An Abstract Configuration of the Epistemology of Potentiality Paradigm Therapy: A Qualitative Meta-Synthesis of Theoretical Texts

A thesis submitted to the University of Manchester for the degree of Doctor of Philosophy in the Faculty of Humanities

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The first step that I took in preparing myself to undertake what is in essence a piece of epistemological research was to divide the psychological therapies into two: the potentiality paradigm and the pathology paradigm. The former is based upon the potentiality model articulated by person-centred theorists like Dave Mearns and Brian Thorne, which is essentially a growth model, whilst the latter reflects a form of therapy that recognises people according to what may be considered ‘wrong with’ or ‘deficient about’ them, such as operates in the disciplines of medicine and clinical psychology.

The main focus of this piece of research was to determine the epistemology that is at work with what actually goes on in the practice of potentiality paradigm therapy. In order to achieve this, I set about identifying, reading, analysing and eventually coding the most epistemologically rich writings that I could find from mainstream authors on potentiality paradigm therapy from the professional and the academic literature.

It became clear from this analysis that the heart of what was actually going on in the practice of potentiality paradigm therapy as articulated in these theoretical writings could be coded into three main discourses: an experiential discourse, a relational discourse and a hermeneutic discourse, each of which I have considered to represent an epistemological discourse for the purposes of this piece of research.

My next question was to ask myself how these discourses set about articulating the potentiality paradigm with respect to the practice of the psychological therapies, and the answer came back that they articulated the potentiality paradigm best when they worked concertedly rather than discretely. Indeed, it soon became apparent that the human brain integrates and synthesises the data that it receives by way of these three central discourses, and so it seemed only appropriate that I should work towards expressing these findings by creating a qualitative meta-synthesis of these three discourses: the experiential, the relational and the hermeneutic, which is exactly what I did.

The epistemological mechanism by which these three discourses are integrated and synthesised needs to reflect the way in which the human brain integrates and synthesises the data that it receives, and the name given to this epistemological mechanism is dialectical constructivism. This is included along with the three epistemological discourses – the experiential, the relational and the hermeneutic – in the creative and interpretive synthesis in which this piece of research culminates, and is followed by an illustrative worked example showing how these discourses articulate the potentiality paradigm – concertedly – with respect to the practice of the psychological therapies.

One of the advantages of applying this meta-model to the way in which we look at potentiality paradigm therapy is that it may be used to free us up to practice in the more dialogical ways which have been becoming increasingly favoured by practitioners in recent times. With our view of potentiality paradigm therapy mediated by this meta-model, we may find it easier to traverse across what many practitioners have tended to view as theoretical boundaries. It could also be viewed as a move towards a more functional and less structural form of governance or regulation, as expressed by Mearns and Thorne.
The only portions of work referred to in this thesis that have already been submitted in support of an application for another degree or qualification of this or any other university or other institute of learning have been referenced as “Gilmore, 2008” and refer to a two-volume thesis entitled *The Role Played by Psychological Risk in the Ethical Practice of the Psychological Therapies* which was successfully submitted for the award of the degree of “Doctor of Counselling” from the then School of Education in the Faculty of Humanities at the University of Manchester in 2008 (Gilmore, 2008).
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In memoriam:

Rowena Kathryn Golton

26th February 1969 – 6th April 2014
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I should also like to thank Jan Watson who, until recently, was PA to the Chief Executive Officer of the British Association for Counselling and Psychotherapy (BACP). Somehow or other, Jan always managed to unearth a miscellany of documents and sundry other facts and dates, seemingly at the drop of a hat, relating to BACP. Absolutely no need to bother with an archivist when you have a Jan Watson on the case! Enjoy your retirement, Jan.

I should like to thank Jo Sansby and Steve Boettcher, colleagues who have listened tirelessly to my reports of this research and who, not content merely to listen – in itself, no small kindness – have chipped in with perceptive remarks and suggestions of their own.

Last but by no means least in the list of people who deserve my thanks are Professor Colin Feltham, who most kindly agreed to act as External Examiner to this thesis, and Dr. Tony Parnell, who, as Internal Examiner, hosted my viva voce examination and reconciled at times disparate views of this piece of research, whilst managing the assessment process with both good humour and good grace. Each of these qualities is of course equally facilitative to all participants in such a procedure.

Encouragement comes in many forms during the course of pursuing the lonely path that comprises doctoral research, and I owe each of these people a considerable debt of gratitude for the encouragement that I have been able to take from their active engagement with my endless musings about this piece of research. Doubtless each of them will have become nothing short of sick to death of hearing about it but, cognisant of what it has meant to me, were far too gracious ever to complain.
References occurring within quotations

As all of the data used in this thesis comprises extracts from the published literature, and because the professional and academic literature attaching to the cognate disciplines often contain references of their own, some sort of decision has had to be made as to whether or not to include such references where they occur in the textual extracts that I have quoted. The decision that I have taken is to excise all such references where they occur in the texts that I have quoted except where to do so would render the passage’s meaning obscure, such as where another author constitutes the subject or the object of the sentence, or where the original author has quoted another author and is referencing the quotation that they have used. Following this policy should make the quotations easier on the eye for those who wish to consult the thesis, as well as for those charged with examining it. Those references that I have left in and that do not feature in the references section at the end of the thesis are references to works that I have not necessarily read nor maybe even consulted.

[sic]

Some of the passages quoted in this thesis were written some time ago, when language was used rather differently from the way it is today. This becomes particularly evident in the matter of pronouns referring to gender. As the inclusion of [sic] after each such occurrence could tend to irritate the reader who has no need for repeated lessons in political correctness – especially when they occur multiple times within a fairly short paragraph – I have decided against the insertion of [sic] after each such instance for reasons similar to those cited above. I trust that nobody will use this decision to justify any assumption that I am in any way unsympathetic to the use of inclusive language or to the attitudes that flow there from. I have however retained their use to indicate when errors that I am replicating originated in the text from which I am quoting.
## GLOSSARY, including Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>BAC</td>
<td>British Association for Counselling</td>
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<tr>
<td>BACP</td>
<td>British Association for Counselling and Psychotherapy</td>
</tr>
<tr>
<td>CAQDAS</td>
<td>Computer Assisted Qualitative Data Analytic Software</td>
</tr>
<tr>
<td>CBT</td>
<td>Cognitive-Behavioural Therapy</td>
</tr>
<tr>
<td>CCT</td>
<td>Client-Centred Therapy</td>
</tr>
<tr>
<td>CT</td>
<td>Cognitive Therapy</td>
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<tr>
<td>DS</td>
<td>Dialectical System</td>
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<tr>
<td>EFT</td>
<td>Emotion-Focused Therapy</td>
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<tr>
<td>GP</td>
<td>General Practitioner</td>
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<tr>
<td>HEPs</td>
<td>Humanistic-Experiential Psychotherapies</td>
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<tr>
<td>HPC</td>
<td>Health Professions Council</td>
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<tr>
<td>IPN</td>
<td>Independent Practitioners’ Network</td>
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<tr>
<td>NHS</td>
<td>National Health Service</td>
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<tr>
<td>PCA</td>
<td>Person-Centred Approach</td>
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<tr>
<td>PCT</td>
<td>Person-Centred Therapy</td>
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<tr>
<td>PET</td>
<td>Process-Experiential Therapy</td>
</tr>
<tr>
<td>QCA</td>
<td>Qualitative Content Analysis</td>
</tr>
<tr>
<td>REBT</td>
<td>Rational-Emotive Behaviour Therapy</td>
</tr>
<tr>
<td>SF(B)T</td>
<td>Solution-Focused (Brief) Therapy</td>
</tr>
<tr>
<td>TCO</td>
<td>The Theory of Constructivist Operators</td>
</tr>
<tr>
<td>UK</td>
<td>The United Kingdom of Great Britain and Northern Ireland</td>
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<tr>
<td>UKCP</td>
<td>The United Kingdom Council for Psychotherapy</td>
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<tr>
<td>UKRCP</td>
<td>The United Kingdom Register of Counsellors and Psychotherapists</td>
</tr>
<tr>
<td>US(A)</td>
<td>The United States (of America)</td>
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I have been involved with the psychological therapies for some forty years in various cities throughout the United Kingdom (UK), including London, Birmingham and Manchester. Although for the last two decades I have been practising exclusively in private practice, before this I worked in many UK universities and institutions of further and higher education as Counsellor, Senior Counsellor, Head of Student Services, Lecturer and Senior Lecturer: the Universities of Aston, Kent, Leicester, Anglia Ruskin, Greenwich and Salford; at Havering College of Further and Higher Education and at Manchester College.

I hold the degrees of Bachelor of Arts [BA (Hons)] in Music from the University of Leeds, Master of Arts (MA) in Counselling and Psychotherapy from The Nottingham Trent University and Doctor of Counselling (DCouns) from the University of Manchester. I also hold a Postgraduate Diploma in Counselling in Educational Settings (PGDipCouns) from Aston University and a Certificate in Education (Further Education) (Cert Ed [FE]) awarded by the Council for National Academic Awards (CNAA).

I am a Fellow (FBACP) and a Senior Accredited Practitioner (MBACP [Snr Accred]) of the British Association for Counselling and Psychotherapy (BACP), have been a Registered Independent Practitioner of the United Kingdom Register of Counsellors and Psychotherapists (UKRCP) since the Register’s inception in 1996, and am currently a Registered Member of the BACP Register of Counsellors and Psychotherapists.

