
An investigation into the client at the heart of therapy

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This paper reports on an exploration of the experience of the client at the heart of therapy. A grounded theory analysis of clients' experiences of therapy provided through a voluntary sector counselling service was undertaken, and generated four main categories: permission, engagement, transparency and restructuring. The results of the study are presented in a way that hopefully retains much of the richness of what people have reported about their experience of counselling. The findings of the study are discussed in terms of the idea that counselling can provide a setting where people can have common therapeutic requirements met.

Key words: client experience, common factors, grounded theory, outcome, process, reflexivity, therapeutic requirements

This paper is an investigation into people's experience of being the client at the heart of counselling and psychotherapy. By taking this client-centric perspective, the study reported here differs from the majority of published research, which approaches the investigation of therapy from a therapist or expert frame of reference. In many cases, this existing research has attempted to prove that therapy in general, or a particular brand of therapy, works (Wilson and Barkham, 1994). This motivation has, however, been called into question. In their overview of a major volume on psychotherapy research, Bergin and Garfield (1994) state that 'rather than argue over whether or not therapy works, we could address ourselves to the question of whether or not the client works!' (p.825). This view is supported by a comprehensive review of process and outcome studies conducted by Orlinsky et al (1994). In their investigation, over 2000 separate studies were collated and tabulated to identify variables that showed a positive impact on therapy. Significantly, it was often found that variables perceived from the client's perspective were more consistently associated with positive outcomes than were variables assessed from the point of view of either the therapist or an independent observer.

In order to explore this client perspective of counselling more thoroughly, Rennie (1990, 1992, 1994a, 1994b) has conducted a number of qualitative studies into the process of counselling and psychotherapy. The central theme to have emerged

from these studies was what he termed the client's 'reflexivity', whereby people are actively aware of, and in control of, how they engage with therapy. Significantly, this reflexivity may sometimes not be apparent to the therapist; the client may covertly pursue his or her own agenda, or even manipulate the therapist into making the kinds of responses they need (Rennie, 2001). It would seem imperative to tap into this reflexivity when evaluating the outcomes of counselling and psychotherapy. In this regard, McLeod (2001) has identified a number of key advantages of using qualitative methods, which have the potential to capture the reflexive experience of the client, when undertaking research into the benefits and outcomes of therapy.

Though few in number, existing qualitative investigations into the outcome of therapy have provided some interesting results (see McLeod, 2001, for a review of this research). In a study to evaluate a family therapy practice, Howe (1989) found that less than 25 per cent of participants found therapy to be effective in this setting. A key advantage of the study was that, instead of merely being left with this rather disappointing finding, the therapists involved with the study also gained valuable insights into why people found the therapy unhelpful, leading to real changes in their practice. In their research into people's long-term usage of therapy and other mental health services, McKenna and Todd (1997) found that clients are implicitly aware of how they use therapy in different ways at differ-

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ent times in their life. Kühnlein (1999) has conducted research into how people have integrated their therapy a few years after ‘treatment’ has finished. The results indicate that different people make use of the same therapy setting in quite diverse ways, depending on how they understood their problems.

The aim of the present study has been to contribute to this body of work and help build a fuller picture from the client’s perspective of what counselling means to them. It is an attempt to gain a better understanding of the role that therapy plays in meeting the needs of people who come to use counselling services. The desire to produce yet another grand theory of therapy has been resisted in favour of trying to be as true to participants’ words as possible. In doing this, it is hoped that counsellors and therapists from all backgrounds will be able to identify with what is presented, and that it will contribute to their understanding and awareness of what it means to be the client at the heart of therapy.

Method

In placing the client at the heart of this study, it has been important to adopt a research methodology that allows as much of their voice to be heard, alongside the authorial voice of the researcher. The use of a qualitative approach to the study has made this possible by embracing a discovery-oriented approach, with the aim of uncovering, illuminating and clarifying rather than seeking to test a predefined hypothesis (McLeod, 1996).

