

11

Client-Centered Therapy

Carl R. Rogers

What do I mean by a client-centered, or person-centered, approach? For me it expresses the primary theme of my whole professional life, as that theme has become clarified through experience, interaction with others, and research. This theme has been used and found effective in many areas, until the broad label “a person-centered approach” seems the most descriptive.

The central hypothesis of this approach can be briefly stated. It is that the individual has within himself or herself vast resources for self-understanding, for altering his or her self-concept, attitudes, and self-directed behavior—and that these resources can be tapped if only a definable climate of facilitative psychological attitudes can be provided.

There are three conditions that constitute this growth-promoting climate, whether we are speaking of the relationship between therapist and client, parent and child, leader and group, teacher and student, or administrator and staff. The conditions apply, in fact, in any situation in which the development of the person is a goal. I have described these conditions at length in previous writings (Rogers, 1959, 1961). I present here a brief summary from the point of view of psychotherapy, but the description applies to all the foregoing relationships.

The first element is genuineness, realness, or congruence. The more the therapist is himself or herself in the relationship, putting up no professional front or personal façade, the greater is the likelihood that the client will change and grow in a constructive manner. Genuineness means that the therapist is openly being the feelings and attitudes that are flowing within at the moment. There is a close matching, or congruence, between what is being experienced at the gut level, what is present in awareness, and what is expressed to the client.

The second attitude of importance in creating a climate for change is acceptance, or caring, or prizing—unconditional positive regard. When the therapist is experiencing a positive, nonjudgmental, accepting attitude toward whatever the client *is* at that moment, therapeutic movement or change is more likely. Acceptance

involves the therapist's willingness for the client to be whatever immediate feeling is going on—confusion, resentment, fear, anger, courage, love, or pride. It is a nonpossessive caring. When the therapist prizes the client in a total rather than a conditional way, forward movement is likely.

The third facilitative aspect of the relationship is empathic understanding. This means that the therapist senses accurately the feelings and personal meanings that the client is experiencing and communicates this acceptant understanding to the client. When functioning best, the therapist is so much inside the private world of the other that he or she can clarify not only the meanings of which the client is aware but even those just below the level of awareness. Listening, of this very special, active kind, is one of the most potent forces for change that I know.

There is a body of steadily mounting research evidence that, by and large, supports the view that when these facilitative conditions are present, changes in personality and behavior do indeed occur. Such research has been carried on in this and other countries from 1949 to the present. Studies have been made of changes in attitude and behavior in psychotherapy, in degree of learning in school, and in the behavior of schizophrenics. In general, they are confirming. (See Rogers, 1980, for a summary of the research.)

Trust

Practice, theory, and research make it clear that the person-centered approach is built on a basic trust in the person. This is perhaps its sharpest point of difference from most of the institutions in our culture. Almost all of education, government, business, much of religion, much of family life, much of psychotherapy, is based on a distrust of the person. Goals must be set, because the person is seen as incapable of choosing suitable aims. The individual must be guided toward these goals, since otherwise he or she might stray from the selected path. Teachers, parents, supervisors must develop procedures to make sure the individual is progressing toward the goal—examinations, inspections, interrogations. The individual is seen as innately sinful, destructive, lazy, or all three—as someone who must be constantly watched over.

The person-centered approach, in contrast, depends on the actualizing tendency present in every living organism—the tendency to grow, to develop, to realize its full potential. This way of being trusts the constructive directional flow of the human being toward a more complex and complete development. It is this directional flow that we aim to release.

One More Characteristic

I described above the characteristics of a growth-promoting relationship that have been investigated and supported by research. But recently my view has broadened into a new area that cannot as yet be studied empirically.

When I am at my best, as a group facilitator or a therapist, I discover another characteristic. I find that when I am closest to my inner, intuitive self, when I am somehow in touch with the unknown in me, when perhaps I am in a slightly altered state of consciousness in the relationship, then whatever I do seems to be full of healing. Then simply my *presence* is releasing and helpful. There is nothing I can do to force this experience, but when I can relax and be close to the transcendental

core of me, then I may behave in strange and impulsive ways in the relationship, ways which I cannot justify rationally, which have nothing to do with my thought processes. But these strange behaviors turn out to be *right*, in some odd way. At those moments it seems that my inner spirit has reached out and touched the inner spirit of the other. Our relationship transcends itself and becomes a part of something larger. Profound growth and healing and energy are present.