I have undertaken much trauma work over the years. I was commissioned by the West Pennine Area Health Authority to provide consultative support to the staff at the medical practice of the late Dr. Harold Shipman immediately upon his arrest on 7th September 1998. I conducted six weeks of work in the immediate aftermath of the Ladbroke Grove Incident (popularly referred to in the media as the Paddington Rail Crash) in October 1999, followed by international consultancy assignments in Java and Sumatra in November 1999, as well as helping to treat those with unresolved trauma following the al Qaeda bombing of the al-Hamra Compound on the outskirts of Riyadh in Saudi Arabia in May 2003.
1.0 Overview

In this paragraph, I propose first to give an account of my engagement with this piece of research which locates it within the narrative of my own professional development. Next, I propose to give an account of the background to the development of the psychotherapeutic professions in Great Britain. My next task is to offer an account of how my own personal and professional biases may have influenced my engagement with this research study, and of the steps that I have taken to ensure that, in so far as may be possible, this hasn’t happened outside of my awareness. Finally, I offer an account of the rationale for this piece of research.

1.1 The background to my engagement with this piece of research

Many years ago now when initially I took early retirement from my last full-time academic position, I undertook a Master’s degree in Counselling and Psychotherapy, as much to keep me feeling connected with the worlds both of academic work more generally, and of counselling and psychotherapy more particularly than for any other reason. I compiled a research dissertation about what I then referred to as the permissive versus the more prescriptive value bases of counselling and psychotherapy. When several years later I registered for the Professional Doctorate in Counselling at the University of Manchester, I elected to compile a thesis that investigated the role played by psychological risk in the ethical practice of the psychological therapies (Gilmore, 2008).
One of the findings to emerge from that thesis (Gilmore, 2008) is that a therapist’s attitude towards psychological risk – whether a risk-averse one, or a risk-aware one – arises in many ways from the type of therapy being practised: pathology paradigm therapy inculcates a risk-averse attitude towards psychological risk, whereby the practitioner’s strategies are designed to minimise the degrees of risk taken whenever possible, whereas potentiality paradigm therapy promotes a risk-aware attitude towards psychological risk, where risk is accepted as an essential prerequisite to psychologically meaningful change, often termed growth, and whereby one is therefore prepared, with the express agreement of one’s client(s), to take certain calculated risks if the benefits that might accrue would seem to justify to the psychotherapeutic duo, family or group the taking of such measured risks. Pathology paradigm therapy constitutes a form of therapy that recognises people according to what may be ‘wrong with’ or somehow ‘deficient about’ them, whereas potentiality paradigm therapy revolves around what essentially amounts to a growth model.

Just as growth occurs when we face up to the various challenges and vicissitudes thrown up by our daily lives, so too in psychological therapy growth requires us to help our clients to face up to the challenges that the prospect of change poses them in therapy. I was struck by the fact that all four of the expert witnesses with whom I conducted and recorded semi-structured research interviews during the course of that previous piece of research (Gilmore, 2008) asserted that psychological therapy that was devoid of psychological risk was unlikely to be particularly therapeutic: indeed, it was likened to the practitioner ‘going through the motions’ in order simply to be in a position to submit an invoice or to get paid for having done the work, despite the fact that the real work of therapy would almost certainly not even have been attempted, let alone achieved. In this sense it would represent fraudulent therapy rather than any ethically practised form of psychological therapy.

I have always been attracted to the bigger picture rather than to the minutiae of the psychological therapies, and always too towards the more abstract or philosophically oriented aspects of the profession; so too with this piece of research, in which I propose to identify the epistemology of potentiality paradigm therapy from the perspective of a practising counsellor, and to construct an abstract model to represent this epistemology. I shall have more to say about this in paragraph 1.4, below, in which I outline my rationale for having decided to conduct this piece of epistemological research.
1.2 The development of the psychotherapeutic professions in Britain

1.2.1 The introduction of counselling into the British educational system

From whence one may begin to trace the development of the psychotherapeutic professions depends in large measure about how far back in time one wishes to travel. Philosopher and psychologist Professor Emmy van Deurzen asserts (Gilmore, 2008, pp. 375-376) her conviction that much of our current psychotherapy constitutes a twenty-first century treatment of the considerations that were occupying the minds of the Greek and Roman philosophers in the days of Aristotle, et alia: how to live a good life.

The professions of medicine and the clergy have traditionally held some kind of brief for engaging with people in more confidential conversations where advice has traditionally been sought from upstanding and supposedly more wise pillars of the local community, but in more recent times the drift towards professionalization has seen the distinct professions of counselling and psychotherapy emerge in Britain, and it is to these professions along with counselling psychology to which I refer by the generic term ‘the psychological therapies.’

In the second half of the last century, counselling entered Britain as a transatlantic import through American visitors to some of our educational institutions. Charles H. ‘Pat’ Patterson (2000) spent a year working at what was then called the University of Aston in Birmingham, Gilbert Moore worked with staff at the University of Reading (Daws, 1967, 1968) and Professors Donald E. Super (1950, 1951, 1953, 1956) and C. Gilbert Wrenn (1957) worked at Keele University’s Appointments and Counselling Service (Newsome, Thorne and Wyld, 1973; Daws, 1967, 1968). Peter P. Daws (1967, 1968) was one of the early pioneers who helped introduce counselling into British schools in the 1960s, where it often surfaced in the context of vocational guidance (Hopson and Hayes, 1968). Indeed, three of Britain’s earliest luminaries in the counselling firmament were Audrey Newsome, Brian Thorne and Keith Wyld, who staffed the counselling facility at the University of Keele’s Appointments and Counselling Service (Newsome, Thorne and Wyld, 1973), where counselling and vocational guidance were catered for within the same unit.
The social casework approach also contributed to the development of counselling in Britain through people like Hungarian mathematician Paul Halmos (1965) and Lady Ethel Venables (1971), who was trained by what was then called the National Marriage Guidance Council, but which has since then extended its brief to include all relationship counselling, and has now changed its name accordingly to Relate. Indeed, the opening chapter of her book entitled simply Counselling (Venables, 1971) is entitled The place of the counsellor in the pattern of social work. In the 1960s and 1970s, it was not uncommon for those teachers and academics who had discovered a sense of vocation in what might then have been termed pastoral guidance to be found assuming increasing levels of responsibility for offering their guidance to those of their own and their colleagues’ students who seemed to need it on a quasi-informal basis. As training courses began to become established in some of Britain’s universities, they would often find themselves seconded on to a year’s training in order to gain some form of qualification that would enable them to be referred to as a counsellor in a more formal capacity within their own institution, and so it was that the student counselling movement came to be born.

1.2.2 The commercialisation of counselling in Britain

Another transatlantic import into Britain was the Employee Assistance Programme (EAP), whereby larger, initially multinational companies would purchase an EAP as part of a benefits package for its employees. The early converts to this EAP provision were the multinational oil companies who, because of the safety critical nature of their work, were particularly anxious to wheedle out those of their employees who had any form of problematic relationship with alcohol or narcotics. A little later on in the 1980s, the multinational finance houses followed the oil companies on to the EAP providers’ books, and from there the trend has spread over the last three decades such that many medium- and large-scale companies use at least one EAP provider, with larger companies whose workforce is spread across different divisions sometimes employing two or three such providers. Although sold to their employees as a benefits package that they would find useful, the real benefit that the employer is purchasing is a team of practitioners and other professionals who would be able to get their employees patched up and back at their desks – or wherever else their work took them – as quickly as possible. Nevertheless, there were real benefits available to the employees too, including telephonic and face-to-face counselling at no direct cost to themselves.
Another benefit to have accrued from the EAP sector is that it has helped to introduce the role of counselling to a British population that would otherwise probably not have considered consulting a counsellor or a psychotherapist. In more recent times, the National Health Service (NHS) has employed therapists, initially often as specialist nurse therapists, although they are now often employed to work alongside clinical psychologists and Cognitive-Behaviour Therapy (CBT) practitioners.

In addition to the EAP sector, there is also the wider managed care sector which includes many companies, including EAP providers, who supply therapy – typically of the more cognitively-derived nature – that is funded through the insurance industry. The end users of such services may be people who, for example, have been traumatised through their involvement in road traffic accidents or armed raids. EAP providers also send practitioners out on to companies premises to make similar provision available in the immediate aftermath of major incidents where people may have been exposed to traumatising experiences leading initially to Acute Stress Disorder (ASD), which may or may not go on to develop into Post-Traumatic Stress Disorder (PTSD) one month later.

Some of the larger-scale employers may also themselves employ counsellors directly to provide a dedicated service to their workforce, whilst many counsellors are attached to the surgeries of General Practitioners (GPs), under whose auspices they see some of their NHS patients.

1.2.3 The journey towards the professionalization of the psychological therapies

The counselling movement that I joined in the 1970s was a very different profession to the one that now constitutes the psychological therapies. In those days, one could attend various conferences each year, and could reasonably expect to meet up with the same friends year after year. This was partly due to the fact that ours was then a very much smaller network than it is now, and because business as such was transacted much more informally then, with the emphasis on such gatherings being on the practitioners’ own personal and professional development. Delegates used to bring their guitars with them to conferences, and yes, we did gather round, sitting on the floor, and sang various kinds of songs together. (We often did other things together as well, but this fell under the remit of attending to our personal rather than to our professional development!) I clearly recall
taking a break from attending such conferences over the late 1980s and the early 1990s, and that upon resuming my attendance, to my great chagrin, none of my old friends were in attendance; nor was there any sign of a guitar anywhere.