Participants

Participants were recruited from clients of a general public, voluntary sector counselling service that provides counselling on a self-referral basis to an urban community of around 700,000 people. A diverse client group uses the service for individual counselling, couples counselling and family counselling. Counselling is provided by voluntary counsellors from a variety of orientations, including psychodynamic, person-centred, solution-focused and Gestalt. This diversity of client/counsellor mix provided an opportunity to explore underlying similarities of experience, independent of the particular presenting problem or style of the counsellor.

In order to minimise the intrusion of the study, and to gain an overall perspective on clients’ experiences, it was decided to contact people three to four months after they had finished their counselling. This time frame was considered long enough to allow the immediate effects of counselling to settle and short enough for a strong retention of the person’s experience. Only clients who had previously indicated their interest in participating in the research were contacted. This was achieved by distributing information about the study within the agency, along with contact consent forms for current clients of the

service to fill in. This approach necessitated the time lag of waiting for clients to finish their counselling, and for an additional three to four months to pass before these people were contacted.

Due to the time constraints of the study and the method used to recruit people, the number of potential participants was restricted to 11, of whom 9 were successfully contacted, all of whom agreed to participate. Five of these people were male, four female, with ages ranging from 21 to 72 (average age 40). Presenting problems were reported as relationship, marital and family difficulties, depression, anxiety and stress. The number of counselling sessions attended ranged from 3 to 21 (average 10). Each person was given the choice of being visited at their home or coming to the counselling centre for an interview. Five people chose to be interviewed at home, four at the counselling centre.

The researcher

Having recently completed a person-centred training course prior to undertaking this study, I was keen to expand my understanding of what it was that people got out of coming to see me. I wanted to know more about what counselling meant to people and what they found in counselling that helped them cope with their problems. This led me to undertake an MSc in Counselling Studies at the University of Abertay Dundee. While investigating the literature as part of my MSc dissertation, I found a substantial amount of research into the client’s process and outcomes of therapy. However, the majority of this work was related from either the therapist’s or the expert’s viewpoint. Very few studies actually asked the clients themselves what therapy had meant to them in their own words. This motivated me further to try and put aside the various theories that I had been taught in order to discover from the client’s perspective what had made a difference to them.

The process of undertaking the study has had a lasting impact, both professionally and personally. It has been a struggle to attempt to do justice to the very personal and moving accounts of people’s experiences of counselling. As part of this struggle, I have been compelled to look beyond my person-centred origins to the common ground of all counselling and psychotherapy. Further, the research process has demanded that I learn to trust myself more fully, and to risk being more open and transparent, not just as a researcher, but as a person.

Interviews

Interviews lasted between 45 and 90 minutes, with an average of just over an hour. All interviews were recorded on standard 90-minute audio-cassette tape. In order to encourage participants to tell their own story of their experience of counselling as much as possible, an open-ended approach was taken in conducting interviews. The interviewer gave a general

description of the study, and then invited participants to talk about their counselling in regard to four main areas:

1. Previous experiences of counselling and their reasons for coming to counselling this time.
2. Their most recent experience of counselling and what stood out as important or significant.
3. Reflection on their life now, and how counselling has played a part in it.
4. What they would be looking for in any future counselling.

Participants were given the lead in the interviews with the interviewer responding with empathic reflections and questions to help them to express more fully their experiences. Care was taken to keep the primary focus on the actual experience of counselling so as to avoid the risk of the interview turning into a counselling session. The result of this approach was a rich insight into what at times felt to be a very personal and intimate experience. On completing each interview, my overwhelming feeling, as the interviewer, was one of being very privileged and moved by what each person had to say.

Analysis

The approach used to analyse the recorded interviews was chosen to allow each participant's voice to be heard as fully as possible. A form of grounded theory analysis was employed to allow the discovery of common themes between all the interviews. This method of analysis has at its heart the philosophy of generating results and theory that are firmly grounded in the data, through a process of constant comparison. The aim here is not to verify existing ideas or form new 'grand theories', but instead to generate a theory that 'fits' and is understandable to the people who work in the area being investigated (Glaser and Strauss, 1967).

