Dr. Rogers and the Lego Spaceship (Towards a Teachable Focusing-Oriented Person-Centred Theory) Clive Perraton Mountford



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Beautiful, Beloved, and Flawed

Every therapeutic encounter is unique. My job as a counsellor is to track the grain of each encounter as closely as I can, never dominating or seeking to control, never using coercion or force however subtly. An internal logic will guide each session, and I will help my client best if I really listen to their words and for their experiencing, seeking to empathise and understand, and giving my intuition its freedom. At the same time, I can trust that my practice—which may look strange and insubstantial to critics—is supported by over half a century's worth of empirically grounded theoretical concepts and structures; some of these have entered the mainstream, and some offer humane alternatives to current fads for counsellor-centred therapies and the medicalisation of human suffering.

Can I sign my name to this? Is it true? The first part doesn't go far enough: there's more than this to effective person-centered therapy. As for the final sentence, I don't think I can extend my trust so far. Despite its elegance, and despite being deeply loved, person-centred theory is—as most theories eventually prove to be—deeply flawed.

The flaw is conceptually simple: Classical person-centered theory requires that all the things which might bring a client to therapy originate in the conditions of worth the client has experienced (Rogers 1959), but this is contrary to the evidence. Other common etiological factors such as post-traumatic stress, lose-lose choices,

bereavement, and childhood deprivation also bring clients to therapy, and they do not readily collapse into conditions of worth issues. Campbell Purton first drew attention to the problem (Purton 2002 and 2004), and I have restated it in several places (e.g. Mountford 2006a and 2006b). Yes, it might perhaps be shown that debilitating conditions of worth are associated with much client distress, but I foresee no way to reduce all client distress to conditionality or account for the broad efficacy of person-centered counselling in such terms. Therefore, there must be more to person-centered counselling than what Mearns and Thorne have called 'sabotaging conditions of worth' (2007, p. 98), and the classical account of how and why person-centered counselling works must be incomplete.

Although there has been little overt response to this critique, perhaps recognition of the problem is quietly going mainstream. The new and third edition of Person-Centred Counselling In Action takes an interestingly different approach to person-centered theory. There is no longer any reference to Carl Rogers's (1957 and 1959) necessity and sufficiency claim, the one which rests upon his assertion that all client distress grounds in conditionality, even though for many it remains a person-centered article of faith. Instead, there is simply a discussion of conditions of worth and an exploration of how the personcentered way of being is an antidote. There is also a lot of theoretical material post-dating conditions of worth theory, but to my eye—and in contrast to the first and second editions-there is no complete and consistent theory of person-centered counselling.

Where has our theory gone? Is Campbell's critique (plus, perhaps, earlier objections to necessity and chronicled sufficiency bv Kirschenbaum 2007, p. 592) finally bearing fruit? If the latter is the case, then I am both delighted and, as they say, 'conflicted'. I have spent much of the past six years working with trainee counsellors, and if in consequence of critical objections which I have been a party to I am now without a complete theoretical package to offer them, then that is not a result which I sought or desire. I want, therefore, to outline how I think such a package might be re-achieved. To that end, I first need to explore some aspects of the relationship between person-centered

counselling and experiential focusing.

It's All the Same Duck

For me, person-centered counselling and experiential focusing have always gone together. That is one reason the opening statement does not go far enough for me. I trained in both simultaneously, and I find that therapeutic accompaniment is as much about being tuned to what is emerging from the implicit as anything I can represent in more 'classically' person-centred terms. When, several years ago, I was asked to resurrect a personcentered training program in difficulties, I initially included experiential focusing as a vehicle for personal development. However, some of the trainees were unwilling to leave matters there. Like me, they found that person-centered counselling and experiential focusing just didn't seem separable, and over time the place of focusing within our training program shifted. From a bolted on vehicle for personal development and fostering the 'core' or 'counsellor conditions' it became an inseparable aspect of the training, of how we think about therapeutic relationship, and—increasingly—of what we conceive person-centered counselling to be.