Perhaps one of the earliest indications that our networks were on the move came about when our complaints procedure, courses recognition scheme and our various accreditation schemes came into being, which they did over a period of many years, as follows: a Code of Ethics and Practice for Counsellors (British Association for Counselling and Psychotherapy: 1984, 1990 1992, 1993), a Code of Ethics and Practice for Trainers (British Association for Counselling and Psychotherapy, 1985a), a Complaints Procedure (British Association for Counselling and Psychotherapy, 1986, 1992, 1994), a Code of Ethics and Practice for the Supervision of Counsellors (British Association for Counselling and Psychotherapy, 1988a), a scheme for the Recognition of Counsellor Training Courses (British Association for Counselling and Psychotherapy, 1988b), a Code of Ethics and Practice for Counselling Skills (British Association for Counselling and Psychotherapy, 1989), and a Code of Ethics and Practice for Trainers in Counselling and Counselling Skills (British Association for Counselling and Psychotherapy, 1995).

The next landmark was when the British Association for Counselling (BAC) formally changed its name to the British Association for Counselling and Psychotherapy (BACP) which it did at its Annual General Meeting on Thursday, 7th September, 2000. This change came about because for many years leading up to this point in time, many BAC members were practising psychotherapists who also belonged to the United Kingdom Council for Psychotherapy (UKCP). Many of these practitioners were of the opinion that BAC had for some little time by then been representing their interests more effectively than had UKCP, which was effectively merely an organisation to which the psychotherapy training institutes belonged. Consequently, as this represented a federal organisation rather than an individual membership organisation, many of their members thought that they could exert more influence personally in an organisation like BAC(P) which was then still an individual member organisation, although it has since changed its configuration to that of a professional association which also enjoys registered charity status.

The next thing that seemed naturally to follow on from this enhanced union between the psychotherapists and the counsellors was that the terms counselling and psychotherapy (along with those of counsellor and psychotherapist) would come to be regarded as being
unable to be distinguished in any meaningful manner. And so it was that, from around this
time, BACP officially adopted the position that there was neither any meaningful, nor
therefore any worthwhile distinction to be had between these terms, and it still maintains
this position to this day. It is therefore to these two professions of counselling and
psychotherapy that I make reference by invoking the collective term the psychological
therapies, as well as to the work of counselling psychologists. As many clinical
psychologists also practice therapy as well, including CBT, I propose to consider them to
be practitioners of the psychological therapies as well at such times. It is for this reason
that I tend to prefer to employ the collective term therapist or therapists generically as well
as the collective term the psychological therapies to make reference to each of these
worthwhile professions and to their respective endeavours.

The next significant step along this journey towards the professionalization of the
psychological therapies was our initial adoption in 2001 (and of a revised edition in 2002)
of a unified ethical framework document, entitled the Ethical Framework for Good
Practice in Counselling and Psychotherapy (British Association for Counselling and
this document and its several predecessors is that the unified code covered all aspects of
endeavour engaged in by BACP’s membership, along with statements of general principles
such as “fidelity (trustworthiness), autonomy, beneficence, non-maleficence, justice and
self-respect” although the Professional Conduct Procedure has been published separately
since January 2013. In this important respect, our ethical framework was from here on
expressed in terms similar to many of the other practitioner professions. As BACP’s
former Complaints Procedure had been subsumed under a new Professional Conduct
Procedure, the terms of this procedure were also published along with the Ethical
Framework document. Although the Ethical Framework documents also make reference to
research, BACP first published a separate document in 2004 dedicated specifically to those
engaged in research into counselling and psychotherapy entitled Ethical Guidelines for
Researching Counselling and Psychotherapy (British Association for Counselling and
Psychotherapy, 2004), to whose terms and advice I have obviously adhered as I have
pursued this piece of research. And finally, to complete this tranche of publications, a
revised set of the assessment criteria for use in BACP’s Counsellor/Psychotherapist
Accreditation Scheme, entitled Counsellor/Psychotherapist Accreditation Scheme:
Standard for Accreditation, was published in September, 2012 (British Association for
Counselling and Psychotherapy, 2012).
If it was in the 1990s that the idea of telephone counselling began to be practised as an acceptable and professional exercise of the role of psychological therapist – initially by the EAP sector, but subsequently by those in private practice – it was in the 2000s that online therapy really took off in Britain, with the Association for Counselling and Therapy Online (ACTO) being formed in October 2006 (http://www.acto-uk.org/index.htm).

There had for some time been some disquiet within the profession of counselling about the divergence of standards of many of our counselling courses, and in particular about what their various levels of certification signified. An initiative designed to help better coordinate such standards was the introduction of National Occupational Standards (NOS) for four modalities of the psychological therapies in 2008/2009 by Skills for Health – the Sector Skills Council for all health employers (http://www.skillsforhealth.org.uk/).

The next topic to be considered along the journey towards the professionalization of the psychological therapies was the subject of regulation, for this has been something of a hot potato, certainly within BACP, as it became quite a divisive issue. Whilst many BACP members were keenly awaiting the arrival of the statutory regulation of the professions of counselling and psychotherapy through the Health Professions Council (HPC) – perhaps because they had imagined that this may give them parity with the psychological professions – there was a smaller, but certainly not insignificant element amongst the psychological therapy professions whose adherents were quite opposed to statutory regulation, ostensibly on the grounds that they feared that it would stifle creativity with the profession (Kearney, 1996, pp. 99-100). Perhaps the most scholarly work to have been written on this vexed subject is by Mowbray (1995), which contains many well thought through arguments against the statutory regulation of the psychological therapies. The Independent Practitioners’ Network (IPN) (http://i-p-n.org/) was the name given to the organization that seemed to lead the opposition to this regulatory initiative. Their website describes them as follows:

Founded in 1995, the Independent Practitioners Network is a tried and tested national network of practitioners of equal status and in linked peer groups rather than a hierarchical organisation.

We welcome practitioners who feel a need for a form of civic accountability* sustained and co-created with peers in ways that matches your ethical commitment to client welfare.
*Civic accountability* can affirm practitioner/client responsibility more accurately than 'regulation'  

(Available at: [http://i-p-n.org/](http://i-p-n.org/) and accessed on 21st July 2013)

This organisation also produces a journal entitled *Ipnosis: A journal for the Independent Practitioners Network.*

However, the hot potato has now cooled somewhat, and the threat or promise (depending upon the position that one adopts) of statutory regulation has, at least for the time being, evaporated since the replacement of the last Labour government with a Conservative-led coalition government, and subsequently with a wholly conservative administration that has expressed its preference for voluntary regulation rather than for any form of regulation by statute. Perhaps as a consequence of this shift in Britain’s political landscape, the IPN’s online journal, eIpnosis, states the following on its website:

> eIpnosis has shifted emphasis from resisting state regulation of the psychological therapies to championing new and existing ways of approaching 'human condition work' and 'civic accountability' post state regulation.

(Available at: [http://ipnosis.postle.net/](http://ipnosis.postle.net/) and accessed on 21st July 2013)

And although the above-quoted sentence was still being displayed on 1st January 2015, the following sentence had by then been added:

> As the Regulation of the psychological therapies in the UK moves towards an endgame, eIpnosis attention has turned from resisting the Health Professions Council's [HPC] codification of the ineffable strands of working with the human condition, to re-stating, exploring and developing what we value and trust.

(Available at: [http://ipnosis.postle.net/](http://ipnosis.postle.net/) and accessed on 1st January 2015)

To fulfil BACP’s promise to throw its weight behind the move towards voluntary regulation of the profession(s), the BACP Register of Counsellors and Psychotherapists ([http://www.bacpregister.org.uk/](http://www.bacpregister.org.uk/)) became the first register of psychological therapists to be accredited by the Professional Standards Authority for Health and Social Care in February 2013. Only time will tell how much of an impact this register will have on the public’s faith in psychological therapists generally, and in BACP’s registrants in particular.
Equally, only time will tell if there is any return of interest in regulating by statute the practice of the psychological therapies in Great Britain.

The route march to professionalization continued with the introduction of benchmarks for Counselling and Psychotherapy by the Quality Assurance Agency (QAA) (http://www.qaa.ac.uk/Pages/default.aspx) in 2013.

The last initiative which I heard emanating from within BACP was when Laurie Clarke, then its Chief Executive Officer, said that he was trying to persuade the Privy Council to create the titles of Chartered Counsellor and Chartered Psychotherapist. As I tried to advise Laurie at the time, however, the difference between clinical psychologists and, say, counsellors is that the status of Chartered Psychologist (CPsychol) represents the (doctoral level) entry point for clinical psychologists, whereas one may take either of two positions with respect to counsellors: first, that their career entry point may be considered to be the award of a Diploma in Higher Education (DipHE), which is the equivalent of the end of the second year of an undergraduate degree, and which is the academic standard usually agreed to have been reached at the end of the two-year part-time Diploma in Counselling; or that, given that there is currently no protection of title for counsellors or psychotherapists, neither can there be considered in any meaningful sense to be any career entry point for them, as anybody is free to use either of these titles irrespective of their credentials.

