Editorial

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Contributions to the Person-Centered Journal continue to enliven person-centered discussion. The phenomenological simplicity of a person-centered therapeutic stance requires immense discipline. To understand the (organismically, defensively, self-concept wise) being of persons, with genuinely honest unconditional acceptance of their self-actualizing valuing process is a lifelong endeavor. Considering the vast and durable research findings regarding client-centered principles, that person-centered practice is often considered to be overly simplistic and even superficial is disheartening and even reprehensible. Client-centered therapists often experience recrimination for their professional choice, sometimes with serious consequences. A few years ago a person-centered practitioner colleague consulted me with a dilemma. Several HMO's were refusing to pay for person-centered practice. The counselor had to either lie about her practice orientation, or lose business (she held the agency record for least cancellations, most referrals, and greatest follow-up successes!). It is questionable whether surveys of preferred theoretical orientation can be trusted. More than that, person-centered (and other) practitioners are being mandated to either alter their work or to represent themselves deceptively in order to compete with their behaviorally oriented colleagues.

Many counselors consider client-centered practice to be a naïve (at best), too time consuming, and generally irresponsible approach to helping. Person-centered actualization process psychology is considered overly optimistic and idealistic. It is considered at its worst to be neglectful. Fears that persons will not actualize toward humanistic valuing, beliefs that people need to change behavior before changing self-concepts, and reasoning that clients are not experts in the change process and in resources for change are common motives for therapist-director rather than client-director approaches to counseling. I want to briefly present the findings of a study of client-centered versus behavioral training for parents with children with conduct problems (Bernal, Klinnert, Schultz, 1980) to highlight one of the several problems inherent in comparison research. A unique feature of Bernal and her colleagues' research was their inclusion of six month, 12 month, and two year follow-ups. Despite parents' more favorable reports of their behavioral therapist, and initial favorable outcomes for the behavioral groups, long-term follow-up showed improvement losses in the behavioral group, and improvement gains in the client-centered group. The more directive practitioner trusts their own judgment and perception of the direction and resources that are likely to facilitate their client's needs and positions in life. The person-centered therapist trusts their own judgment regarding their clients' self-direction and organismic valuing process. As Brodley (1999) (see this issue) says, "...the client is treated as the best expert about himself. Even if that assumption may be revealed to not be valid in the particular case, the client-centered approach still emphasized the therapeutic wisdom and potency of the
client. An important factor in this issue of following the client’s direction is conceptualized in terms of process.” (p. 6).

Contributors to this issue of The Person-Centered Journal continue to debate the limits of person-centered theory and practice, challenging assumptions about human experiencing, and questioning client perceptions of therapeutic effect. Hart’s Spirituality article broadens our thinking about personal expression as a spiritual encounter with the other, encompassing the three inseparable core conditions. Braaten provides an empirical, factorial inquiry into the experiences of 1,119 group participants using his Group-Climate Questionnaire, Person-Centered Form. Braaten and his associates’ three-factor solution of 1) empathic positive regard, 2) genuineness, and 3) anxiety/vulnerability represents a provocative phenomenological report on the members of person-centered therapy groups. Wood’s and Bandiera’s reflections of person-centered events appear as reflections that characterize and more broadly epitomize the phenomenological attitude that is central to person-centered practice.

I want to express my thanks to all of those individuals who continue to work toward the development of the journal. I want to personally thank Hazel Carrera, student affairs graduate assistant at Kutztown University for distributing numerous copies of the journal when requests came in, and to Liz Fox, who provided membership and subscription information to interested people throughout the world. My apologies to those of you who continue to labor for the journal but whose names I have not specifically mentioned. That the list would be so long and that I am sure I would leave some out speaks to the incredible support from all of them. Finally, thanks again to Sue Reffie for her ongoing management and production of the camera ready document that is now before you.

REFERENCES


Policy Statement

The Person-Centered Journal is sponsored by the Association for Development of the Person-Centered Approach (ADPCA). The publication is intended to promote and disseminate scholarly thinking about person-centered principles, practices, and philosophy.

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