At the heart of this shift is an important and perhaps original recognition: there is a continuum of modes of therapeutic relating which link the most structured and "formal" kind of focusing to what one might call 'conversational therapy'. The continuum has been described in detail elsewhere (Mountford 2006c), but I do need to introduce and discuss the main spine of it here in order to justify what I'm going to be claiming later. The spine consists of:

Conversational Therapy Conversational Focusing Closely Held Focusing Meditative Focusing

When I first met focusing, I was introduced to what I now think of as meditative focusing: feet on the floor, eyes closed, clear a space, etc. This is the kind of practice described in Gene Gendlin's little self-help book Focusing (1981). Over time, and with the help of clients, I began to use focusing in a much less formal way and to gently encourage clients towards an awareness of their felt sense without invoking any focusing terminology. I might, for example, ask "Does that feel right?", while patting my belly, and the client will (in focusing language) respond by resonating what has just been said with their felt sense and finding an answer. A counselling session utilizing this kind of focusing will usually involve many such short visits with the felt sense and subsequent returns to a more conventional mode of conversation. I'm sure the pattern is familiar to many focusing-oriented therapists (cf. Mearns and Thorne 2007, p. 80). I call it conversational focusing.

So far, I believe, all this is pretty standard. What I want to describe next is perhaps less so. Although Gene Gendlin's Focusing presents a meditative style of focusing, a more recent example of his work shows him very actively involved with the focuser, who is themselves very actively involved with Gene (Gendlin, date unavailable). Using students and eventually clients as co-experimenters, I explored this way of focusing, and it has proved congenial and powerful. It is as purely and concentrated a focusing process as meditative focusing, and a session will often last as long or longer. The focusing companion, however, is much closer to, and much more actively in relationship with, the focuser. The companion can 'hold' the focuser, and help them to accept their experiencing just as they might durina more conversational exchanges. For both parties, the experience is one of intimacy and what is becoming known as 'relational depth' (Cooper and Mearns 2005). There really is no barrier, or possible barrier, between a focuser and a focusing companion who are both relating from their immediate felt experiencing, making frequent eye contact, and in steady verbal communication. Because such a distinctive way of relating needs a handle, my students, training colleagues, and I call it closely-held focusing.

I say this is a distinctive way of relating, but I'm told that from an observer's perspective it looks (and reads) a lot like classical personcentered counselling. In a way that is unremarkable because most of the focusing companion's responses will be 'client-centered' reflections and summaries; in another way it is deeply remarkable. This is focusing as any two people engaged in closely-held focusing will assure you, but to an observer they won't, for the most part, appear to be focusing so much as engaging in intense personcentered counselling. I subscribe to the If it looks like a duck, and walks like a duck, and quacks like a duck, then it is a duck. school of reasoning, and I think that closely-held focusing must be both a modality of focusing and a nuance of person-centered counselling. The corollary is that person-centered focusing and counselling cannot be as different as some believe.

What Is the Paradigm?

I don't wish to make him sound like a stuffed exhibit in the Counselling Hall of Fame, but Brian Thorne is for many the paradigmatic personcentered counsellor, and Brian has made video records of his work. In The Cost of Integrity Brian (1997) can be observed not just offering the loving presence and acceptant relationship which he is noted for; he can also be seen relating to his manner readily client in a understood in focusing terms. I have put it to Brian that, in general, he is guided throughout his interaction with clients by what in focusing terms would be called his own 'felt sense', and that he systematically responds to his clients in such a way that they are gently (and not always so gently) encouraged deeper into their own experiencing and into relationship with their felt sense. He agrees. He also agrees that this description applies to Carl Rogers's later work as well. (As Greenberg (1996) has argued.) In other words, two of the most effective and influential representatives of person-centred therapy can be understood as working in ways which are partly explicable in focusing terms. (Process experientialists Greenberg have a different but related way of thinking about this which I'm not going to discuss here. See for example Kirschenbaum (2007) pp. 530-533.)

