PCT — State of the art Statement, given on the occasion of the IVth ICCCEP, Lisbon, July 11, 1997

First of all I also have to apologize that I had no possibility to prepare this statement before the conference because I was not informed that I should make it and therefore I must also apologize for the incomplete English which does not allow to express the nuances as I wished I could and for the need to read it.

I will name some subjects in short from my point of view — naturally without claiming to be complete. The details have to be left open for the discussion. And I restricted myself to the more basic philosophical and anthropological areas of our art.

Carl Rogers (1961a, 163) once stated: "In these days most psychologists regard it as an insult if they are accused of thinking philosophical thoughts. I cannot help but puzzle over the meaning of what I observe."

So here are some parts of the person–centered philosophical puzzle because in our days I assume state of the art in our circles is that it *is* a virtue to be encountered with philosophical questions and ideas about what one does.

Anthropology

- State of the art is to understand *PCT as relationship therapy person to person* which has a lot of implications:
 - It implies an *image of man* that sees the human being, be it the client, be it the therapist, as person and, thus, equally considerate both, *the individuality and autonomy* and *the interconnectedness and responsability* of the human being. State of the art is to equally focus the substantial dimension and the individual aspect of being a person as well as the relational dimension and the interactional aspect of becoming a person.
 - This implies that a *theory of motivation* that includes the motivation which *comes from the inside* (from the actualizing tendency of the organism) *as well as that from the outside* (from the challenge and the vocation initiated by the other). State of the art is therefore to regard the actualizing tendency no longer to be the only person–centered axiom, but to view relationality as equally important.
 - This implies a *developmental psychology* which also not only understands development and change from the actualizing tendency but also out of the relations somebody is born into, is brought up in and lives in. So self concepts and problems, crises and disorders derive not only from not being accepted unconditionally enough but also out of the process of mutual communication between the child respectively the individual and his or her significant others a view which is well backed by the phenomenological research on infants in the last years. Here I want to point to the works of Ute Binder. State of the art is to pay attention to and to do research on a person–centered developmental psychology for all stages of live.
 - This implies to include the person's corporality in the view of the person and, thus, in an unspectacular way the *inclusion of the body* in the practice of a truly personal therapy which neither "adds" the body to psychotherapeutic work or concentrates on the body instead of the psyche nor does it use it, *in order to* "heal the soul by the body" thus instrumentalizing it. State of the art is to be open to all kinds of creative ways of doing therapy following the client's needs and abilities and not to limit oneself to verbal interaction. State of the art is to regard therapy as an art form rather than as a technique.
 - This implies to see the person as woman and man. State of the art is to take into account the differences in *sex and gender* and to be aware of and gradually overcome the still male-dominant view and practical behavior of most of us.

State of the art is to view the main focus of the therapeutic relationship in the presence of the therapist. Presence herewith is not seen as a mystic experience which rarely happens in precious moments of therapy, it is also not seen as an ideological or pragmatic here-andnow-principle. It rather means that, in his or her psychophysical presence, the person who offers a person-centered relation opens up to his or her partner, either another person or a group the possibility to concentrate on the fertile instant and thus on oneself and his or her relations — which can be called a kairologic view (after the name of the Greek god of the right opportunity). The attitude focused by Rogers at the end of his life — as Brian Thorne mentioned in the first morning session here - means an unconditional openness for the relationship and towards the person of the Other in the given moment. For the personcentered core conditions it opens up an anthropological dimension which goes far beyond attitude and behavior. The attitude of presence is not something additional like a fourth core condition or a variable, but they are preserved as well as dissolved by being superseded and transcended in the sense of a Hegelian "Aufhebung". Presence is the point to which the trias of the core condition refers in a comprehensive way and makes them clear as conditions for personal encounter. State of the art is a way of being which is actually a "way of being with".

Encounter

- Thus, *encounter* becomes clear as a central category of the approach.
- State of the art is to view the therapeutic relationship aiming towards personal encounter. Encounter means to be surprised by the unexpected, to be affected by his or her inner, his or her essence, to be challenged by the other person as really being another person and, thus, as therapist not only being an alter ego but a partner in the encounter, him– or herself being open and challenging. This implies an understanding of therapy which encourages to be curious. Encounter means being counter and from this position responding to whatever demands come from the other as well as reaching out for the other. Dependence therefore is no longer a bad word once it's understood mutually, as interdependence. The idea of an independent person is given up because this view includes the danger to overemphasize autonomy and to overlook the context: the others and the environment. State of the art is a notion of therapy far beyond the view of a passive, friendly mirroring, in an inactive way non–directive therapist waiting for the other to develop by himself or herself without being involved, but bringing oneself into play.