To retain the richness of the interviews, analysis of interview material was made directly from the audio-recordings instead of from written transcripts. This was achieved by digitising each recording and transferring it on to a computer. A computer program (designed for the purpose of this study) was then used to facilitate analysis along similar lines to that described by Pidgeon and Henwood (1996). Briefly, interviews were segmented into 'paragraphs' of between two and five minutes duration. Each of the interview segments was then listened to with any emerging concepts tentatively labelled and coded. As coding continued, recurring concepts were compared for similarities and differences in order to construct categories. During the later stages of analysis, these categories began to be integrated to form 'core categories'.

Throughout this process, it was possible to listen directly to interview segments (referenced in terms

of code and category labels), hence allowing voice inflections, pauses and other verbal clues to form an integral part of the analysis. This procedure was helpful in ensuring that category formation was grounded in the actual words of the participants. The codes themselves became an intermediary step that did not rigidly predetermine the limits of the categories formed from them. For example, during the process of listening to the first interview, a code of 'Talking to a stranger' was formed to identify that, for this person, it was helpful that the counsellor was a complete stranger. As other interviews were listened to, more people mentioned this so the code gained in significance. It was important, however, to identify *why* talking to a stranger was helpful for people. The coding process made it possible to go back and review the relevant interview segments, resulting in the category of 'Anonymity' being created.

A key point in this analytic process was the arrival at a set of main categories: *permission*, *engagement*, *transparency*, and *restructuring*. This entailed a struggle to encapsulate all that had been revealed in the analysis to date, whilst knowing that it was impossible to do justice to everything. The resolution of this struggle was largely an 'intuitive leap' that allowed the most significant meanings of the various sub-categories to be coherently structured into the four final main categories. Each of these four categories was then checked back to the source interview segments to check their validity and to obtain key quotes to support their description.

It is acknowledged that this process was very dependent on the researcher's own subjective involvement, and that another researcher may well have obtained a very different set of results. Far from being a limitation, this can be considered a strength of the research methodology. It offers the opportunity for new perspectives and understandings of the phenomenon to be presented. In addition, it is a process which facilitates the researcher's own reflexive learning.

Results

The results of the study are presented in a way that hopefully retains much of the richness of what these people said about their experience of counselling. A number of participants related that, for them, counselling had been a life-changing event, one that had allowed them totally to transform their lives. For others, it was a deeply painful experience, sometimes beneficial, sometimes not. Despite this variety, however, people seemed to relate common themes about their experience: what they found useful and valuable, what they found difficult or felt was lacking. The categories used to describe these themes have emerged from their words, and are not chosen to match any particular theoretical model of

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counselling or psychotherapy. Direct quotes from the interviews have been used throughout this presentation of the results to convey the depth and variety of meaning encapsulated by these categories. Each quote is referenced by the interview number (Ixx) and paragraph number (Pxx).

Permission

On coming to counselling, people may often feel they have not really been able to talk about their problems or difficulties before. Counselling is their first opportunity to say what they have not been able to tell anyone else:

"There was just nowhere to turn. There was no getting away from my problem. My problem was following me to bed at night. I wasn't sleeping at night. I was lying in bed tossing and turning. I was making life miserable for my family and I wasn't accepting that I had a problem. When my wife would ask me and I'd say everything was okay, and it wasn't okay. And once I started coming [to counselling] I was able to open up and tell that things weren't okay." (I1P17)

It is as if people have permission for the first time to say what is really going on instead of holding it all inside. This permission appears to represent the first aspect of their experience that people relate about their involvement with counselling. There were a number of recurring themes or categories that captured various aspects of participants' sense of permission. These are briefly described below.