From here it is a small step to the claim that conversational personcentered counselling—or conversational therapy as I called it above—is closely related to conversational focusing which in turn connects to closely-held and meditative focusing. Thus, in addition to the apparent duality of closely-held focusing, there is a

clear link running from conversational person-centered counselling to the most structured and formal kind of focusing.

Is that a duck I see running loose?

One Therapy; Two Legs

A simple and for me compelling explanation for what I am asserting is that person-centered counselling and experiential focusing do not just share a common origin in the collaborative work of Carl Rogers and Gene Gendlin, they are different and differently emphasized aspects of the same fundamentally indivisible way of offering therapy. One aspect of this way of offering therapy is the utterly acceptant—and at times passionately acceptantrelationship within which counsellor and client can be themselves without fear or any pretence. It is the kind of relationship which Brian Thorne promotes as central to effective therapy and which Dave Mearns now theorizes as having 'relational depth'. Another aspect of this way of offering therapy is the recognition that human beings and human experiencing are processes, that process sometimes needs a little friendly attention in order to run smoothly, and that in attending to our any case awareness of awareness is probably the most important thing a human being can do. (That is not a typo.)

I have likened these twin aspects to the two 'legs' of therapy (Mountford 2006c), and I find that I still favour that image. If we look back to the 1950s, and particularly if we consider Rogers's (1956) unpublished address 'The Essence of Psychotherapy: Moments of Movement', then it seems clear that

what eventually became personcentered counselling and focusingoriented counselling was one entity moving forward upon two 'legs': there was *relationship* and there was process. attention to Kirschenbaum 2007 pp. 528-529.) More recent exponents give the impression—or at least I gain the impression from more recent exponents—that a counsellor can get around just fine using only one of these legs, but—for me—hopping is inadequate locomotion.

I do not know whether what I am now claiming will seem self-evident, or controversial or just plain misguided. However, if I am right, then the practice I am describing needs a theoretical story which stresses both *relationship* and attention to process, and I think that I have the beginnings of one. It isn't fully worked out yet, but it does promise the theoretical package for trainees which I lamented earlier.

That proviso suitable for trainees really is important. Although Gendlin himself has an evolving and deeply impressive body of theory, and despite my nearly 40 years of pedagogic experience, I cannot imagine how I would teach Gendlin's theory to a cohort of counsellors in training. What I need is the kind of neat and accessible package provided by the first two editions of Person-Centred Counselling in Action and derived from Rogers's 1957 and 1959 papers. Students understand and like that package.

That Lego Spaceship

Suppose that years ago you were given a model spaceship made out of Lego. You really prized the spaceship, and you put it on a shelf to admire. Over time, it acquires dust, and it begins to look a very

dated kind of spaceship. You might, of course, revere it so highly that you just continue to leave it alone. Or you might take it down and make some small modifications which update it. Or you might even say to yourself that it is after all made of Lego, and there is no reason why it cannot be broken down into its constituent parts and assembled guite differently. The first and reverential option is akin to the way person-centered purists relate to our tradition. The second option is akin to what Mearns and Thorne have done in their recent book. The third option is the one which attracts me. Although there is no doubt that in his 1957 and 1959 papers Carl Rogers gives pride of place to conditions of worth theory and the necessity and sufficiency claim, and there is certainly no doubt that this part of what makes the theoretical package so elegant and appealing, there is also no reason why we might not build something a little different with the materials provided.

