



PT49 Enable the client in humanistic therapy to become aware of unconscious aspects of their experience

OVERVIEW

This standard is for those therapists who maintain a humanistic stance, but attend to the role of unconscious communication in the therapeutic encounter. It is about the use of countertransference phenomena to develop and explore hypotheses about feelings and emotions that the client may be trying to express.

This standard describes therapeutic practice adopted successfully in mental health and wellbeing interventions for adults, based on the philosophical tenets of the humanistic tradition and incorporating a range of approaches from a humanistic value base. (See reference in the additional information section on page 3.) To apply this standard, therapists also need to take account of the multiple problems and complex co-morbidities that individual clients may bring to therapy.

Users of this standard will need to ensure that they are receiving supervision and that their practice reflects up to date information and policies. This standard should be understood in the context of the Digest of National Occupational Standards for Psychological Therapies.

Version No 1

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

Relational processes in the immediate therapeutic relationship

1. the mechanism and nature of shared meanings co-constructed by therapist and client
2. how the therapeutic relationship reflects the relationship histories of both the client and the therapist
3. how the explicit and implicit meanings that shape the clients and therapists perceptions of their world may be experienced within and influence the therapeutic relationship
4. how the clients explicit, manifest communications may contain an implicit, latent

meaning

5. the ways in which aspects of past events can be re-experienced in the present
6. how the therapist may make use of their immediate emotional and embodied reactions to the client
7. the ways in which the therapists immediate responses and experiences within the therapeutic relationship can form a basis for communicating empathic understanding and informing exploration of the clients subjectivity

Principles of humanistic therapy

8. philosophy and principles that inform humanistic therapy
9. humanistic theories of therapeutic process
10. approaches to psychological therapy that have grown out of the humanistic psychology movement
11. experiential methods of learning
12. non-humanistic approaches that influence humanistic therapy

Conditions for therapeutic change

13. the rationale for responding empathically to the clients and being warm, open, non-judgmental, genuine and transparent
14. how to employ the specific methodology, key concepts and relevant components of the model being used
15. how to maintain therapeutic conditions
16. the psychological conditions that make change more likely

Mental health and wellbeing

17. the range and severity of mental health difficulties and their presentation
18. the factors associated with the emergence, development and maintenance of mental health difficulties
19. humanistic models of mental distress
20. the ways in which mental health difficulties can impact on personal and interpersonal functioning
21. models of a fully functioning individual

Human growth and development and the origins of psychological difficulties

22. models of change, health and wellbeing
23. the impact of conflicts within the individual
24. the impact of social context on psychological growth and development
25. the role that emotional experiencing has in an individuals awareness of how an action contributes to growth
26. the role of relationship in the development of self-experience
27. the mechanisms and effects of unconscious processes in the development of self-experience
28. the role of unconscious processes in difficulties in self-experience
29. how thinking, feeling and behaviour are determined by an individuals subjective reality
30. the impact on psychological development of empathic attunement and acceptance and the extent of its absence during the formative years
31. the mechanism and effects of internalisation of the values, beliefs and attitudes of

others

32. the development and benefits of the capacity to reflect on inner processes and experiences
33. the development of the capacity to balance inner and outer realities
34. the multiple perspectives from which human experience can be viewed

The actualising tendency

35. the role of actualisation in human growth and health
36. the ways in which unconscious processes can undermine, distort or block the actualising tendency
37. how the actualising tendency is expressed in the practice of humanistic therapy
38. the concept of symptoms as a signal for integrating experience and growth
39. the concept of symptoms as indicators of the actualisation process

PERFORMANCE CRITERIA

You must be able to do the following:

1. clarify the clients self-reported recurring emotional and relational patterns and themes in their life, historically and currently
2. facilitate the clients understanding of the significance of heightened emotion in current and previous experiences
3. discern and distinguish the clients and your own emotional processes
4. listen to and empathically communicate understanding of the clients emerging processes
5. allow the client to represent their experiences using words from their frame of reference
6. allow the client to use silence or avoid silence and explore the meaning and significance of silence with them
7. when relevant to the client, address your own and the clients avoidance of particular issues, concerns, emotions or underlying feelings
8. empathically understand what is communicated indirectly, symbolically and metaphorically
9. explore your countertransference responses to the client and what these might mean in the relationship
10. draw on your own and the clients embodied experiencing
11. empathically explore hypotheses about feelings and emotions that the client may be trying to express
12. remain with the unknown when this aids the clients process
13. uncover and explore your own unrecognised emotional responses to the client through supervision

ADDITIONAL INFORMATION

This National Occupational Standard was developed by Skills for Health.

This standard is derived from research reported in Roth A D, Hill A and Pilling S (2009) *The competences required to deliver effective Humanistic Psychological Therapies*. Centre for Outcomes Research & Effectiveness (CORE) University College London.

This standard has indicative links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

Dimension: HWB2 Assessment and care planning to meet people's health and wellbeing needs