It would seem that the *anonymity* of counselling was very important for these clients. People found it easier to talk to a complete stranger, someone that they knew they would not have to meet again or do any other business with: "You can admit to it, and then if there's any shame later on, any embarrassment because of behaviour, you walk away from it" (I1P21). The counsellor was not part of their social world so they did not have to worry that anything they said may somehow get back to people they knew: "At the end of the day I didn't know him as a person, we didn't share friends, we didn't share family, we had this place in common and that was it" (I8P12). Additionally, the counsellor was seen to have no preconceived ideas or expectations of the person so they did not need to 'be' anybody apart from themselves: "The counsellor doesn't know you from Adam, they don't know what's gone on before, they can only see you from day one" (I4P20).

In this way, counselling became a *dedicated space and time* where people could bring their problems, which was not used for anything else, and which would not be interrupted or overheard: "The door is shut: the sign is put on 'busy, do not enter'. You have an hour of peace that you know that nobody is going to interrupt, and you know that rather than sit in

silence for an hour you're going to have to start talking about things" (I3P21). There was a sense of a purpose for being at counselling, which was different from other activities in the person's life. People gave themselves time to "pause and just recount what had happened during the week... and sort of to reflect on where I was at each point in my development" (I8P22).

In this setting, people wanted to be *heard and not judged*: "[the counsellor] wasn't there to pass judgement. He wasn't there to make me feel bad about what I may or may not have done wrong. He was just there to sit and listen to me talk" (I8P12). An important point here is that people felt that the counsellor was able to hear everything that they had to say. They may have been aware that internally the counsellor did have their own attitudes and views, but they did not feel that these views were 'put on' to them in any way: "If [the counsellor] did make judgements in his own mind, it didn't really matter to be honest, because I think as a counsellor he was able to hear pretty much anything I had to say" (I8P11).

The importance of the person's *confidence in the counsellor's ability* was expressed by several participants. This confidence appeared to be based at least in part on the expectation that the counsellor had specialised training and experience in dealing with people's problems. "When I come here and talk to [the counsellor] he's probably heard it all before. He'll know the answers because it's what he specialises in... I didn't want to talk to somebody that was just going to start talking at me, telling me to pull myself out of it" (I1P19). People felt more comfortable talking to someone that they knew had been trained to listen, had heard similar problems before and could relate to what they were saying. Similarly, the counsellor was seen as someone who was accustomed to dealing with people's problems and so was less likely to be shocked or disturbed by what a person was saying.

All these points illustrate a key dimension of the dynamic of permission within counselling, that of the person *giving themselves permission*. The counsellor may have provided an anonymous and safe setting, and they may have had years of training and experience of listening to all sorts of problems and difficulties, yet only the person themselves could give permission for their own hurt, anger or other inner turmoil to come out. Likewise, throughout the counselling process, the person permitted themselves to stay with it, to not avoid things, and to do what needed to be done.

Engagement

In addition to having this permission, participants reported that it was also important to feel engaged by the counsellor, and to feel actively engaged with the counselling process and with themselves. It is this engagement that emerged as the second core

aspect of people's experience of counselling. The qualities of this engagement included an attentiveness and responsiveness to what was going on, along with a genuine willingness to be involved.

In being engaged by the counsellor, feeling *valued as an individual* was very important to a person. People wanted to feel that the counsellor really cared: "that you're not just a 2 o'clock or a 4 o'clock, that they want to help and it matters" (I9P16). Here, the counsellor was felt to be paying attention and showing genuine interest in what they had to say as a unique individual, and counselling was not just "like the manual, we get to page 272 and this is where we get into talking about my parents" (I7P4).

Being understood as a human being by the counsellor was also important. People wanted to feel that the counsellor could relate to what they were saying and understand them, and that it "emotionally registers" (I9P5). This quality of being understood was more than a cognitive understanding. It was being understood at a core level, that "there's somebody you know understands you... from a human standpoint" (I2P2). When this quality was present, people felt that the counsellor really knew what it was like: "He was very quick at relating, and it made me wonder if he had been down the road that I've been down" (I4P16).