One can certainly distinguish between the current obsession with professionalism within the psychological therapies and the position adopted by BAC (as then it was) as evinced by the position statement drawn up by BAC in July 1985, and which went by the rather grandiose title of Counselling: Definition of Terms in use with expansion and rationale (BACP, 1985b). The beginning of this document’s second sentence reads as follows: “BAC has no proprietory [sic] rights to the use of the word or the practice of counselling” (BACP, 1985b). I don’t think that BACP would articulate those sentiments in quite those terms today, although I suppose that it does serve as an indication of just how far as a profession we have come since the mid-1980s.

Perhaps an even more striking example from this 1985 position statement of something that I don’t think that BACP would be happy to articulate these days is the statement that “[T]here are people, who may or may not be trained, who offer private counselling services..."
at a fee” (BACP, 1985b). In common with most professions these days, BACP expects those who practise the psychological therapies to be adequately trained, experienced and supervised; furthermore, if they are in private practice, they would also expect them to hold professional liability insurance, and preferably to be BACP accredited as well.

Whether each and every practitioner considers each of these more contemporary expectations to represent an improvement over earlier periods in psychotherapeutic history is a moot point, for our professions have usually attracted people of divergent viewpoints on such matters, as was reflected by the debate about statutory regulation, for example; nonetheless, the official line as expressed by BACP and UKCP these days is for a professional approach to be adopted to the practice of the psychological therapies.

1.3 Potential biases that I need phenomenologically to bracket

1.3.0 Introduction to phenomenological bracketing

The practice of phenomenology has an honourable tradition of bracketing (Giorgi, 1992, pp. 121-122; Laverty, 2003, pp. 21-25) which is designed to enable a researcher, for example, to be able to study a subjective phenomenon unencumbered in so far as may be possible by their own pre-existing prejudices.

There follows below an account of the theory behind bracketing as set out by Aanstoos.

In order to attend to thinking, or any phenomenon, as it is lived, it is first necessary to “take what is experienced just as it gives itself in any instance, and thus begin where we must begin” (Husserl, 1977/1925, p. 42). In other words, to understand the subject’s world, one must first arrive at it by a suspension, or bracketing, of all presumptive constructs about it. Such bracketing “slackens the intentional threads which attach us to the world and thus brings them to our notice” (Merleau-Ponty, 1962/1945, p. xiii). In that way, the naturalistic bias which conceives the world as extrinsic and simply there as a thing in itself is overcome, and the world as intended, or meant, is allowed to come into view.

By this bracketing operation, a phenomenological method aims to achieve a direct contact with the world as lived. This reduction does not result in the disinterest of
the researcher but rather in the suspension of all narrowly confining interests preceding attention to the phenomenon, in order to become fully interested in the phenomenon itself. By so deliberately avoiding concentrating attention on any particular predetermined aspect, the researcher is able to escape the danger of finding only what one expects to see. Instead, one adopts an attitude of “open-ended presence to the phenomenon that is unfolding” (Giorgi, 1976, p. 313). Giorgi (1975b) identified this first step as “initial familiarizing” and demonstrates concretely how its achievement is brought about by reading the transcript as a whole, attuned not merely to the linguistic content, but to the intentional, or lived experience.

(Aanstoos, 1985, pp. 90-91)

But of course, in order to be in a position to bracket one’s own relationship with the phenomenon under investigation, one must first ensure that one knows just what that relationship is. The use to which this skill may constructively be put with respect to the conduct of this piece of research is for the researcher to make himself as aware as may be possible of those prejudices which he brings to the research in order that he may, by bracketing, set them to one side and give as clear a reading of the data as may ultimately prove possible. Whilst this would generally be considered to constitute best practice in most forms of research that rely upon qualitative research methods, I think that the issue of personal biases is even more crucial in a piece of research which, like this one, relies at least partially upon something of a heuristic steer, such as when considering from whence to look for some of one’s data, for example.

Whilst accepting that this research is being conducted according to the traditions of the constructivist paradigm rather than the positivist or the post-positivist paradigms, one could argue that, in a paradigm where there is so little hard data with which to anchor one’s thinking, there is always going to be a need for a clarity of thought that is articulated by a researcher who knows in what s/he already believes and in what s/he does not so believe. Whilst methodology will be fully addressed below in chapter three, suffice it to say that, for now, all I am interested in achieving here is to acknowledge those of my prejudices that directly relate to this piece of research, and to communicate them to the reader as honestly and as openly as I may.
1.3.1 Counselling, psychotherapy or counselling psychology?

I take a pragmatic approach to categorising my own clinical practice. As I do not possess a degree or its equivalent in the academic discipline of psychology, I do not call myself either a psychologist or a counselling psychologist. I tend most often to refer to myself as a counsellor, because it was in counselling in which I originally trained, and also because I find that any word that begins with the prefix *psych* can often be regarded as something of a non-user friendly term, at least potentially. Therefore, rather than put off clients before they have even contracted to work with me, I customarily refer to myself as a counsellor, although I will not object if others occasionally refer to me either as a therapist or as a psychological therapist, as in practice I agree with the position adopted by BACP with respect to its use of the terms *counsellor* and *psychotherapist*: that there is often little by way of any meaningful distinction between the use to which these terms are often put; so too with the term *psychological therapist*, although I am always careful never to use terms to which my credentials do not entitle me, which means that I would never describe myself either as a psychologist or as a counselling psychologist.

1.3.2 So what sort of therapy do I practise, then?

Having been involved with the psychological therapies now for some considerable time, including working as a therapist in one setting or another, I feel obliged to concede that my approach would in all probability by now be regarded as integrative. I was initially trained on a course that regarded itself, if nominally, as a person-centred training course, but have also trained cognitively, and have been expanding my horizons ever since, in the belief that the more approaches with which I am familiar, the more I may potentially have to offer those clients who I have the distinction to serve as counsellor or therapist.

In spite of having trained in some of the more cognitively-derived disciplines of the psychological therapies, and indeed despite having earned a good living from having practised approaches such as Solution-Focused (Brief) Therapy (SF(B)T) and Rational-Emotive Behaviour Therapy (REBT), which I studied with Albert Ellis at his Institute in New York in the 1980s, I have in recent years been finding it more difficult to agree with the cognitivists about the primacy of cognitions over behaviour and emoting. Instead, based on my long years of study and clinical practice, I have come to the view that human
beings have a roughly equal propensity to think, behave and emote, and that as practitioners of the psychological therapies, we need to be familiar with the roles of each.

Whilst cognitions may offer us a useful *entrée* into how people may change their responses to certain situations, they are not always deserving of primacy in our consideration of the psychological firmament, particularly as one cannot replace an emotion with a thought; an emotion may only be replaced with another emotion. It is my belief that affect fulfils a much more primitive role in the experiencing of our lived lives, whereas cognitions tend to represent a level of psychological functioning which we often invoke *post propter hoc* to provide a rationale for our responses. This becomes quite discernible when one tries to practice some of the more cognitively-derived approaches to the psychological therapies. Despite having done one’s best to train one’s clients in ‘how to think properly’ in the psychoeducational phase of one of these more cognitively-derived approaches to therapy, all too often clients still maintain that, whilst acknowledging the theoretical rectitude of the new way of thinking that I will have taught them, this knowledge about this new way of thinking is not sufficient to enable them thereby to disown their pre-existing emotional responses. Of course, many of the various cognitive schools of therapy will maintain that this recalcitrance towards change is due to the fact that our hapless client has not as yet absorbed the new ways of thinking to a sufficient depth to enable them to lend anything more than their mere intellectual assent to them. In order to enable them to change their emotional responses, they will need to learn how to *believe* in the new thinking that they will have been rehearsing, which requires further practice in order for the new way(s) of thinking to percolate down to an altogether deeper level than mere intellectual assent. Such, for example, was Ellis’s way of accounting for this resistance when I was working with him at his Institute in New York City in the 1980s. Furthermore, others might claim that I have simply not become as effective a practitioner of the cognitively-derived approaches to the practice of the psychological therapies as I might have.

Personally, I believe that the distinction here is not so much a *quantitative* one, but more of a *qualitative* one (Gilmore, 1986): not a matter of the *degree* of new learning, but more a matter of focussing on how we attach meaning to our experiencing of our lived lives.
1.3.3 Potentiality paradigm therapy or pathology paradigm therapy?

Perhaps we should first consider the various possible meanings of the term *potentiality* before establishing the one that I intend to impart when using this term. When in the very early stages of planning this research study I conducted a literature search using the term *potentiality*, the greatest number of responses that I received to this search emanated from cardiac surgeons which, whilst being interesting, had little if any relevance to this piece of research. Having asked my colleagues past and present, and those colleagues having asked their colleagues, *et alia*, the following e-mail that I received from Dave Mearns (2009) represents the closest that I have come in finding any answer to this question of derivation:

> The question you raise drew a smile from me. I have been using these terms [*potentiality and deficiency models – Ed*] for at least 30 years. Indeed, I devoted a large piece of a chapter entitled 'Is therapy losing its humanity' in Mearns & Thorne (2000), PERSON-CENTRED THERAPY TODAY, London: Sage to a comparison of the models in relation to therapy.

> But I first came across the models many years previously when I was researching social education in schools (1978-82) in the government funded 'Scottish Social Education Project'. The dichotomy was very useful in documenting the developmental as against the social control agendas which different people might have for social education.

> When I was doing the 2000 book, I realised that I should reference the original source for the models. I searched as you have been doing and came up with nothing. I also asked my former education research colleague, Prof. John MacBeath, now of Cambridge. He said that the dichotomy had been around for a long time in the field of education.....but even after he searched those databases he could not find the source.