Of the constituent claims of classical person-centered theory, one group draws my interest at least as powerfully as the conditions of worth material. It is the things Rogers says about incongruence and distortion and denial. For example, the second of the famous six conditions states ...the client...is in a state of incongruence, being vulnerable or anxious.' (1957, p. 221) In other words, every client who comes to therapy is incongruent, distorting and denying their experiencing, and this can be thought of as the reason why they are coming to therapy: living with this level of incongruence is just not sustainable or worthwhile. For the client who engages with therapy, the direction of travel is towards greater congruence, greater 'capacity and tendency to symbolize experiences accurately in awareness' (1959, p. 234), and greater openness to experiencing. Thus it is consistent with the 1957 and 1959 papers (and in keeping with Rogers's broader interests) to characterize therapy as perhaps one of many kinds of process whereby a person moves away from distortion and denial and towards what might be characterized as 'awareness and acceptance', towards (in Gene Gendlin's phrase) "making friendly" with their experiencing. In the 1957 and 1959 conceptions, fundamental for reason incongruence is always traceable to conditions of worth, but I see only benefit in recognizing that things aren't quite so simple and many different springs can feed our need for what eventually becomes a kind of crippling dishonesty with, and alienation from, ourselves and our environment.

What I am suggesting now destroys the neat, self-sustaining system of belief provided by adherence to conditions of worth theory coupled with the necessity and sufficiency claim, but that loss looks increasingly a blessing. When I think how much so-called personcentered training and practice has become something of which the best one can say is that it probably does no harm, and I reread Carl Rogers's views on Freud's 'insecure disciples' and their 'iron chains of dogma' (Rogers 1959, p.191), it begins to seem that our neat, selfsustaining system has become a thing to smother us.

When First We Practice To Deceive...

Developing a theoretical statement applicable to conversational

therapy, meditative focusing, and everything in between, and filling the hole left by excising the necessity and sufficiency claim, leaves no choice but to reassemble those Lego pieces. An additional benefit of doing so may be at least a partial antidote to creeping dogmatisation. However, contrary to what I suggested in Mountford (2006c) I cannot begin by appealing to the usual notion of congruence I have just been discussing. It is important to be clear about the reason for Congruence is originally a geometric concept applicable to isometric shapes (triangles, in the classroom context), and therefore two clearly identifiable shapes must exist before we can say that congruence is exhibited. As the term is used in counselling, there must still be two clearly identifiable things—such as experiencing and behaviour—before we can speak of congruence. Focusing, however, is about that which does not yet exist. It is a process whereby we seek and prepare to receive a felt sense, attend while the felt sense forms, and then acquire a handle or some kind of 'name' for that felt sense. Focusing is a little like sitting beside what may prove to be a rabbit hole, or may turn out to be some other kind of hole altogether, and waiting to see what emerges. What is more, if we take seriously what Gendlin has to say about the nature of the implicit—and, perhaps, when we pay close attention to our own experience of the implicit—we find that there is neither a rabbit nor anything else down that hole initially: whatever emerges into awareness does so in consequence of us paying attention and cannot be said to have been there prior to our attention. Therefore, we cannot speak of congruence and incongruence in a focusing context.

It is about here that my job becomes more difficult. I have a clear sense, a felt sense, of a way of being which is characterized both by a high degree of congruence in the personcentered sense and by a high degree of openness to whatever may emerge from the implicit and into awareness. This way of being has to do with a relatively comfortable and confident relationship with the moment by moment play of my experience, but I fear that I am already pushing against the boundaries of the language I'm using, and I find no simple word or phrase to characterize what I'm talking about. I do think that it is a way of being, and I do incline to characterize that way of being as a preparedness to accept and hold in awareness whatever is, here and now. I also recognize that what I'm saying may be less than transparently clear to anyone else, and so I will try approaching all this from a different direction.

Working in environmental ethics as well as counselling, I'm aware how much philosophical time and energy has been spent trying to specify what makes human beings different from other animals, and I have my own contribution to offer. Human beings are spectacularly good at deceiving each other, deceiving themselves, and interfering with their own process psychological and experiencing. We really are very good at incongruence and a kind of dissociation which separates us from the implicit, from the organic emergence of awareness, and from knowing how it really is to be us in any given situation. Initially, this is functional within our environment. We deny and distort our experiencing in order to try to meet conditions of