This kind of transcendent phenomenon is certainly experienced at times in groups in which I have worked, changing the lives of some of those involved. One participant in a workshop put it eloquently: "I found it to be a profound spiritual experience. I felt the oneness of spirit in the community. We breathed together, felt together, even spoke for one another. I felt the power of the 'life force' that infuses each of us—whatever that is. I felt its presence without the usual barricades of 'me-ness' or 'you-ness'—it was like a meditative experience when I feel myself as a center of consciousness. And yet with that extraordinary sense of oneness, the separateness of each person present has never been more clearly preserved."

I realize that this account partakes of the mystical. Our experiences, it is clear, involve the transcendent, the indescribable, the spiritual. I am compelled to believe that I, like many others, have underestimated the importance of this mystical, spiritual dimension.

In this I am not unlike some of the more advanced thinkers in physics and chemistry. (For example, see Capra, 1982.) As they push their theories further, picturing a "reality" which has no solidity, which is no more than oscillations of energy, they too begin to talk in terms of the transcendent, the indescribable, the unexpected—the sort of phenomena that we have observed and experienced in the person-centered approach.

The person-centered approach, then, is primarily a way of being that finds its expression in attitudes and behaviors that create a growth-promoting climate. It is a basic philosophy rather than simply a technique or a method. When this philosophy is lived, it helps the person expand the development of his or her own capacities. When it is lived, it also stimulates constructive change in others. It empowers the individual, and when this personal power is sensed, experience shows that it tends to be used for personal and social transformation.

When this person-centered way of being is lived in psychotherapy, it leads to a process of self-exploration and self-discovery in the client and eventually to constructive changes in personality and behavior. As the therapist lives these conditions in the relationship, he or she becomes a companion to the client in this journey toward the core of self. This process is, I believe, illuminated in the case material that follows.

Jan—and the Process of Change

Occasionally one interview will illustrate several aspects of the therapeutic process as it occurs in the changing relationship between therapist and client. Such an interview was the one I held with Jan. It was a half-hour demonstration therapy session, held onstage before a workshop of 600 participants in Johannesburg, South Africa.

Several individuals had volunteered, and the next morning, shortly before the interview, my colleague Ruth Sanford told Jan that she had selected her as the client.

Jan and I took chairs facing each other, so that the audience had a side view of our interaction. We adjusted and tried out our microphones. Then I said that I wished a few moments of quiet to collect myself and get centered. I added that she might also like that time to become quiet, and a nod of her head indicated that she would. I used the time to forget the technicalities and to focus my mind on being present to Jan and open to anything she might express.

From this point on, the material is taken from the recorded interview. The excerpts given contain the main themes and significant points. The material omitted consists of further explication of some theme or the pursuit of some issue that was dropped.

The reader will find it profitable, I believe, to first read the interview as a whole, looking only at what Jan and I said, and skipping over the comments on the process that are interspersed from time to time. A second reading can then be done by segments, stopping to consider the comments on each segment.

Carl: Now I feel more ready. I don't know what you want to talk with me about, because we haven't done more than say hello to each other. But whatever you would like to bring up, I'd be very ready to hear. [Pause]

Jan: I have two problems. The first one is the fear of marriage and children. And the other one is the age process, aging. It's very difficult to look into the future, and I find it very frightening.

Carl: Those are two main problems for you. I don't know which you'd rather pick up first.

Jan: I think the immediate problem is the age problem. I would rather start on it. If you can help on that, I would be very grateful.

Carl: Can you tell me a little bit more about the fear that you have of aging? As you get older, what?

Jan: I feel that I am in a panic situation. I am thirty-five years of age, and I've only got another five years till forty. It's very difficult to explain. I keep turning around and I want to run away from it.

Carl: It's enough of a fear that you really—it really sets off a panic in you.

