

# Letters

Dear S&S,

The January 1996 issue of *Self & Society* has two articles which criticise some remarks of mine about SAFAA. Richard Mowbray has tried to argue that people with SAFAA (Sufficient Available Functioning Adult Autonomy) are different from people who are mentally distressed. People with SAFAA are 'present in the "here-and-now", including feelings and empathy. That is, their ability to be "in touch" with the present, both perceptually and emotionally. Moreover, it is "adult autonomy" that is referred to, so it is a question of sufficient ability to be in touch with the present and to be self-responsible and self-directing that is involved.' (Richard Mowbray, *The Case Against Psychotherapy Registration*). Mowbray allows, of course, that this enviable state is not fixed or permanent at all times, but can fluctuate and vary.

What he does not seem to allow, and this applies to Dennis Postle's article as well, is that people who get into therapy (by which I include psychotherapy and any of the deep forms of counselling or personal growth work) are committed to a process which may take them into quite other territory. I have often said, and firmly believe, that everyone is neurotic (meaning everyone has oedipal stuff, unfinished family stuff), everyone is psychotic (meaning everyone has Kleinian stuff, birth stuff, prenatal stuff) and everyone is divine (meaning everyone has a transpersonal self and potentials for spiritual growth). Most people, most of the time, are able to suppress, divert, compensate for, manage or otherwise hide these

deviations from the norm. But in therapy they are likely to surface. And if therapists have not dealt with these things in their own lives, they are liable to let down the client at this point.

The requirements I tentatively laid down for handling such situations were mainly about the creation of a stable framework within which the therapist-client relationship could function safely. It is a question of trust and reliability. All the details, the 'list' which Mowbray dislikes so much, are in the service of this general consideration. I want to take seriously the possibility that in these deep waters certain subpersonalities (what Alvin Mahrer calls deeper potentials) may come to the surface and have a quite negative reaction to changes in the framework.

Mowbray strikes out boldly for a non-frame of continuous negotiation with the client: this suggests that he overestimates the ability of the client to be rational and clear at times of deep work and possibly deep crisis. He seems to me to underestimate the power of the unconscious. Certainly in his book it does not occur in the index. Yet anyone working with clients at any depth must be aware of the way in which the unconscious may work at quite a different rate, a different level and with a different agenda from the conscious mind. Even if we put it in a more neutral way, and said that there are different subpersonalities at work within the person, one or more of them may be quite irrational, and may come to be in charge at certain times. A change of date or time

may be wholly acceptable to the conscious mind, but deeply threatening at another level.

Whenever Mowbray speaks about transference and countertransference, he always lays the stress on the excesses of psychoanalysis in encouraging and even creating the transference. He has little or nothing to say about how to handle transference or countertransference in real life, still less projective identification (another real phenomenon). Denis Postle much the same. In my book *The Reality Game* I have a whole chapter on transference and countertransference from a humanistic point of view, and another one on resistance. Brammer, Shostrom and Abrego, in their book *Therapeutic Psychology* also have a chapter where they look at these questions from a humanistic standpoint. There is nothing new about this. My own work as a supervisor tells me that for any therapist to be ignorant of his or her own countertransference is to risk serious mistakes which may harm the client. There is a very good discussion of this, and some case examples, in Petruska Clarkson's recent book *The Therapeutic Relationship*.

What I am saying is that the SAFAA formula does not get us off the hook. It does not enable us to ignore the deeper potentials of the person. It does not enable us to relax the careful maintenance of a sound therapeutic framework. Of course we can argue about the exact formulation of such a framework, and the details are endlessly disputable, but the basic issue is there. Incidentally, I agree with Denis Postle that if we are to be careful about boundaries, we should be more careful than we have been in the past about the difference between a group therapist and

an individual therapist. He argues, and I agree with him, that a group therapist should have had group training and experience, just as an individual therapist needs to have had individual training and experience. Here at least there is some agreement.

John Rowan

Dear S&S,

Don't worry, Denis (Denis Postle, January issue)!. Those clients who originally chose 'self-created', non-registered therapists and were thus responsible for the contemporary strength of humanistic and transpersonal psychology that has led to the question of registration, will once again vote with their feet — those same feet that gave 'alternative' medicine and therapy the financial allure they have today. The same instincts as before will warn them off the 'registered' therapists. Over-awed, expecting to be judged and categorised rather than helped by those with lists of recognised credentials — doesn't this always happen? — they will choose out, again! In something as intensely personal, private and individual as personal growth/personal and spiritual development/humanology, clients do not want to be directed, controlled, supervised and protected. I never did. Did you?