For some participants, being valued and understood was not enough. These people reported that it was important that the *counsellor actively explored* things with them: "It's okay to talk, but you need someone to be able to draw out certain things, things that you are not talking about. Sometimes you don't know that you're not talking about things" (I7P19). In this way the counsellor's job was seen to be to "latch on, 'you said that, what did you mean by that?' and to tweak out a little bit more about what you said" (I3P28). This level of engagement goes beyond the known, and starts to touch on things at the edge of awareness.

During this exploration, and indeed the whole of counselling, it was important that the *person feels actively engaged* in the process. People reported that they came to counselling to do more than just "spill your guts" (I9P1). They came to do a job, "to force yourself to confront it, because that's what you need to do." (I3P28) By being actively involved, people realised that "because I done it myself I know I can still do it. So that once you've taken one step you know you can take another" (I8P8).

At the heart of this engagement with the counsellor and the counselling process was the person's active *engagement with self*. People expressed that they felt more connected with themselves, often finding a "wee core of strength that I wasn't aware was there" (I7P9). They came to realise that "strength doesn't come from outside, it comes from within, because that is where the soul is, that is your

life, your life is inside of you, it's not floating around outside. It doesn't come from other people. You might find friendship or support from other people, but the real you is inside" (I8P9).

Transparency

Along with this ongoing engagement, the third core aspect of the experience of counselling to emerge from the interviews was that of *transparency*. It was as if people began to be more transparent with the counsellor, that the counsellor was able to see more of them, and that they came to see themselves more fully. This was experienced as an opening up, a dropping of barriers and defences, of a haze that lifts. A number of common themes illustrate this dynamic.

Actually *finding a voice* and being able to put words to their problem or issue was a significant step for some participants: "When I first came into counselling, I wouldn't talk at all, I was terrified of saying anything. And I think in counselling, the more I spoke, the more I realised I could speak" (I8P22). People seemed to have a real sense of release when they were finally able to speak about something that had been unspoken of for a long time: "It took me a long time to accept it and say it... but when I did it I did feel so much better" (I1P7).

As well as actually voicing things, people identified that *being really honest* with the counsellor was also important: "I didn't spare anything, there's no point, if you're going for counselling, in glossing over anything. Just being honest" (I7P5). Not only did people want to speak openly and honestly, they also did not want to have to be reasonable or to justify themselves in any way: "I don't want to have to think about justifying who I am and what I believe. When I'm in the counselling situation, I want to know that I am fully free to say 'Help!' or 'I feel completely inadequate here', so that there is no pretence, none!" (I9P14)

Transparency was also reported as being *seen through by the counsellor*. This could feel as if the counsellor "could read your mind almost, tell you what you were thinking or how you were feeling" (I4P16). The counsellor could see things that were going on for someone that the person didn't think anyone else could see, or did not even know themselves: "How did you know that? I didn't know that was in there so how did you know that was in there?" (I3P29). When this occurred, people seemed to feel a sense of relief that someone could actually see what was going on inside, that someone else knew and they did not have to struggle to make themselves understood.

At the heart of this process of becoming more transparent in counselling was the person becoming more *transparent to self*. People reported that they were able to be really honest with themselves:

"...being really honest with the counsellor was important"

“Far from being a passive receiver of the counselling interventions and ‘therapeutic conditions’, the client is actively involved in all aspects of therapy”

“When I cried during counselling, I knew I was being honest with myself. I think up until I came here I wasn’t” (I1P12). This inner honesty seemed to allow people to begin to see themselves for who they really were, not for who they thought they should be: “I had very high standards for myself and I was very, very upset when I didn’t meet them. And then I realised that nobody is perfect, and I was not about to be the first one. It took me a long time to be able to say that, and really mean it” (I8P15).

Restructuring

The final category of client experience identified in this study was that of *restructuring*. This was reported as coming to see things from a different perspective, of things ‘fitting’ better and feeling more integrated, of being able to let go of things and of being more in control and content. It was as if things become restructured for the person such that problems and issues were resolved in one way or another. This may occur from restructuring provided by the counsellor, of the person restructuring things with the counsellor, or by the person’s own internal restructuring.