worth and maintain a particular selfconcept. (Classical person-centered theory.) We retreat from our experiencing and smother our feelings almost before they are born because we cannot, or we fear that we cannot, hold and survive them. (Fragile process.) We blot out experience, or attribute our experiences to separated parts of ourselves, because they are unbearable. (Dissociative process and, I would suggest, post traumatic stress.) We separate into different and sometimes deniable configurations in order to deal with paradox, conflict, and competing demands upon us. (Configuration theory.) We set aside our feelings and experiences because there simply isn't opportunity to process them. (Bereavement, traumatic incidents, war, etc.) The list could be continued, but I hope that what is here illustrates my point: we routinely practice the antithesis of what I am loosely calling openness, awareness, and acceptance on an everyday basis and mostly for initially good reasons. Then circumstances change, perhaps we change independently of our circumstances, and what was once functional becomes problematic. We recognize that something is wrong with us and with our lives. Some of us then seek therapy. therapist's job—as I currently conceive of it, and I believe this conception compatible with both classical person-centered theory and focusing practice—is to provide an environment and a kind of accompaniment which makes it possible for the client to move towards that degree of openness, awareness, and acceptance which, overall, works best for them right now. This can then result in further change and the yearning for yet more openness, awareness, and acceptance and so therapy can sometimes become a very long-term process of 'self-development'.

A Job Description with Familiar Consequences

If the therapist's job is, for the most part, as described, then some important claims advanced by classical person-centered theory are close to logical consequences of that description. For brevity, I will present them in point form. (Much that is claimed for 'the therapeutic alliance', e.g. Kirschenbaum (2007) pp. 594-598, is perhaps similarly explicable, but my present concern is person-centred theory.)

- It is pretty much axiomatic that a client can only go where the therapist can, and is willing, to follow. Therefore, a therapist must themselves be seeking openness, acceptance, and awareness, and be relatively open, acceptant, and aware when with their client. (Cf. condition 3, Rogers 1957, p. 221.) A therapist who is less in touch with their experiencing than their client may make the client's difficulties greater. (I have heard Mary Hendricks cite research supporting this assertion, but I have not yet tracked it down.)
- 2. If the purpose of therapy is to foster openness, acceptance, and awareness, then it will be best if the therapist starts by accepting and really trying to understand and enter into their client's individual phenomenal reality. We are social and relational creatures, and whether or not we are burdened with problematic conditions of worth, it is easier for us to be open and acceptant

- towards our experiencing when we are with others who understand, accept, and value experiencing. Furthermore, if we doubt our own worth and the value of our experiencing, and particularly if it is difficult to be our experiencing for reasons like shame, then acknowledging what we are and what we are feeling will be a whole lot easier knowing that we are in the company of someone who really does unconditionally accept us and perhaps even loves us. (C.f. Conditions 4 and 5, Rogers 1957, p. 221.)
- The kind of acceptance involved here is acceptance of one's own experiencing, of who and what one is and how that feels, of how it is to be this particular locus of awareness and evaluation within this particular phenomenal reality. Such awareness cannot be gained in consequence of someone else interpreting us, or explaining us to ourselves, or telling us how it is to be us: it must grow from within, and there is no other way to acquire it. (C.f. classical person-centered directivity.)
- 4. This does not mean that there are never times when it makes sense for the therapist to offer suggestions, disagree, or even argue with their client on the basis of their experiencing. It does, however, mean that such things must always be done within a context and in such a way that the client is entirely free and able to reject what the therapist is saying in favour of their own experiencing.

5. Given these points, something much like the overall personcentered relationship expounded and exemplified by Mearns and Thorne (2007) is close to being a logical consequence of the way I have described the therapeutic enterprise.

Note that there is no theoretical reliance upon conditions of worth in any of this, but that when conditions of worth are adversely affecting a client, then just about everything said by classical personcentered theory remains applicable.

Now what about the focusing side of things?