No expertism

• State of the art is to "live in" such a relationship as an im-media-te encounter without the use of techniques including the client-centered ones. Such an approach quite fundamentally rules out any conception of oneself on part of the therapist as an expert on the problems or on the person of the partner. *"Expertism"*, if it has to be described, lies exactly in the ability to resist the temptation of behaving like an expert, Such an approach excludes any preconceived use of methods and techniques, not rooted in the immediate experience of the relationship. The only "means" or "instrument" employed is the person of the therapist him- or herself. State of the art is to work on a process where "any means can fall apart" (and then encounter takes place), as Martin Buber (1923,19) stated unsurpassably .

"We" / The group

• State of the art is to be interested in the newer *developments in phenomenology and encounter philosophy* and, thus, e.g. to overcome the excluding view of an "I–Thou"–

relationship towards a "*We"-relationship* which takes into consideration that there always is more than two, even if in a one-to-one-therapy only two sit together. This means not only to be aware that there always is a third subject which both persons involved relate to, but, with Emmanuel Lévinas e.g., to pay attention to the context and the social dimension.

Concerning practice this especially leads to a new view of group therapy. Leif Braaten, Germain Lietaer and myself among many others worked on that. Taking man seriously as a social being results in a *re-evaluation of the indication for single and group therapy*. Because of the fundamental understanding of the human being in his or her social relations, as a person in the group, because of the realization of the fact that working on conflicts is best done where conflicts originate, namely in groups, state of the art is to consider in how far the group is the therapeutic place to be chosen first, whereas the single relationship — as a special and especially protected relationship — is indicated only when special protection is needed or other specific reasons call for it.

Epistemology

• State of the art is an *epistemology* strictly based on constructivist principles. Among others the person-centered image of the world developed in a phenomenological frame brought about new perspectives for our understanding of the processes of knowledge and of reality. Because of such a pluralistic view there is an end to concepts and ideas where somebody can claim to have the truth, to show it to others or to teach others how they have to see the world, their fellow humans and themselves. Heterogeneousity, enduring contradictions and partial views are what is required. And since its accordingly pure nonsense that a single person has the say and, thus, all have to be heard, power has to be shared or even more: the power of the person has to be acknowledged. State of the art is to view oneself as a therapist in the position to be empowered by the client.

Theory of science

• State of the art is is to aim at a new paradigm for the *theory of science*, especially in regard to the dialogue of the different therapeutic orientations, including both, research on the comparison of different approaches and schools and the interdisciplinary discussions among therapists working at one and the same institution, e.g. It's no longer of any use to play the power game of ,,what you have, I have had for a long time; but what I have, you don't have in your concept". It's no longer of any use to look for concepts in other orientations in order to adopt them and thus integrate them for the sake of enrichment or whatever. It's no longer of any use to try to convince others of one's own philosophy and acting. It's no longer of use to try to combine all methods to one "General Psychotherapy" or something like that, a universal psychotherapy beyond orientations. It's of no use to be eclectic or fundamentalist. Instead of this the challenge is to view one's own theories as theories in a specific perspective and to try to see them under different and other perspectives. This means to try to translate one's own concepts into the other language and thus to learn how limited and contextual they are. By "alienating" them on purpose into a foreign context the strengths and the weaknesses of the own concepts can become clear and so it becomes possible to develop them further. The interesting moments are where the translation fails and in the new context the concepts do not make sense. This "contrast operation" offers the chance to reconsider the rules and preconditions behind the own concepts which otherwise would not become clear. State of the art in this interdisciplinary psychotherapeutic dialogue is temporarily to leave home, travel in a foreign country not to change its culture nor to adopt it, but to learn about oneself.

Psychology

• State of the art is a *new psychology* for a new view of man and world ... but here Maureen O'Hara is the one who is best qualified; it's her subject. State of the art is aiming at a psychology which enables us to at least temporarily give up our fear of the complex world we live in and to see the diversity of people and their opinions, their ways of live and belief systems as an enrichment rather than as a thread.

Ethics

• State of the art is — last but most fundamental of all — an *ethics* out of experience as a basis for all philosophy and acting. If we understand what we do as "service" — this is the literal notion of "therapy" — acting receives a socio–ethical dimension leading from the understanding of "responsibility" as a response–ability to the fellow being's needs to a new understanding of self–realization as realization of oneself through and together with others. In the interpersonal encounter, which we call therapy, addressed and asked to respond, we assume a deep responsibility, an obligation in which our fellow human expects us to render the service we owe to each other — neither more nor less but what is meant with the frequently misused and still irreplaceable word "love". (And here again we come to the development of the approach described on the first morning.) State of the art is to do therapy out of love, not as an attitude of "anything goes" or in the sense of "whatever I do is good as long as I think (or you believe) that I love you" or "all we need is love", i.e. not in an undifferentiated way, but out of a "prosocial motivation", as Ute Binder calls it, out of the notion of love Erich Fromm¹ describes, out of what Carl Rogers himself called "agape" — a way of being with that can be clearly described, taught and learned.

¹, When the well-being of the other takes precedence over one's own well-being".