The ability of the counsellor to provide a *framework of understanding* was reported as a key feature of counselling. People felt the counsellor was able to offer a more objective perspective, to give their problem a name or to explain its cause and effect: “[counselling] helps you to restructure it, to help you explain things. Like [my problem], well actually this is a product of x, y and z rather than ‘you’re just weird’” (I9P23). Sometimes the counsellor was able to point out things that the person had not been able to see themselves: “I think the thing that changed it round was [the counsellor] pointing out to me my Dad’s failings” (I1P6). This was related by one participant as “like you were in a maze and [the counsellor] knew all the doors” (I3P5). Instead of feeling lost and helpless, the person regained a sense of direction and a framework within which to work from.

The act of *working through things* with the counsellor was another key aspect of restructuring. During counselling, the person felt they were able to keep going over things, until eventually unwanted stuff could be ‘let go of’: “It was like recycling the bad things, which is upsetting. You really want to put it behind you, but it’s difficult to discard it. With the counselling, again we were recycling it. But in order to recycle, I mean when you recycle rubbish, eventually it’s thrown out” (I7P11). In this way, people used counselling to ‘get things out of their system’: “All the things that needed to be dredged up had been dredged up, all the hurt that had to take place had taken place” (I4P17).

This was not necessarily done at a cognitive level, but may have been more of an *emotional and experiential process*: “You have to go through [the process] of grieving and anger and everything, and it

takes a while” (I2P3). This was reported as akin to undergoing an initiation ritual: “I’ve gone through one of life’s stages. You were literally experiencing it, you weren’t looking at a situation objectively and thinking right I’m doing this and doing that. I was right in the situation, it was all happening around me” (I3P18). People didn’t necessarily understand what they were going through at the time, but afterwards it seemed to make sense and ‘fit’ better.

At the heart of this process was the person’s own *internal restructuring*. Counselling may have acted as a key to “unlock wee bits and pieces” (I3P19) but it was the person themselves that was “doing all the walking” (I3P5). People came to realise that “no one can pull you out of it because nobody knows what you’re feeling, nobody knows what you are going through at any given point. So only you can really sort yourself out” (I8P21). With this realisation, people gained more control over their lives, becoming more confident and content: “I’ve got all my confidence back now, my self belief... I feel that it’s not other people that have control of me, I’ve got control of myself” (I1P14).

Discussion

Taken together, these accounts of people’s experience of counselling can be used to provide a representation of the process of counselling and how it made a difference to their lives:

First, a person entering counselling experiences permission, engagement, transparency and restructuring as coming from the counsellor. People feel that the counsellor gives them permission, that the counsellor engages them and sees them transparently, and provides a different structure for them to work with their problem. Second, people experience their expression of these dynamics towards the counsellor. They show their trust in the counsellor and engage with them. They are honest and transparent with the counsellor, and actively work with them in restructuring their problems. Third, people experience their own internal reflection of each of these dynamics. They give themselves permission to actively engage with themselves, are honest and transparent with themselves, and come to restructure things for themselves such that issues and problems are resolved.

From this representation, the quality and level of people’s active participation in the process of counselling can be clearly seen. Far from being a passive receiver of the counsellor’s interventions and ‘therapeutic conditions’, the client is *actively* involved in all aspects of therapy. This is consistent with the position of Orlinsky et al (1994) that “the quality of the patient’s participation in therapy stands out as the most important determinant of outcome” (p. 361).

Even more relevant, however, is Rennie's (1994a) investigations into the client's reflexivity and deference to the therapist. These studies reveal that clients may outwardly defer to the therapist while inwardly working towards their own solutions to their problems. Additionally, clients are seen to recognise and accept the limitations of their counsellor, forgiving the counsellor's mistakes as long as the benefits they perceive outweigh the negatives. In this way, clients can be seen to actively manage their relationship with the therapist in order to get what they need out of therapy, sometimes to the point of manipulating the practitioner into making the kinds of responses they need (Rennie, 2001).