Jan: Yes, and it's affecting my confidence as a person. [*Carl:* Mm-hmm.] It's only started happening in the last eighteen months, two years, that I've suddenly realized: Hell's teeth, everything's catching up on me. Why do I feel like that?

Carl: And you didn't have those feelings very much until perhaps a year and a half ago. [Pause] Was there anything special at that time that seemed to set it off?

My initial responses have two purposes. I want to make it completely safe for her to express herself, and so I recognize her feelings and ask nonspecific, nonthreatening questions. It is also part of my purpose to refrain from anything that would point in a particular direction or would imply any judgment. The direction the interview will take is completely up to her.

Jan has moved from *stating* her problems to beginning to *experience* the panic she is feeling. Her attitude is clearly that the help, if any, will come from me.

Jan: Not that I can recall, really. Well, my mother died at fifty-three, [*Carl:*

Mm-hmm.] and she was a very young and very bright woman in many ways. But I think maybe that has something to do with it. I don't know.

Carl: You sort of felt that if your mother died at that early age, that was a possibility for you, too. [Pause] And time began to seem a lot shorter.

Jan: Right!

Already Jan is using the safety of the relationship to explore her experience. Without being aware of its significance, her nonconscious intellect moves her into a consideration of her mother's death.

My response shows that I am beginning to feel at home in her inner world, and I go a bit beyond her description. My sense of her world is confirmed by her "Right!" If she had said, "No, that's not it," I would immediately have dropped my picture and tried to discover the meaning her statement did have for her. I have no investment in the correctness of my responses as I try to understand.

Jan: When I look at my mother's life—and she had many talents—she unfortunately, towards the end, became a bitter woman. The world owed her a living. Now I don't want ever to be in that situation. And at this point in time, I'm not. I've had a very full life—both very exciting and very sad at times. I've learned a lot and I've a lot to learn. But—I *do* feel that what happened to my mother is happening to me.

Carl: So that remains sort of a specter. Part of your fear is: "Look what happened to my mother, and am I following in the same path. [*Jan:* Right.] and will I feel that same fruitlessness, perhaps?"

Jan: [Long pause] Do you want to ask me some more questions, because I think that will help you to draw information out of me? I just can't—everything is a whirlwind, [*Carl:* Mm-hmm.] going around in circles.

Carl: Things are just going around so fast inside of you, you don't quite know where to [*Jan:* Where to begin.] take hold. I don't know whether you want to talk anymore about your relationship to your mother's life, your fear of that, or what?

A long pause on the part of the client is frequently fruitful. I wait with interest to see what follows.

First comes a clear indication that in her mind I am the authority, I am the doctor. She will fit into my wishes.

For my part, I don't refuse verbally to follow the medical model, to be the all-wise doctor. I simply do not *behave* as an authority figure. Instead, I show that I understand her confusion and leave her with a nonspecific lead.

It is interesting that she interjects to finish my sentence for me. It is an indication that in her *experience* she is recognizing that we are together in this search—on the same side of the table, as it were, rather than the doctor on one side, the "patient" on the other.

Jan: The older I get, though, the stronger I feel about the marriage situation. Now whether the two are related, I don't know. But the fear of getting married, and being committed, and children—I find very, very frightening. And it's getting stronger as I get older—

- Carl:* It's a fear of commitment, and a fear of having children? And all that seems to be a growing fear, all those fears seem to keep increasing.
- Jan:* Yes. I'm not afraid of commitment. For instance, when it comes to my work, to friendship, to doing certain things. But to me marriage is very—
- Carl:* So you're not a person who's irresponsible or anything like that— [*Jan:* No, not at all.] you're committed to your work, you're committed to friends. It's just that the notion of being tied into marriage—that's scary as hell.

The long pause leads Jan to open up and explore her fear of marriage.

The client “increasingly differentiates and discriminates the objects of his feelings and perceptions, including . . . his self, his experiences, and the interrelationships between them” (Rogers, 1959, p. 216). Jan certainly illustrates this statement in my theory as she recognizes her fear—not of commitment but only of a special commitment.

We now are definitely companions in the search to know her self, her deeper, inner self. We are free to take part in each other's statements.