A Culture of Dissociation

Like some spiritual and meditative practices, regular engagement with experiential focusing leads not just to a recognition that human beings are superlatively good at meddling with their experiencing, but that we are living at a place and in time whereby a particular kind of meddling is highly rewarded. I have described elsewhere how our culture separates the cerebral and the rational from the inward and the personal (Mountford 2006a, section 9.), and with the possible exception of the arts and entertainment the former is rewarded while the latter is disparaged. Thus we encouraged from an early age to become divided creatures, to turn away from the inward and the personal, and to strive towards a paradigm of rationality which is more deeply a paradigm of dissociation. My sense is that most of the clients I have worked with are afflicted in this way. When a client tells me 'I don't know who I am.', that usually cashes out as 'I'm not in contact with my experiencing.'

Therapeutic focusing is an antidote to all this and a way of beginning to rebalance ourselves. We are not—as a client recently told me his prior life and education led him to believe—a brain on a stick. We are an organism, an animal that has evolved a large and capable brain in the service of its organismic needs. The organism is not there just to support and pander to the brain; if anything, matters are the other way around. Although as I write that I recognize how much I am beginning to view this whole dichotomised conception ourselves as fundamentally disordered. Feeling and thinking living in awareness of the implicit and the emergent, and taking time to reason things through—are probably innately much closer to one indivisible process than it is possible for someone raised and educated as I have been to comprehend. Therefore, it is essential when working with clients who seek openness, awareness, and acceptance that something much like focusing be available to them as and when they're ready to engage with it. Implicated in most client distress will be a degree of culturally mediated dissociative process and a lack of awareness and trust in the implicit and their own felt sensing.

One (Indivisible) Relational Offering

I wrote earlier about what I think of as counselling's two legs, and it is now possible to say more about their similarity and difference. For the most part, classical personcentered counselling involves offering a particular kind of relationship to another (the client)

so that they can experience (and if necessary begin to develop) that kind of relationship with themselves. Focusing companionship simply in and of itself involves offering a particular kind of relationship to another's felt sense (the focuser's), and to that which is implicit for them, so that they can more readily experience (and if necessary begin to develop) that kind of relationship for themselves.

In both cases, the relationship can be characterized in terms of openness, awareness, acceptance. What differs is the recipient, and I think that this is why, at least in conversation, Brian Thorne has expressed some reservations about the use of focusing within counselling: he fears the loss of person-to-person relationship. If I am right, however, and if being close to our felt sense and the implicit in a friendly and welcoming manner is integral to our humanity, and if a much tighter integration of that which is felt and that which is thought is both natural to us and in our best interests, then we cannot really distinguish relating therapeutically to the individual and relating therapeutically to their felt experiencing. That merging of the two kinds of relationship is precisely what I believe I noticed about Brian's own way of working, and it probably constituted the initial grain of sand around which all this theorizing and argument has gathered.

There remain two threads which need noting even if I cannot tie them off.

The first thread is the question: What is to be done about the actualizing tendency? For some, the actualizing tendency is a treasured part of person-centered theory, and there is certainly no analog within focusing

theory. That is because focusing theory doesn't need one. If we are working with a process-conception of human being, it is otiose to say that either the process or the individual 'actualizes' because, by definition, a process is already doing just that. Perhaps another way to put this is that a living organism can be counted on to get on with living, and to do its best to flourish within its environment without any need for steering or pushing interventions from outside, because that's just (empirically) how organisms are. 'actualizing tendency' is ontologically unnecessary. However, if it is felt useful and necessary, or if I'm getting something badly wrong, then I cannot see that invoking an actualizing tendency causes problems for anything I have said

The second thread is highlighted by a remark made by Judy Moore when I presented some of these thoughts а recent process model symposium. She noted a very Buddhist feel to my conception of therapy. I'm sure Judy is right, and it can hardly be an accident given that I have been engaged in Buddhist practice longer than I have been a therapist. However, so far as I can ascertain, everything which I say here is drawn directly from person-centered theory, focusing theory, and my own clinical and focusing practice. Moving towards a conception of therapy involving Buddhist practice and theory would necessitate considering the roots of human suffering as understood within Buddhism. It would be a very different conception, and all that I want right now is a theoretical story to tell about focusing oriented person-centered counselling because that is what I offer to my clients and seek to teach my students.

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