In the interest of transparency I admit that I do have a heap of qualifications. I got them by accident. They seemed to come with doing what I was committed to and would have done anyway. I learned long ago (and was surprised then) that clients and students choose the person, not the CV.

Joy Manné

Dear *S&S*,

It was a bit rich of Tom Chamberlain, Editor of the *UKCP Newsletter*, to go on about 'If dissent is to be respected, so is evidence' in his response to Guy Gladstone's piece in the January 1996 issue of *S&S*. Granted, Guy did not cite any supporting evidence for the views he expressed, but does UKCP itself adhere to such stringent requirements? For example, what evidence has UKCP presented to support its claims that statutory registration will protect the public? I have yet to see any evidence published by UKCP, in its *Newsletter* or elsewhere.

*Richard Mowbray*

Dear *S&S*,

I was pleased to read Brenda Rogers' letter in *S&S* asking what counsellors might want from AHPP and for their views on the United Kingdom Register of Counsellors. Personally I feel that the UKRC is potentially a good idea, as long as it is flexible enough in its registration criteria. I believe that AHPP could have an important role as a sponsoring organization, offering more 'humanistic' accreditation guidelines.

I work as a primary care counsellor in the NHS. A counsellor who works specifically with relationship problems or specializes in alcohol and drug counselling will have very different training requirements from my own. It makes sense to me therefore that different counsellors will want to be accredited for different skills. I believe therefore that AHPP should accredit counsellors in different categories, for different competencies. AHPP counsellor accreditation should be applicant-centred, done in the

spirit of peer assessment and highly flexible. The onus should be on applicants to convince their peers that they are competent enough to gain recognition in the specific or generic areas of counselling practice in which they want to work. I also believe that an accrediting organization has a duty to provide a degree of protection to the clients of the people it accredits. A balance has to be created in which counsellors feel a degree of healthy nurturance from their accrediting body, and the body sets firm and appropriate boundaries for counselling practice. I believe that the AHPP could be an ideal organization to fulfil this role.

Through teaching counselling in Further Education settings, I have come across a model used by FE colleges in order to accredit courses, which I think would work well in counsellor accreditation. A tutor who has written a course has to present an outline of the course to tutors from both their own and several other local FE colleges. The emphasis is on the tutor explaining to his or her peers why the course meets minimum accreditation criteria. The other tutors then have the opportunity to clarify their own queries about the course. If necessary, elements of the course have to be rewritten before accreditation is granted.

If this model were to be used for counsellor accreditation, the counsellor would state what he or she wanted to be accredited for and then might present the following to a panel of peers:

- case studies
- transcripts of counselling sessions
- supervisor's and trainer's reports
- a proposal setting out why the applicant thinks he or she is suitable to be recognised as competent by the panel.

This might detail training, experience and personal development; including a statement of areas of weakness and proposals for addressing them.

The panel of peers might then ask the counsellor any questions they thought relevant, including perhaps questions about ethical practice and additional training. The whole process would be overseen by a chairperson who would ensure that the group process was given a helping hand where necessary, and that the panel embodied the core conditions of counselling when carrying out their assessment. The group could also use their immediate experience of the applicant to reflect on whether they, as individuals, would feel comfortable receiving counsel-

ling from them.

Such a model makes far less inflexible demands on minimum hours of training. Counsellors should be trusted to identify their own areas of learning and personal development needs. When they personally felt they had reached a level of competency that would justify accreditation, they should have the opportunity to go before peers for a broader opinion. Any counsellor who was unable to identify their areas of required learning would probably not be ready for accreditation anyway.

I look forward to hearing about the AHPP's development of and decisions about this issue in future editions of *S&S*.

*Kevin Pickard*

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## **The AHP Page**

*Sue Mickleburgh*

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**T**his is the last AHP page I shall write; my term of office finishes at the AGM on 13th April and someone else will be elected to carry the torch.

We spent some time in the last Committee meeting talking about who might take on the role of Chair (I have to say no one jumped at the chance!) and exploring ways of devolving the work of Chair even further so that the role was almost that of figurehead and the work was shared by everyone. We also discussed the idea of rotating the functions of Chair, but that seemed more complicated, because one person has to be elected and named for purposes of the Charity Commission and our Constitution. Anyway we shall con-

tinue to explore alternative ways of organising ourselves and will happily tell you all about it at the AGM if you like.

The year has gone quickly; it seems no time at all since I agonised publicly in this Journal about what direction AHP might take, and I feel pleased and relieved to be able to say that we have an enthusiastic, active Committee who are all putting energy into new AHP projects. I have mentioned some of these to you over the past year — the Festival, our exploration of Economics and Power, and the wider availability of *Self & Society*. All of these groups are working hard and we hope that you will find the result of their efforts useful and stimulating.