himself. Rogers' words resonate for me with the session discussed in this article:

... it is assumed that he [the client] is capable of making decisions for himself. Thus in any series of counseling interviews the client makes hundreds of choices -- of what to say, what to believe, what to withhold, what to do, what to think, what values to place upon his experiences. The relationship becomes an area for continuing practice in the making of increasingly mature and responsible choices. (p. 51)

In sessions, I tend to check with the client to see if I am understanding her intentions and to see if we are doing what she wants us to be doing. While speculating on the effects of a nondirective, acceptant and empathic attitude on the part of the therapist, Rogers wrote:

Is the crucial element in the counselor's attitude his complete willingness for the client to express any attitude? Is permissiveness thus the most significant factor? In counseling this
scarcely seems to be an adequate explanation, yet in play therapy there often appears to be some basis for this formulation. The therapist may at times be quite unsuccessful in achieving the child’s internal frame of reference, since the symbolic expression may be so complex or unique that the therapist is at a loss to understand. Yet therapy moves forward, largely, it would seem, on the basis of permissiveness, since acceptance can hardly be complete unless the counselor is first able to understand. (p. 49-50)

If the child therapist does exercise permissiveness in order to allow a child to exist with more of her full self present in the relationship, a session can become wild, as unpredictable and often very physical possibilities occur. The question of whether or not to set limits can arise. The therapist can be caught up in the dilemma of wanting to be permissive but feeling disingenuous at that moment because of concerns about the consequences of what is being permitted.

Rogers had not yet, in 1951, introduced the term “congruence.” (That word used in reference to the first of the three core attitudes of the facilitative therapist seems to have appeared in published form in 1957. See Barrett-Lennard, 1998, p. 66.) However, in 1951 Rogers did discuss “the third characteristic of nondirective therapy” which he had defined in a preliminary form in 1946 and which by 1956 had been named “congruence”:

...this type of relationship [a therapeutic relationship characterized by acceptance of the client and empathic understanding of the client] can exist only if the counselor is deeply and genuinely able to adopt these [two] attitudes. Client-centered counseling, if it is to be effective, cannot be a trick or a tool. It is not a subtle way of guiding the client while pretending to let him guide himself. To be effective, it must be genuine. It is this sensitive and sincere "client-centeredness" in the therapeutic relationship that I regard as the third characteristic of nondirective therapy which sets it distinctively apart from other approaches. (1951, p.30)

For me this means that to be able to be deeply, genuinely, sensitively and sincerely client-centered, I need to be comfortable enough in my role as therapist to be able to become engrossed in the therapeutic task at hand, the in-session living of empathic acceptance. Defining congruence in 1957, Rogers wrote that “... within the relationship he [the therapist] is freely and deeply himself, with his actual experience accurately represented by his awareness of himself” (p. 97), and in his 1959 theory statement, he described congruence as “openness to experience” (p.206). This means to me that when a therapist is available to herself, open to herself, she is more readily receptive and attuned to the client.

It seems that congruence is a desirable state for therapist and client alike. Bozarth (1998, 2001) draws our attention to Rogers’ statement of the application of client-centered theory to family life. In that statement, Rogers likens a facilitative parent/child relationship to the therapist/client relationship, and seems to say that it
is the parent's acceptance of her own feelings in relationship with the child that promotes the child's self-acceptance and good adjustment (1959, p.241). The implication is that it is through congruence, which flows from the therapist's in-the-moment self-acceptant openness to her own experience, that the therapist can most fully and openly attend to the client. In experiencing genuine and true interest, dedication to empathic understanding and acceptance from the therapist, the client, in a growing state of congruence, experiences increasing self-acceptance, openness to self and other.

In the therapy session transcribed here, a young boy made very intense use of the therapy time. I, the therapist, was challenged by the client's use of the time, the space, the supplies and the water. Rogers, in 1959, wrote:

> Another point worth noting is that the stress is upon the experience in the relationship. It is not to be expected that the therapist is a completely congruent person at all times. Indeed if this were a necessary condition there would be no therapy. But it is enough if in this particular moment of this immediate relationship with this specific person he is completely and fully himself, with his experience of the moment being accurately symbolized and integrated into the picture he holds of himself. Thus it is that imperfect human beings can be of therapeutic assistance to other imperfect human beings. (p.215)

According to Ellinwood and Raskin (1993),

> In child therapy, the congruence of the therapist is frequently tested, because the child may behave in a way that stimulates strong negative feelings in the therapist. This can happen very quickly.... Sometimes the therapist's feelings, revealed by facial expression, tone of voice, or body movements, may be communicated to the child before the therapist is fully aware of the feelings. (p. 266)

I believe we see this occur at several instances in Davey's session. I, the therapist, felt somewhat dismayed by the level of my discomfort and the extent to which I burdened the client with my discomfort. It seems to me that I felt beleaguered in this session; in some instances, I was fending off rather than accepting my discomfort and dismay. Consequently, my ability to consistently empathically follow and accept the client was somewhat impaired. On the other hand, I believed at the time and still believe that this was a good, constructive session for me and Davey. True, with clients I experience frets and anxieties. Nonetheless, both parts of my being, my working implementation of the core Rogerian attitudes with Davey, as well as my awareness of my self-questioning stream of consciousness, were present, though not always perfectly, during the session.

In this excerpt from his poem, "Unconditional Positive Regard, Deep Openness," Armin Klein tells us:
At first, my openness -- when I can reach it--feels small and guarded.

Scared as I am about new interactions and scared as I am, especially.

About facing the unknown -- without structures.

As I try to open, I cannot fool myself that there is any place To which I am going other than to the unknown and to the unpredictable.

So I am fearful, though I have grown comfortable with my fears, Excited about the growth they promise me. (2001, p. 1)

So, I am anxious, but I am becoming more able to accept and remain open to my disquiet, and in so doing, then becoming freer to further experience, think and develop as a therapist.

Conclusion

The client and I are working together as well as we are able. There is only me, informed by my chosen theory and my intention to be of responsible, facilitative service to the client, and there is the client, who is seeking to be, to exist in this difficult world of ours. I remind myself that it is "necessary and sufficient" (Rogers, 1957) for the therapist to be genuinely and warmly, sincerely and sensitively, attitudinally available in the therapeutic relationship, empathically following and acceptant of the client. The therapist is open to her own experiencing in the relationship as she dedicates herself to being openly acceptant and empathically present with the client. These instructions are so simple, and yet so immense.

Author's note. Without the generously-given good counsel of Barbara Brodley, Jerold Bozarth, Susan Pildes, Garry Prouty, and Bert Rice, this paper would never have been completed. This is a revised version of a paper presented August, 2000 at the ADPCA Conference in LaJolla, California. Since the child under discussion is a boy and necessarily referred to as "he" and because several direct quotations in this paper are from the 1950s and follow the convention of using male pronouns in universal contexts, at all other junctures, feminine pronouns are used.

References
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