> One thing that is clear is that this is a fundamental philosophical/political dichotomy which can be creatively applied to many contexts to evaluate their, sometimes covert, function. I would love to find the source - let me know if you have success!

> (Dave Mearns, personal communication, 2009 – capitalisation features in the text of Mearns’ original e-mail)

To use Dave Mearns’ own term, the only fairly dubious sense of “success” (Mears, 2009) to which I may lay claim has come from assuming that the term *potentiality* may first have come to notice on this side of the Atlantic from the human growth and potential movement which first flowered in the United States of America in the 1960s (see subparagraph 2.1.2 below).
If we take a look at the passage (Mearns and Thorne, 2000, p. 33; also reproduced in Mearns, 2003, p. 63) to which Mearns is referring in the above cited quotation from his e-mail to me, we will see the following extract:

The question of whether we focus on the potentialities or the deficiencies of the human being is an age-old philosophical dialectic. To explain the language further, within education a deficiency model perspective is that the learner’s basic state is one of ‘deficit’ and that we must ‘fill her up’ with everything she will need. The potentiality model perspective is that, far from being ‘deficient’, the learner has a huge array of potentialities manifested in embryonic skills and talents. Our educative task within this model is to create the environment where she can exercise these embryonic skills and develop her potentialities.

(Mearns and Thorne, 2000, p. 33; Mearns, 2003, p. 63)

The dichotomy that Mearns and Thorne are outlining in this passage is essentially one between the deficiency model’s outlook, which recognises people according to what is ‘wrong with’ or somehow ‘deficient about’ them, as opposed to the potentiality model’s outlook, which adopts the view that, given sufficient opportunity for the individual to grow and to develop, they will be able to live healthy and well-adjusted lives after they have developed their ‘potentialities’ into ‘actualities.’ If we were to take the view that the deficiency model assumes that people have things wrong with them, then those practitioners practising under such a regime would need somehow to correct those wrongs, whereas those practitioners practising under the auspices of the potentiality model would seek simply to offer conditions such that individuals would be enabled to grow and develop in a fairly natural manner which, in so doing, would also serve to enable them to find their own ways of addressing the issues previously thrown up and recognised by the deficiency model as inadequacies. It is this requirement to offer optimum conditions for growth that accounts for potentiality model practitioners offering fairly standard growth-enhancing conditions as representing their approach to the practice of the psychological therapies, such as the core conditions in person-centred therapy, after Rogers (1957, 1959, 1961) and Mearns and Thorne (2000, 2007). It is for just this reason that the potentiality model and potentiality paradigm therapy constitute what is essentially a growth model, thereby rendering such approaches to the practice of the psychological therapies consonant with the way(s) in which human beings grow and develop throughout the other dimensions of their lives more generally.
Irrespective of whether or not it gave birth to our use of the term potentiality some little time ago now, the human growth and potential movement itself has precious little to do with the way in which I am using the term potentiality in this piece of research. I have expanded the potentiality model that Mearns and Thorne (2000, p. 33; Mearns, 2003, p. 63) have written about (see subparagraph 2.1.2, below) into the potentiality paradigm which, with respect to the practice of the psychological therapies, I am understanding to include those psychotherapeutic theories outlined in paragraph 2.2 (below) and which may be broadly considered to be indicated by the use of the term the humanistic and experiential therapies (HEPs). In this piece of research, I have characterised potentiality paradigm therapy as constituting an engagement with three epistemological discourses: an experiential discourse, a relational discourse and a hermeneutic discourse, with potentiality paradigm therapy’s epistemological mechanism being known as dialectical constructivism.

Having now made clear my intentions in using the term potentiality paradigm therapy when I am referring to the understanding and the practice of psychological therapy within the context of this piece of research, I must express my own personal and professional preference for engaging in potentiality paradigm therapy rather than in pathology paradigm therapy. These two paradigms will be fully documented in the following second chapter where I shall be locating this piece of research by reference to the established literature. For now, let me just say that, in spite of having made a perfectly good living out of practising pathology paradigm therapy over the years, I personally consider it restricting insomuch as, at its worst, it amounts to very little more than a purely training model of delivery punctuated by psychoeducational episodes. Granted that it will likely be delivered better by a therapist who has been trained in the delivery of various types of therapy than it would by a trainer without such a psychotherapeutic training, but pathology paradigm therapy tends to sideline the client’s emotional domain, and lacks work at the deeper experiential level, along with its related domains. Potentiality paradigm therapy requires an engagement with experiential learning and also with the relational and the hermeneutic discourses, but I shall for now confine myself to owning this prejudice, and will have more to say about this topic in the following chapter.

The other question to which the reader deserves an answer is whether my preference is for functional or structural forms of governance and regulation. This question is addressed most fully in the following paragraph, on to which we shall now move directly.
1.4 An outline of the rationale for undertaking this research study

Whether oral or written, the prevailing discourse of the psychological therapies tends to comprise the old triumvirate of behaviour, cognitions and emotions. Whilst I do not intend to suggest that these discourses are not significant ones for the psychological therapist, by no manner of means do they represent the whole story. Indeed, for the purposes of this piece of research, I am proposing to adopt the position that, whilst it is these three areas of human functioning that often comprise the focus of many forms of the psychological therapies, they nevertheless represent aspects of human functioning that are changed during and hopefully following successful engagement with one or more of the psychological therapies.

But – and here is where I may disagree with some of my colleagues who practise the psychological therapies – I do not believe that it is out of our three old friends – behaviour, cognitions and emotions – that change is brought about or constructed. Rather, I believe that there are three other discourses whose examination allows for client change or growth, and these three discourses are an **experiential discourse**, a **relational discourse** and a **hermeneutic discourse**.

The fourth chapter of this thesis is devoted to an exposition of the data that I have found in the academic and professional literature confirming the existence of these three discourses, and my coding and analysis of this data in terms of these epistemological discourses outlines the nature of the functions that these discourses play in the practice and the understanding of potentiality paradigm therapy. The remainder of chapter four is devoted to examining how these three discourses articulate the potentiality paradigm with respect to the practice of the psychological therapies: do they articulate this paradigm most eloquently when they work discretely, or when they work together in a more integrated way? In fact, an examination of the literature tells us that it would appear that they work best together when they are synthesised by the human brain, and the term given to the model that describes this is **dialectical constructivism**, and it is this that constitutes the epistemological mechanism that synthesises the data that our brains receive from the three epistemological discourses: the experiential, the relational and the hermeneutic discourses.
Chapter five opens with an interpretive synthesis of these discourses along with the epistemological mechanism – dialectical constructivism – in which the therapeutic relationship is likened to a methodological laboratory through which the therapist assays different psychotherapeutic strategies designed to help the client to achieve their goals.

In addition to commending a different trio of discourses to the attention of potentiality paradigm therapists, the meta-model that has been fashioned out of them should also assist therapists to work more fluently and creatively across theoretic boundaries that may at times have served to constrain rather than to have liberated therapists in the pursuit of their clients’ goals.

It is my opinion that for far too long now we have continued to describe and almost come to define the psychological therapies according to the theoretical foundations of each species; certainly individual therapists and groups of therapists have come to be identified and recognised according to their theoretical allegiances. One problem with this view of therapy includes the following reservation of Beutler, Brooker and Peerson’s:

> The tendency of therapists to filter perceptions of the patient through a rigid lens of theoretical views clouded their ability to accurately perceive and relate to the patient.

(Beutler, Booker and Peerson, 1998, pp. 174-175)

Another reason why this issue has become deeply problematic for the clientele that those of us who work within the professions of the psychological therapies seek to serve is because when practitioners first train, they tend to pick a brand of psychological therapy with which they feel comfortable, or else with which they feel themselves to be in broad agreement. Of course, these choices can change over the course of practitioners’ professional development, but the point remains that most practitioners of the psychological therapies offer the form of therapy that is their ‘chosen brand’ and then they offer this form of therapy to the vast majority of their clients, irrespective of those clients’ personalities, needs or presenting concerns. What this ends up constituting is, in effect, a form of therapist-centred therapy, rather than any form of therapy that is genuinely centred on the legitimate needs of its clientele.
Whilst the concepts of functional and structural phenomena exist in many different forms in various disciplines – such as in management theory (Morgeson and Hofmann, 1999) for example – our interest in these constructs in the context of the present piece of research is best outlined by Mearns and Thorne, (2000, p. 36) who refer to them as forms of governance and/or regulation. In brief, they describe how functional forms of governance are satisfied merely to stipulate those areas of practice that need to be regulated, whereas structural forms of governance are not satisfied until they have additionally stipulated the mechanisms by which these key areas of practice are to be regulated. Thus, functional forms of governance may be said to be permissive, in that they do not prescribe the mechanisms through which such governance is to be achieved, whereas structural forms of governance may be said to constitute a more prescriptive regime under which to practice precisely because they do prescribe the proposed mechanisms of governance.

If the purpose of psychotherapeutic theory and meta-models is to help the participants of the psychological therapies to make sense of client material, then this self-evidently constitutes the hermeneutic discourse. Therefore, I have adopted the view that, whilst the sort of meta-model which has arisen out of the synthesis with which this piece of research culminates constitutes a functional form of our hermeneutic discourse, the more conventional and detailed forms of psychotherapeutic theory constitute the structural form of the hermeneutic discourse. To this extent, another conceptualisation of this piece of research is that it may be considered as constituting a more functional way of looking at and hopefully of understanding what actually goes on in potentiality paradigm therapy that accounts for the client change mechanism seen to be so essential by people such as Kuehlwein and Power and Brewin.