The present study shows that clients are actively pursuing their own needs throughout the process of therapy. On coming to counselling, people 'check out' the situation, finding out how safe they feel, how much confidence they have in the counsellor, how much permission to give themselves. During counselling, people look to engage actively with the counsellor, to explore their issues, to be open and honest, to say what is really going on. As counselling progresses people search for ways of changing, an alternative perspective, a new framework of understanding or an insight that they can use to restructure and make sense of things. The concept of *restructuring* captures a sense of the outcome of therapy, from the point of view of the client, that invites further articulation in future research.

Most significantly, participants who appeared to have got the most benefit from their counselling also related that they felt they had 'done all the walking' themselves. The counsellor may have been an invaluable companion on their journey but it was the person themselves that took the vital steps they needed towards the resolution of their problems. It was this active process of realising their own solutions that appeared to give people the confidence to leave counselling and go on by themselves, satisfied that they would be able to cope on their own.

As much as successful outcomes from counselling rely on the active participation of the client, it would also appear that the active participation of the counsellor is equally important. The review by Orlinsky et al (1994) revealed that the therapist's contribution to the relationship, their role engagement, credibility, interactive collaboration and affirmation of the patient, were all positively associated with outcome. Clients seem to benefit most from a counsellor they feel is involved, assured and affirming, and is able to offer interventions that help them to understand what is going on for them.

With respect to the current study, the counsellor's active involvement was shown to be desired by clients throughout the process of therapy. On coming to counselling, people were looking for the counsellor to listen actively to them, to give them

the space and the permission they need. During counselling, people wanted the counsellor to engage with them as a real human being, to explore things actively in depth, and actually to see them fully for the person that they were. As counselling progressed, people looked to the counsellor to help them change, to offer an alternative way of seeing things, a different framework of understanding or perhaps an insight that triggered their own restructuring process.

A distinction can be made between the kind of active participation described by participants in this study and the counsellor being directive. People wanted someone to be involved in their process, a companion who actively helped them on their way, but not necessarily to be told what to do. In this way, a counsellor may well be 'actively non-directive'. For one participant who relied on somebody else for everything, "from what I was going to have for dinner, to what coloured shoes I was going to wear", what made a difference was his counsellor actively asking him what he thought he should do. For others, it was important that the counsellor actively offered suggestions and alternatives, but then allowed them to go in the direction they needed to.

Although, for those who participated in this study, the experience of counselling appeared to depend on the active involvement of the counsellor, it did not appear to depend on the counsellor's particular approach or theoretical model of therapy. In their interviews, these clients made little mention of specific techniques or strategies used by their counsellors. This supports the idea that all therapies contain 'common factors' that are responsible for their therapeutic effect. These common factors include caring, empathy, warmth, acceptance, affirmation and encouragement (Hubble et al, 1999). However, the findings of the present study suggest there is in fact only one common factor, and that is the client. According to the theory recently developed by Art Bohart (Bohart and Tallman, 1999; Tallman and Bohart, 1999), the client is considered to have a strong, proactive self-healing capacity, no matter how emotionally troubled they may be. From this perspective, therapy is considered most effective when it provides a context and resources that help the client to mobilise and channel these already existing self-healing capacities.

The findings of the current study strongly support Bohart's approach. Instead of counselling providing common therapeutic factors, it can be seen that people have common *therapeutic requirements*. In this way, counselling becomes a specialised place where people can go to have these needs met. However, it also means that people may benefit from other 'helpers' who either partially or fully meet some or all of these needs. These may include friends, family, support groups, spiritual guidance

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“To fulfil these requirements, a counsellor needs to be solid and grounded in him or herself and in their own belief in how they work”

and even self-help books (Bohart and Tallman, 1999, p.43).

The common therapeutic requirements can be stated as follows:

1. *Permission*: people require permission such that they feel free to speak openly and honestly. This can be cultivated by having anonymity, a dedicated time and space, being heard and not judged, and by having confidence in the counsellor’s ability.