- Jan:* [After *long* silence] Do you want me to speak?
- Carl:* I wish I could help you get a handle on some of those things that are going around in your head.
- Jan:* Um, [Pause] I really didn't think I'd be called up here today. Otherwise I'd have made a list! [Pause] Would my problem be— My love is for the arts, right? I'm very much involved with music and dancing. I'd like to be able to just throw everything up and devote my life to music and dancing. But unfortunately the society that we live in today forces one to work and live up to a certain social standard. It's not something I regret. It's something I miss, something I really want to do. But how do I do it? Has that got something to do with—as I say, I'm getting older, and I keep turning around and running back.
- Carl:* So what you're telling me is, you *do* have a purpose in life, you *do* have something you really want to do— [*Jan:* Oh, yes.] to commit yourself to music, to the arts, but you feel society prevents you from doing that. But what you would like to do is to throw up everything else and just concentrate on your love of music.
- Jan:* Right.

When Jan is struggling to know in which direction to move in her exploration, she endeavors to give the responsibility to me. I simply express my very real feeling.

Her next statement is striking evidence that there is great advantage in letting the client take the lead in the interview. The first long silence led to her exploration of the marriage issue. This one leads to a surprisingly positive aspect of her self-image. For someone who has seemed unsure, her love of the arts seems sure and certain.

My response has the advantage of bringing fully into awareness her positive aims and goals. There is value in holding up a mirror to the client.

From the point of view of therapeutic process, Jan “experiences fully, in awareness, feelings which have in the past been denied to awareness, or distorted in awareness” (Rogers, 1959, p. 216).

- Jan:* In the last eighteen months everything—it's quite strange, but—the situation is becoming *vital*. I was led to believe that when one grows older, one became more patient, more tolerant. I've really not had a care in the world. It's only now that I have a real *problem*, and I don't know how to cope with it.
- Carl:* It seems to me that in the last eighteen months, everything seems very, very important—every moment, every aspect of life [*Jan:* Yes.] seems more vital and more significant. And the question seems deeper: "What am I going to do?"
- Jan:* [Pause] Can you answer a question for me, Dr. Carl? Can you see the two related: the marriage issue, the aging process, or not?
- Carl:* Yes, it seems to me that they're related in your talking about them, and that you're saying the fears grow stronger, as time goes by, both of marriage and of children and of commitment, as well as a fear of aging—that it seems a package of fears. And alongside that, you've been saying that "I know what I want to commit myself to—I just can't."

Jan experiences the urgency of the issues in her life and her helplessness in dealing with them. Following a familiar pattern, she turns to the authority for an answer.

She has already related these two issues in her conversation, and I simply feed back to her the essence of her own feelings and their meanings. It is not obstinacy on my part that refuses to give any answer from me. It is a profound belief that the best answer can come only from within the client and that Jan is, in fact, answering her question by what she has been saying.

- Jan:* Mmm. And it's not—it's got absolutely nothing to do with giving. Just the fear of being trapped. As I am trapped in my age right now.
- Carl:* You get this feeling of being *trapped*, trapped by the year you're in, trapped by the age you are, and the fear of being trapped by marriage as well. [Pause] So life has become a frightening prospect.

It is interesting to follow her search for the right word—the right metaphor—to match her feelings. She has tried out *fear*, *panic*, *feelings being vital*, and now *trapped*. Finding a word, a phrase, a metaphor that exactly matches the inner felt meaning of the moment helps the client to experience the feeling more fully.

I am now quite comfortably moving about in her inner world, sensing the way she feels, even when she has not put it fully into words.

- Jan:* Yes. [Pause] I still carry on, [*Carl:* Mm-hmmm.] you know, and I try to keep this deep down inside of me. [Pause] I don't walk into the office and say, "Help, please, I'm thirty-five. What am I going to do?" It's not that at all. I can still, if I want to put my shorts on and wear my pigtails, but that's not it. It's—it's fear of being trapped.
- Carl:* And those fears that you have, they don't prevent you from functioning in the world. That goes on OK, but nevertheless they are fears deep inside, and the biggest fear of all is the fear of being trapped, in so many different ways.