[C]lients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts.

(Kuehlwein, 1996, pp. 499-500)

[T]herapeutic change, in any form of therapy, requires a transformation of meaning to occur.

(Power and Brewin, 1997b, p. xi)
It is my contention that such a functional view of our work with our clients frees us from having to work according to the precepts of any one psychotherapeutic theory, and in so doing provides a theoretical basis that is more consonant with the recent trend towards more dialectical ways of working (Elliott, Watson, Goldman and Greenberg, 2004, pp. 36-37; Greenberg and Pascual-Leone, 2001, p. 179; Greenberg, Rice and Elliott, 1993, pp. 56-57 and pp. 57-58; Greenberg and Van Balen, 1998, p. 43, pp. 44-45, p. 48 and p. 52; Watson and Greenberg, 1996, pp. 271-272 and p. 253). The purpose or the pay-off from this form of examination of the discourses that are engaged with during the conduct of these forms of therapy should be to help us the better to inform ourselves as to the nature of those forms of dialogues into which we need to enter with our clients.
Chapter Two: Literature Review

2.0 Introduction to the terms and scope of this piece of research

My intention in what is customarily a literature review chapter is to locate this piece of research within the wider pantheon of research generally, and in terms of research into the psychological therapies more particularly.

There seems to be much confusion attaching to models, theories and paradigms, with some writers and, yes, even some academics appearing to use these terms almost at will, as though they were somehow interchangeable. There follows an example taken from a footnote in a book that I just happened to be reading today:

2“Paradigm,” or model, refers to the theoretical models used in these theories, regardless of whether they use the words “repression” and “content” or not.

(Gendlin, 1964, p. 102, footnote 2; 1970b, p. 131, footnote 2 – the emphasis features in both of Gendlin’s original texts)

The unfortunate Gendlin has managed to bag himself a full house here, citing models, theories and paradigms as though their usage was forever interchangeable – and this is without even stopping to question what he may have meant by citing “theoretical models.”

For the sake of clarity, and in the hope of overcoming this sort of uneducated ambiguity that has seemed so fashionable for so long now, I wish to make it clear that I am adopting a hierarchical construction of models, theories and paradigms as recommended and set out by theorists such as L’Abate (2009, 2012) and Loughlin and Alexander (2012) in the following fashion: where paradigms are the overarching concept that express ontology, epistemology and methodology; where theories are the next most significant construction which are subsumed under paradigms; and where models are the least pervasive structure subsumed under the aegis of theories.
The traditional view of paradigms since Kuhn (1962, 1970) has been that they are made up of three constituent elements: ontology, which is defined as the study of being or of existence; epistemology, which describes the nature of the data by which we understand knowledge, or “how we know what we know” as Crotty (2003, p. 8) succinctly puts it; and methodology, which is defined as the study of the research methods by which we gather and analyse our data, and of the philosophical underpinnings of those research methods.

In the remainder of this chapter, I propose to outline the distinction between the potentiality and the pathology models of psychological therapy, and of functional and structural forms of governance and regulation. Along the way, I shall also offer a consideration of some of the theories which are subsumed under the potentiality paradigm, as well as an outline of the various paradigmatic options available for consideration.

2.1 Distinction between the potentiality and pathology paradigms

2.1.0 Introduction

As I am investigating here the epistemology only of potentiality paradigm therapy, it is important that I draw sufficient distinction between potentiality and pathology paradigm therapy. I shall begin by distinguishing the potentiality model from the deficiency model.

2.1.1 The deficiency model

The deficiency model recognizes people according to what is somehow deficient or, to be blunt, according to what is ‘wrong’ with them, in much the same way that medicine recognizes its patients according to their various forms of pathology. My own impression is that it is the deficiency model or certainly what is often termed ‘deficiency model thinking’ that permeates about ninety percent of the developed Western world. Because it has become imbedded into so much of our mainstream culture, it is often easier to recognise ‘deficiency model thinking’ by seeing it as the ‘other’ to the potentiality model.
Interestingly enough, I was about to employ the word ‘opposite’ where I typed ‘other’ in the previous sentence, but I refrained from so doing because I actually don’t consider these two models to be polar opposites; rather, I am more inclined to see them as being merely different. I did think that one sense in which they may be considered to be opposites is because they each represent the alternative to the other; but this still doesn’t wholly persuade me of their oppositeness.

A more convincing argument for each model – deficiency and potentiality – being seen to constitute the opposite of the other model could be said to lie in the relationship of the medical model to the deficiency model. If we consider the medical model to represent a special case or form of the deficiency model, then we may cite the single most striking characteristic of the medical model as an instance of the deficiency model: the medical model is framed around the trait that it prescribes a specific form of treatment for each specific form of pathology, and that it maintains that the patient recovers from their illness purely because of the medical intervention that delivers this specific form of treatment for their specific form of pathology. If we now contrast this with the potentiality model – which is, in essence, an example of a growth model – then it prescribes that the person in need of further growth or development is simply provided with the optimal conditions for their further growth. This in effect suggests that each individual will be provided with the selfsame optimal conditions for further growth, as these conditions are unlikely to differ very significantly from one individual to the next.

Thus, we are left with the state of affairs whereby the deficiency model prescribes specific forms of treatment tailored to each individual’s form of pathology, whereas the potentiality model largely treats each person in the same or in a remarkably similar manner by offering them the optimal conditions for their, for which read for anybody’s, for which read for everybody’s further growth and development. This is why Carl Rogers advocated training therapists to offer what were then called the ‘core conditions’ – unconditional positive regard, empathy and congruence (Rogers, 1951, 1961) – as these were what he considered to constitute the optimal conditions for growth. To this extent, it is perfectly true to suggest that the Person-Centred Approach (PCA) focuses on treating people whereas pathology paradigm therapies focus on treating various forms of pathology. And so we have the delivery of generic forms of treatment versus the delivery of specific forms of treatment, each of which one may indeed regard as constituting the opposite of each other.
One prominent aspect or ‘symptom’ of deficiency model thinking is the desire to ‘cover one’s back’ rather than to take any unnecessary risks. This is often termed a risk-averse approach to life as opposed to its alternative, a risk-aware approach, whereby informed risks are tolerated in pursuit of some important goal (Gilmore, 2008, pp. 183-186). This earlier piece of research concluded that risk-aversion is the most likely consequence of deficiency model thinking, whereas risk-awareness constitutes the most likely outcome of practice that is underpinned by the potentiality model. Let us move on now to consider the potentiality model, as outlining its features will also help to explicate the distinctions between it and the deficiency model more convincingly.

2.1.2 The potentiality model

Perhaps two of the most lucid accounts of how the potentiality model may be applied to and thereby illustrated by the psychological therapies are given by Mearns and Thorne, long-time advocates of the Person-Centred Approach (PCA):

The question of whether we focus on the potentialities or the deficiencies of the human being is an age-old philosophical dialectic. To explain the language further, within education a deficiency model perspective is that the learner’s basic state is one of ‘deficit’ and that we must ‘fill her up’ with everything she will need. The potentiality model perspective is that, far from being ‘deficient’, the learner has a huge array of potentialities manifested in embryonic skills and talents. Our educative task within this model is to create the environment where she can exercise these embryonic skills and develop her potentialities.

Generally speaking, within education, ‘deficiency rules!’ though we find from time to time the odd ‘out-cropping’ of the potentiality model. . . .

Deficiency model language is easy and suits simple minds. Educators in any sector are continually badgered to ensure that their students are ‘filled-up’ with appropriate elements from the moral and political curriculum. Historically, much of that was religious – now the messages are differently sourced but reflect a similar conservative moral philosophy.

Interestingly, most approaches to therapy are oriented towards the potentiality model - they aim to help the person become more flexible and confident to practise and develop his potentialities.

(Mearns and Thorne, 2000, p. 33; Mearns, 2003, p. 63)

As is fairly easy to extrapolate from Mearns and Thorne’s writing above, the potentiality model represents what is essentially a growth model. In spite of enquiring earnestly of
many colleagues and others, it would appear that nobody can cite with any authority the precise derivation for how the term *potentiality* has come into being, although most agree that it has been used in education and the social sciences for a long while. My own assumption is that the term presumably derives from the human growth and potential movement that surfaced in the United States of America in the nineteen-sixties, and which was expressed most strikingly, if perhaps at times imperfectly, at places like the Esalen Institute at Big Sur in California.

Contrary to the medical model, whereby specific forms of treatment are devised for each form of pathology, a growth model like the potentiality model simply focuses on providing its consumers with those conditions that are deemed most likely to facilitate their growth. In the case of the PCA, therefore, person-centred practitioners would focus first and foremost on providing what are often termed the ‘core conditions’ to their clients: unconditional positive regard, empathy and congruence (Rogers, 1951, 1961). It is also easy to recognise Mearns and Thorne’s disdain for the deficiency model and for the thinking that it inspires from the following sentence: “Deficiency model language is easy and suits simple minds” (Mearns and Thorne, 2000, p. 33; Mearns, 2003, p. 63).

See also Gergen (1994, pp. 143-164) for a scholarly account of what he calls ‘deficit discourse.’