2. *Engagement*: people require to be engaged both with and by the counsellor. This can be cultivated by the person feeling valued and understood as a unique individual, and by the counsellor being ‘real’ themselves and actively exploring things with the person at depth.

3. *Transparency*: people require transparency in their relationship with the counsellor. This can be cultivated by the person feeling able to voice things with a deep honesty, without any pretence or need to justify themselves, and by the counsellor ‘seeing through them’ to who they really are.

4. *Restructuring*: people require help to change and restructure things from the counsellor. This can be cultivated by the counsellor offering an alternative perspective or a new framework of understanding, and by accompanying the person as they work through and let go of things, often at an emotional or experiential level.

The idea of ‘common requirements’ has a number of important implications for practice. In becoming a specialised place where people can go to get their therapeutic requirements met, counselling and counsellors become “resources used by clients in their self-healing, self righting efforts” (Bohart and Tallman, 1999, p.16). In this way, counsellors can be seen to be a tool that people use. Different people will find different styles and shapes of tool to be better suited to their needs. Indeed, even when the ‘right’ tool is not available, people can be seen to make the most of what they have, by ‘turning lemons into lemonade’, as Bohart and Tallman put it.

So how can counsellors be more the ‘right’ tool for each client? The common requirements already stated give an overall indicator of what people seem to need from their counsellor. However, each person who comes to counselling will have their own unique requirements, and each counsellor will have their own unique way of offering help. What seems to be most beneficial to people is when these two factors come together. The Orlinsky et al (1994) study found that therapist’s interventions are “positively associated with outcome whenever their patients show a specific openness to that type of impact” (p.306). Viewing this from the client’s per-

spective, it can be seen that if a counsellor is able to work in a way that matches the client’s needs, then the client is likely to gain most benefit. Again, using the metaphor of a good tool, one that moulds itself to the hand of the user is likely to be more useful than one that does not.

Lest this be interpreted as suggesting that the counsellor becomes completely formless, that their own theories of therapy and change are worthless, it must also be pointed out that a good tool also has solidity and strength. Clients seem to be aware of this when gauging their counsellor’s ability to support and hold them in their process. To fulfil these requirements, a counsellor needs to be solid and grounded in him or her self and in their own belief in how they work. Here, different theories and approaches to therapy can help the counsellor to develop a core inner strength from which to understand the therapeutic process, both of their clients and of themselves. It is when this core strength is combined with the malleability to ‘fit’ individual clients that counsellors become most useful.

This study can be seen to have many limitations: a small number of participants, a single counselling setting, and no control of variables such as counsellor’s approach. Against this, however, the participants in the study contributed a set of incredibly rich data, which have been explored through a deep and involving process of analysis. The results of the study do not claim to provide an exhaustive statement of all possible experiences that all potential ‘clients’ of all potential ‘counsellors’ may have. Instead, an attempt has been made to capture what participants revealed about the core dynamics of their experience of counselling, and structure these in a way that contributes to new understanding. The list of common requirements identified here may not all be necessary or may well be but part of a larger picture. However, those participants who experienced each of the dynamics more fully appear to have gained more from their counselling. Conversely, in the few cases where one or more of the requirements was not met at all, people reported a dissatisfaction with their counselling experience.

Perhaps more importantly though, this study has been an opportunity for clients of therapy to have a voice. No individual study can do justice to all that people have to say. However, it is hoped that this investigation has done justice to some of their stories. It is my feeling that, in what these clients have said, something fundamental has been touched on. In the words of one of the clients who participated in this study:

“[Counselling was] someone to sit there and let me say what I had to say. Because I began to realise that nobody was going to be able to collect my thoughts for me and tell me what I should be doing. I realise that just through talking, a lot

of what I already knew but didn't realise just came out. I think that's what did it for me. I was able to do that during counselling, and then when the counselling stopped, I was able to go away and still do it... I had been waiting for someone to teach me all the things I already knew" (I8P21)

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