I failed here to respond to her growing awareness of the incongruence between what she is experiencing and the façade with which she faces the world. I also missed

the casual reference to shorts and pigtails, clearly another positive facet of her self-concept. Usually the therapist is given another chance if he misses significant meanings, and that opportunity is given to me in the next interchange.

- Jan:* And yet people say to me, "Jan, you're in your prime. You've got everything going for you!" And little do they know inside what I feel.
- Carl:* That's right. So that outside and to an observer, you are in your prime and you have everything going for you. But that's not Jan inside. Jan inside is quite different from that.
- Jan:* [Long pause—whispers:] Do you want me to say something else? [Laughter from Carl and audience] I'm just nervous as hell up here!
- Carl:* You can take all the time you want, because I feel I'm getting acquainted with that frightened little Jan that is inside.
- Jan:* So the more I talk, the more I'm helping you to get through to me, is that right?
- Carl:* The more you're getting through to *me*.
- Jan:* This may be related, and it may be able to help you: whether it's something to do with the amateur dramatics that I used to be involved with, I don't know, but I love playing the naughty little girl. And whenever I want to get away with something or I want something, I would play that naughty little girl.
- Carl:* That's a part that you know very well. [Jan laughs.] You've acted it in many plays. [*Jan:* And it works!] It *works*—the naughty little girl can get away with things. And one other thing that you said: that you're trying to help *me*. I guess I hope that what we're doing here will help *you*. [*Jan:* Thank you.] [Pause] Because—I feel that when you're telling me things, it's not for my benefit. I hope that you can get better acquainted with yourself by telling us some of those things.

Here is Jan's clearest statement of her view of the relationship: that she, if told to do so, will give me information so that I, the expert, can then be the external agent of help for her. The successfulness of my attempt to shift the locus of responsibility to her is uncertain. I do not believe she understands what I am saying, and her "Thank you" makes it clear that to her I am still the active helping agent.

What has play-acting a naughty little girl to do with her problems? I do not know, but I deeply trust that her nonconscious mind is taking a path that will lead us to the areas most relevant to her fears.

- Jan:* I have discussed this problem with one other person, who has been through this experience. She knows the traumatic effects that it has on a person. She herself went through similar feelings. And she said, "You know, it's very strange, but I have been able to overcome that, over a period of time—with the help of one or two people." I think the important thing is [Pause] to be able to relate to somebody that you can trust and have confidence in, who can spend the time with you. But it's very difficult to find.
- Carl:* But what you would like is someone you really could trust to help you go through and grow through this difficult period.
- Jan:* Mmm, of being trapped. [Laughs] So, I just don't know how to cope with it. I really don't.

Carl: Feel that it's a little too much for you.

Jan: Well, it's a part of my everyday life, you know, from the moment I wake up to the moment I go to bed. Obviously I don't discuss it with many people. For fear of the reaction, really, I think. It's important to try and find somebody who's been in the same boat—who knows what you're going through.

Carl: So you really are seeking—somebody, the somebody you need, the somebody you want, the somebody you could trust.

She describes very well the kind of nonjudgmental, understanding, caring, trustworthy relationship that everyone desires. It is a good description of a truly therapeutic relationship, another evidence of the fact that, fundamentally, "the client knows best."

Jan: Yes. I am trying to do it on my own, but I find it's not easy. [*Carl:* That's right.] To have somebody pushing me, saying, you know, "I *know* you can do it, you *can* do it, you *will* do it, you *are* going to do it," and that would—

Carl: That would really help.

Jan: Just one person who can believe in me.

Carl: One person who believes in you enough to say, "Sure you can do it—you're OK. You're going to get through it!" But you can't tell that to yourself.

Jan: No—and I try to be positive, and joke about it. But I, I'm just very scared. I'm going backwards. I'm not going forwards— [Long pause] I have tried to—push it to one side. I have tried to—wash it by the wayside, erase it. I've tried stopping myself when I think about it. But even that doesn't work anymore. [Pause] It's almost, metaphorically speaking only, as if I am walking into darkness. I'm coming out of the light and into the darkness. [*Carl:* Ahh.] Do you understand what I mean. [*Carl:* Yes, I surely do.] Because I fear again now—

Carl: And it's so risky, coming from the lighted spot into the darkness, into the unknown. [*Jan:* Right.] Such a chance, and so frightening.