### 2.1.3 Concluding observations about the potentiality model

What these thumbnail sketches of the deficiency and the potentiality models tell us is that, whereas the deficiency model judges people according to their deficiencies, or according to whatever may be ‘wrong’ with them, the potentiality model suggests that each individual already has within them the skills and other attributes needed to live their lives, albeit some of these might still be at a fairly germinal level, and may require further development. It is this further development that constitutes the principle objective of the growth model that is implied by the potentiality model. In the practice of the psychological therapies, this further development is achieved through the practitioner’s focus on the provision of conditions – often delivered through the safety of the therapeutic relationship – likely to foster further growth which, in the case of the person-centred approach to working with
people, may be considered to be represented by the core conditions of unconditional positive regard, empathy and congruence (Rogers, 1951, 1961).

It is worth making mention of Maslow’s version of the terms Potentiality and Deficiency, which were, respectively, Being and Deficiency (Maslow, 1968). Indeed, Maslow (1968, 1970) is often one of those early theorists credited with introducing terms such as Deficiency and Potentiality into the psychotherapeutic lexicon. By way of just one example, Maslow, writing about differentiating between what he calls “higher and lower needs” (Maslow, 1970, pp. 97-104) writes about a person growing “towards actualization of his potentialities” (Maslow, 1970, p. 104).

Let us bring to a close these thumbnail sketches of the potentiality and deficiency models with a few more brief quotations, the first being from Maslow, who cautions against extreme views of either model.

I criticize the classical Freudians for tending (in the extreme instance) to pathologise everything and for not seeing clearly enough the healthward possibilities in the human being, for seeing everything through brown-colored glasses. But the growth school (in the extreme instance) is equally vulnerable, for they tend to see through rose-colored glasses and generally slide over the problems of pathology, of weakness, of failure to grow. One is like a theology of evil and sin exclusively; the other is like a theology without any evil at all, and is therefore equally incorrect and unrealistic.

(Maslow, 1968, p. 48 – emphasis features in Maslow’s original text)

The next quotation is from Seligman and Csikszentmihalyi’s introduction to a special 2000 edition of The American Psychologist (Volume 55, Number 1) featuring papers on positive psychology, of which theirs is the first, and in which they write:

Practitioners need to recognize that much of the best work they already do in the consulting room is to amplify strengths rather than repair the weaknesses of their clients.

(Seligman and Csikszentmihalyi, 2000, p. 8)

The following description of Greenberg’s of the goals and methods of EFT includes references to coaching and to trainees, as well as to growth.

Coaches facilitate emotional growth by focusing people’s attention on their positive emotional potential and helping them mobilize their inner resources. . . . The goal in emotion coaching is to promote higher levels of functioning and to help people
learn rather than to treat a deficit or a disease. . . . I view coaching as involving a partnership of co-exploration in a growth-promoting process aimed at helping a trainee achieve goals of emotional awareness, regulation, and transformation.

(Greenberg, 2002, p. 56)

Note Greenberg’s use of the terms “coaching” and “trainee” here, and his reasons for adopting them:

It is important to note that the concept of coaching is highly respectful and being a trainee often is more acceptable to people than being a patient or a client in therapy. Being in therapy still implies sickness. Training and coaching do not.

(Greenberg, 2002, p. 57)

What Greenberg is suggesting in these last few lines is that how we refer to our work is significant because of the effect that our use of terminology may have on our clients.

The merging of what were previously considered to be fairly clear boundaries between approaches, which has been brought about largely by the recent trend towards more dialectic forms of therapy, can be seen to be reflected in Greenberg’s (2002, pp. 56-57) use of terminology as well. (I take up this discussion briefly in subparagraph 4.3.17, below.)

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2.2  The theories that are subsumed under the potentiality paradigm

2.2.0  Introduction to theory: fantasy or myth?

For myself, I have often considered psychotherapeutic theory as little more than a series of fantasies, dreamed up by therapists with insufficient work to occupy their waking hours. Some may object that this take on psychotherapeutic theory is a little cynical on my part, and that it ignores the fact that people like Freud and Jung extrapolated their theories from the clinical experience that they had gleaned from many years of psychoanalytic practice.
My contention is that the fantasy of the three central discourses – the experiential, the relational and the hermeneutic – to potentiality paradigm therapy, which I am sharing in this research study, is similarly gleaned from many years of psychotherapeutic practice on my part, and from what feels like a lifetime devoted to reading the books that the psychotherapeutic theoreticians have written over these last four decades, and from which I have culled the quotations from the psychotherapeutic literature that appear herein.

The difference is that what I have tried to do is to give an account of what is actually going on in the practice of potentiality paradigm therapy, gained from my many years of practice and compared with a similar period spent reading about psychological therapy that takes very many different forms. My contention is that this is qualitatively quite different from a fantasy of what might be going on in the practice of potentiality paradigm therapy. Other seasoned practitioners of potentiality paradigm therapy should be well-placed to make comparisons of their own.

The following quotation from Alarcon and Williams substantiates my position on psychotherapeutic theories, even if they do refer to them as “myths.”

One of Frank’s boldest and most original steps was to declare the existing theories of psychotherapy “myths.” He was not being ironic: both myths and psychotherapy theories are “imagination-catching formulations” of recurrent and important human experiences that “cannot be proved empirically.” A myth (or theory) is a “conceptual scheme that provides a plausible explanation for the patient’s symptoms, and prescribes a ritual or procedure for resolving them.” Frank reminds us that Freud, whom he called “a truly great myth-maker,” characterized instincts as “our mythology.” Despite the undeniable advances of science, faith in science (and especially today, in evolutionary science) . . . wears the clothing of myth in the contemporary world.

(Alarcon and Williams, 2012, pp. 96-97 – emphasis features in the authors’ original text)

Presumably the reason why psychotherapeutic theory “cannot be proved empirically” lies in its inability ever to be refuted (Popper, 2002a, 2002b). Finally, Wells and Frank (2012, p. 191) reiterate that in order “[t]o be effective, a theory must be credible to the therapist and plausible to the patient.” So, fantasy or myth: one pays one’s money, and one takes one’s choice!
2.2.1 Introduction to the Humanistic-experiential Therapies (HEPs)

The term Humanistic-Experiential Therapies (HEPs) is generally understood as constituting an umbrella term designating a cluster of therapeutic approaches which are sufficiently in sympathy with each other to permit their synthesis into various integrated approaches to the psychological therapies (Elliott, Greenberg, Watson, Timulak Freire, 2013; Greenberg and Van Balen, 1998). One could certainly include the Person-Centred Approach (PCA), existential-phenomenological therapy, and Gestalt therapy as having constituted the initial core of the HEPs, and several further variants have since become subsumed under this grouping of therapies, such as Process-Experiential Therapy (PET) (Greenberg, Rice and Elliott, 1993) and Emotion-Focused Therapy (EFT) (Greenberg, 2002; Greenberg and Paivio, 1997; Elliott, Watson, Goldman and Greenberg, 2004).

Greenberg hints at the defining characteristic of the experiential psychotherapies in the following quotation, which comes from a passage in which he is writing about how learning comes about in EFT:

> The third competency involves learning to tolerate and accept painful emotional experience via the process of being in a relationship with a coach who accepts and is able to tolerate both the client’s painful emotions and any of the coach’s own emotions in response to the client’s. People don’t learn emotional regulation in the same way they learn, say, math or biology; rather, the skill is absorbed implicitly by being in the presence of a person who has this ability. If, for example, clients see that their therapists are calm in response to their expressions of distress or anger and can contain them, they find this reassuring and are calmed.

(Greenberg, 2002, p. 73)

Now there are two possibilities here, depending on how we interpret what Greenberg is trying to explain. We could suggest, for example, that the client is absorbing these skills through having these competencies modelled by the therapist or coach, in which case we could attribute this to something akin to a more advanced form of skills rehearsal achieved by dint of the therapist using the therapeutic relationship in effect to model and thereby to teach these skills or ways of being to the client. However, I think that an even more fundamental phenomenon is being illustrated here: that the client is learning these competencies through having experienced the impact of their relationship with their therapist or coach who can her- or himself remain calm in the face of such expressions of distress on the client’s part. The principle distinguishing factor of the experiential
therapies is that they have to be experienced by their clientele; it’s not something that they can simply learn vicariously from, say, reading a self-help book.

Elliott, Greenberg and Lietaer suggest that:

The central task in experiential therapy is the deepening of experience. An associated but not identical general task is increasing access to emotions and emotional arousal.

(Elliott, Greenberg and Lietaer, 2004, p. 517)

The central role played by the experiential discourse is evident from Watson, Greenberg and Lietaer’s account of the genealogy, goals and methods of the HEPs.

Experiential therapy has its roots in client-centered, existential, and Gestalt approaches to psychotherapy. These humanistic approaches emphasize that clients are aware, subjective beings and self-reflective agents. The main objective of experiential therapy is working with clients’ awareness, both by focusing on subjective experience and by promoting reflexivity and a sense of agency. Despite the changes in emphasis in the evolution of praxis over time, two important foci can be identified as the cornerstones of experiential approaches: the first focus is on the importance of the therapeutic relationship in facilitating change in clients, and the second is on the importance of clients’ experiencing in therapy, consisting of clients’ representation and examination of their inner subjective worldviews, including feelings, perceptions, goals, values and constructs.

(Watson, Greenberg and Lietaer, 1998, p. 3)

And on the following page, these authors write about deepening the client’s experiencing in the following terms:

In the practice of experiential therapy a genuine empathic and confirming relationship is seen as a crucial curative factor in its own right as well as facilitative of the other main task of this approach – that of deepening clients’ experiencing in therapy.