Jan: [Pause] I can't think of anything else to say, other than—how do I overcome it? [Pause] I do feel at the moment it's a very lonely problem—I'm sure other people have been through it. Other people haven't. And they probably think, "Hell, what's the *problem*?" I even joke about it sometimes, to myself, and say, "I think I'll put an ad in the paper—you never [Laughing] know what response you'll get!" [Pause] It's the laughing and, you know, I tend to try and laugh it off.

Carl: But you wish so much that there was this other person, this person from outside, who would give you confidence, who could help you through this tough time.

Jan: Yes, because although I do pray—I have my own feelings about religion—I believe in spiritual development. And maybe for me this is a karmic conditioning, I don't know. That's another thing, of course, that's going on in my mind: it's a part of my development, as it were. But I feel that it's not enough; I must have physical contact. [Pause] Somebody I can relate to—

Throughout this segment she experiences the full depth of her hopelessness, her inability to deal with her fears, her desire for a helping relationship with another,

her conviction that help must come from the outside, the laughing face with which she hides her pain.

I walk with her, psychologically, along this path of discouragement. I do light up at her use of the light-into-darkness metaphor. The reason is evident in my next response.

Carl: Somebody you can relate to. And I guess that—this may seem like a silly idea, but—I wish that one of those friends could be that naughty little girl. I don't know whether that makes any sense to you or not, but if that kind of sprightly, naughty little girl that lives inside could accompany you from the light into the dark—as I say, that may not make any sense to you at all.

Jan: [In a puzzled voice] Can you elaborate on that a little more for me?

Carl: Simply that maybe one of your best friends is the you that you hide inside, the fearful little girl, the naughty little girl, the real you that doesn't come out very much in the open.

Jan: [Pause] And I must admit—what you have just said, and looking at it in retrospect—I've lost a lot of that naughty little girl. In fact, over the last eighteen months, that naughty little girl has disappeared.

This was the kind of intuitive response that I have learned to trust. The expression just formed itself within me and wanted to be said. I advanced it very tentatively, and from her initial blank and puzzled look, I thought that perhaps it was completely irrelevant and unhelpful, but her next response shows that it touched something deep in her.

I have come to value highly these intuitive responses. They occur infrequently (this is the first one I have captured in a recording), but they are almost always helpful in advancing therapy. In these moments I am perhaps in a slightly altered state of consciousness, indwelling in the client's world, completely in tune with that world. My nonconscious intellect takes over. I know much more than my conscious mind is aware of. I do not form my responses consciously, they simply arise in me, from my nonconscious sensing of the world of the other.

Carl: Has disappeared. Uh-huh, uh-huh. [Laughs] Then I wasn't so far wrong. Maybe you ought to look her up! [Laughter]

Jan: Would you like her number? [Laughter]

Carl: I would! [Laughter] I think she would be fun, and I don't think she would be so frightened. She sounds pretty sassy! [Laughter]

Jan: [Dubiously] So even though I'm getting older, I can still be a naughty little girl?

Carl: Well, I don't know—I'm only eighty, but I can still be a naughty little boy. [Much laughter and applause]

Jan: [Laughing] I won't make any comments! [Pause] Would that change my feelings about marriage?

Carl: I think that's a very significant question you're asking yourself. If you were a better friend of the little girl inside of you, would that make you less fearful of the risk of marriage? I feel badly that she's been missing for the last eighteen months, I really do.

Jan: [Pause] You're so right. You've really hit the nail on the head. And—

It is clear that our relationship has become a comfortable, companionable joint search. We can be humorous about serious things. It is an open, trusting relationship.

For Jan the realization sinks in that she has been denying a significant part of her experience, of herself, and that this is a deeply important fact.

I like my responses. They are spontaneous and funny but entirely serious in their intent.

Carl: I'm sorry, but we're going to have to stop in a few minutes.

Jan: OK—I'm fifteen minutes fast, because I'm always late. [Laughs]

Carl: Fifteen minutes older? [Much laughter]

Jan: [Laughing] Let's see, it's ten to—

Carl: Yes, then I think we'll stop. Is that all right?

Jan: Yes. You've been a great help, and I'd like to thank you very much indeed.

The ending seems abrupt, but time was up, and her willingness to joke about the situation seemed to indicate that she could close without feeling deprived. In addition, this was a point of real closure in the interview itself.

Significant Elements in the Interview

This interview contains many elements that are characteristic of a person-centered approach to psychotherapy or to any helping relationship. I will mention some of them.

1. A nonjudgmental acceptance of every feeling, every thought, every change of direction, every meaning that she finds in her experience. I believe this acceptance is complete, with one exception, which it is useful to note. I show real acceptance of her desire to be dependent, to rely on me as the authority who will give the answers. Notice that I accept her *wish* to be dependent. This does *not* mean that I will behave in such a way as to meet her expectations. I can more easily accept her dependent feelings, because I know where I stand, and I know that I will not *be* her authority figure, even though I am perceived as such.

But at one point my acceptance is not complete. She says, in effect, "I'll talk more to help you in your task," and instead of completely accepting her perception of the relationship, I make two futile attempts to change her perception. I respond, in effect, "What we are doing is to help you, not me." She disregards this, and no damage is done to the process.

2. A deep understanding of her feelings and of the personal meanings she finds in her experience, bringing to bear all the sensitivity of which I am capable. I am sufficiently successful in entering her private world that she feels increasingly safe in the relationship and able to express whatever comes to mind.

This sensitive empathy is so deep that my intuition takes over at one point and, in a way that seems mysterious, is in touch with a very important part of her with which she has lost contact. At this point we are perhaps in a mutual and reciprocal altered state of consciousness.

3. A companionship in her search for herself. As a therapist, I do not want to lead the client, since she knows, better than I, the pathway to the sources of her pain. (Of course, this is a nonconscious knowing, but it is there nevertheless.) I do not wish to fall behind in my understanding, because then the exploration

would become too frightening for her. What I wish is to be at her side, occasionally falling a step behind, occasionally a step ahead when I can see more clearly the path we are on, and taking a leap ahead only when guided by my intuition.

4. A trust in the “wisdom of the organism” to lead us to the core of her problems. In the interview I have a complete trust that she will move into the areas that are relevant to her distress. No matter how shrewd I might be as a clinician, I could never have guessed that her mother’s death or her love of the arts or the role she played on the stage years ago would have any relevance to resolving her fears. But when trusted, her organism, her nonconscious mind—call it what you will—can follow the path that leads to the crucial issues.

So, as a therapist, I want to make it possible for my client to move in her own way, and at her own pace, to the heart of her conflicts.

5. Helping the client to experience her feelings *fully*. The best example is when she lets herself experience, quite completely, the *hopelessness* of being *trapped*. Once such a troubling feeling has been felt to its full depth and breadth, one can move on. It is an important part of movement in the process of change.

It is worth noting that when she says, with great conviction, “You’ve really hit the nail on the head,” it is clear that she is *experiencing* something definitely helpful to her, and yet she does not verbalize what this is. No matter. It is the experiencing that is important, and the therapist doesn’t need to know precisely what it is (although in this case she informed him the next day).

Perhaps pointing out these elements will have made it clear that a person-centered approach in therapy leads to a very subtle, often intricate process, a process that has an organic flow of its own. For the therapist to be fully present as an understanding, caring person is highly important in making this process possible, although the most crucial events take place in the feelings and experiencings of the client.

The Outcome for Jan

Immediately after the interview, in describing her experience to the participants, Jan said, “For me, strangely enough, though I’m very nervous, I found it very exciting. I needed help, and I think I’ve found an answer, thanks to Dr. Carl.” This might be taken simply as politeness were it not for a subsequent conversation.

The next morning Jan told me that the interchange about the “naughty little girl” had initiated a self-searching. She realized that not only was the naughty little girl missing, but several other parts of her self had also disappeared during the past eighteen months. “I realize that to face life as a whole person, I need to find those missing parts of me.” She said that for her the interview had proved to be a “soul-shaking experience.” The process that started in the interview appears to be continuing in her.