(Watson, Greenberg and Lietaer, 1998, p. 4)

Watson, Greenberg and Lietaer are asserting here that both what I shall go on to write about as the experiential and the relational discourses (in paragraphs 4.2 and 4.3 respectively) are of equal importance to the practice of potentiality paradigm therapy.
Another trio of authors, this time, Beutler, Booker and Peerson, outline several other characteristics of the HEPs.

“Experiential Therapy” is a broad designation within which there is a rich array of diversity. Humanistic, existential, and phenomenological models are well accepted as being subdivisions of this general system. The identity of the more specific theories that represent these models, however, is less consistent. Some theories are not easily classified within a single model while others are blends of two or more. Thus, some authors identify constructivist approaches such as that of Kelly (1955) as an experiential theory, while others identify it as a variant of behavioral or psychodynamic schools. The basis of this disparity is not obvious. While this variability suggests that there is a lack of reliability in assigning at least some theories of psychotherapy to general models or schools, it also illustrates the cross-theory blending that is a part of the experiential movement itself.

Culturally, experiential philosophies are ingrained deeply in the values of hard work and sacrifice, the values of the industrial and Protestant revolutions. The evolution of these theories was forever colored by the experiences of holocaust survivors and others who suffered the ravages of war and prolonged catastrophe. While their theoretical roots date to the European philosophers of the eighteenth and nineteenth centuries, as a domain of practice and service, experiential therapies are largely a post-WWII development. They represent the “transplanting of existential thinking from their chiefly European intellectual roots to a broader US audience of nonmedical, unphilosophically sophisticated, practicing counselors and therapists” (Bugental & McBeath, 1995, p. 112).

Rice and Greenberg (1992; modified from Tageson, 1982) point out that the various theoretical variations within experiential theory share: (i) a reliance on phenomenology as a method of study, (ii) an assumption that in-born actualizing tendencies motivate behavioral development and change, and (iii) a belief in individual choice as the causal locus of behaviour.

(Beutler, Booker and Peerson, 1998, p. 165)

These authors describe the collective term the “[e]xperiential therapies” as follows:

Experiential therapies comprise a heterogeneous collection of theoretically diverse interventions. They share certain assumptions about the nature of existence, the most reliable avenue to knowledge, and the mechanisms of symptom development and change. Humanistic, existential, and phenomenological traditions have had a long history within the fields of psychotherapy. Existential views emphasize the importance of personal meaning and choice in facilitating adaptation and survival in times of crisis; phenomenological approaches have emphasized the role of subjective experience, safety, and therapist-offered conditions as the avenues to understanding and change; and humanistic models have emphasized the role of active therapist interventions and the provision of structure in facilitating change.

Though deriving from different traditions, these models of behavior have merged over time, both in their theoretical development and in their methods of
intervention. Central to these emerging, amalgamated theories is a common reliance on the concept of self as an organizing principle of personality, and on self-actualization as a foundation motivational principle.

(Beutler, Booker and Peerson, 1998, p. 179)

But these writers also write about the ways in which the boundaries between the various constituent experiential therapies have become blurred:

Time has resulted in an inevitable blurring of theoretical boundaries . . . Existential theories have become more phenomenological and humanistic ones have become more existential.

(Beutler, Booker and Peerson, 1998, pp. 173-174)

They also write about the blending of the experiential therapies in the following terms:

Modern developments of experiential therapies have blended theories, often including principles and practices of cognitive and behavior therapies, as well as various components from humanistic, existential, and phenomenological viewpoints. There has also been a significant movement to reconceptualise human experience within a developmental perspective. In this conceptualization, emphasis is placed on growth as an immediately ontological experience, the person is a consciously and developing “being.” These modern experiential therapies urge patients to focus both on immediate experience and on the progressive change and evolution of that experience as a way of obtaining self-knowledge. This view contrasts with both a static description of personal meanings and with models of behavior that emphasize either the effects of historical experience in their own right, the roles of unconscious drives, or the influence of biologically determined behaviors.

(Beutler, Booker and Peerson, 1998, pp. 179-180)

The experiential discourse that lies at the heart both of the potentiality paradigm and of the experiential therapies takes as its core tenet that the main thrust of therapy is to promote the client’s capacity to experience themselves during the course of therapy (Watson, Greenberg and Lietaer, 1998, pp. 3-4). This experiencing of themselves by the client may constitute what feels like the first occasion on which the client has experienced themselves in any significant way, or it may represent the development of a competence that has long been present in the client, but which has not previously had the requisite conditions to foster its further growth or development.
The diligent reader will observe that this notion of the development of a competence that has long been present in the client accords with Mearns and Thorne’s description of the client as possessing “a huge array of potentialities manifested in embryonic skills and talents” (Mearns and Thorne, 2000, p. 33; Mearns, 2003, p. 63) where the task under the terms of this model is to “create the environment where she can exercise these skills and develop her potentialities” (Mearns and Thorne, 2000, p. 33; Mearns, 2003, p. 63).

Although these authors were tracing here the origins of the potentiality paradigm as having derived originally from an educational discourse, possibly having been imported from the human growth and potential movement of the 1960s, they were also pointing out how those of the psychological therapies that are underpinned by the potentiality paradigm ultimately adopt the perspective of a growth model, as opposed to the illness model, medical model or the deficiency model, each of which features in the pathology paradigm.

### 2.2.2 Process-experiential Therapy (PET)

In the following quotation, Elliott, Watson, Goldman and Greenberg outline Process-Experiential Therapy’s main characteristics in the following terms:

Process-experiential (PE) psychotherapy is a form of emotion-focused therapy aimed at helping clients develop their emotional intelligence so that they can deal with their problems and live in better harmony with themselves and others. The basic idea behind PE therapy is that emotions are adaptive but can become problematic because of past traumas or because people are often taught to ignore or dismiss them. Emotions tell us what is important in a situation and thus act as a guide to what we need or want; they help us figure out what actions are appropriate. Over time, being aware of emotions and learning to manage and use them give one a sense of consistency and wholeness. However, learning about emotions is not enough; instead, what is needed is for clients to experience those emotions as they arise in the safety of the therapy session, where they can discover for themselves the value of greater awareness and more flexible management of emotions. That is what PE therapy does: It is an emotion-focused therapy that systematically but flexibly helps clients become aware and make productive use of their emotions.

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Process-experiential psychotherapy is an empirically supported, emotion-focused, humanistic treatment. It integrates person-centered, gestalt, and experiential therapies but brings them up to date with contemporary psychological thinking. The therapy is based on a 25-year programme of psychotherapy research (Elliott & Greenberg, 2002; Elliott, Greenberg, & Lietaer, 2003; Greenberg, Elliott, & Lietaer, 1994; Rice & Greenberg, 1984). Process-experiential therapy provides a distinctive perspective on emotion as a source of meaning, direction, and growth.
What is most distinctive about process-experiential therapy is its neohumanistic perspective, its basis in research, its person-centered but process-guiding relational stance, its therapist exploratory response style, and its marker-guided task strategy.

(Elliott, Watson, Goldman and Greenberg, 2004, pp. 3-4)

2.2.3 Emotion-focused Therapy (EFT)

Sometimes Emotion-Focused Therapy (EFT) is considered to have emerged out of Process-Experiential Therapy (PET), if only because the second term (PET) has been in use for longer than the former term (EFT), whilst at other times, the term Emotion-Focused Therapies is used as if circumscribing a wider tranche of therapies of which PET is just one constituent approach to the practice of the psychological therapies. Whichever view of this one takes, what we have here is Brennan, Emmerling and Whelton’s brief overview of the theoretical configuration of EFT.

Emotion-focused therapy (EFT) works directly with evoked emotion . . . . According to the EFT model, emotions are part of an adaptive meaning-making system that is crucial to our survival and wellbeing. Emotions provide us with information about the environment, facilitate decision-making, organise us for action, and facilitate interpersonal interactions. However, emotions themselves are not always adaptive or productive. EFT differentiates between primary and secondary emotions, as well as [between – Ed] adaptive and maladaptive emotions. Within the EFT model, inflexible maladaptive schemes are referred to as core problems or issues (e.g. feeling unlovable) and become a focus of therapy.

(Brennan, Emmerling and Whelton, 2015, p. 68)

Focusing now on the emotional component of EFT, in the next quotation, Pascual-Leone and Greenberg outline the way in which what they call “affective-meaning states” – whereby “emotion is understood . . . as the complex synthesis of both affective feelings and the meaning embodied by those experiences (hence “affective-meaning” states)” (Pascual-Leone and Greenberg, 2007, p. 885) – play their role in the “general change process” whereby “emotion changes emotion” in the course of the practice of EFT.

[G]lobal distress represents a secondary emotion; fear/shame represents primary maladaptive emotions; and assertive anger, self-soothing, and hurt/grief each represent primary adaptive emotions. Thus, the three-step process of change conceptualized by Greenberg (2002), that is, how emotion changes emotion, can be described concretely using affective-meaning states from the current model. Note that “emotion” is understood here as the complex synthesis of both affective
feelings and the meaning embodied by those experiences (hence “affective-meaning” states). More important, for the first time, the three-step model of emotional transformation in EFT is empirically supported by these findings as a general change process. The ordering of states and dialectical syntheses (i.e., transformations) in this empirically supported model also bear some resemblance to the clinical and theoretical observations made in accelerated experiential dynamic psychotherapy, in which core affects are accessed and transformed.

(Pascual-Leone and Greenberg, 2007, p. 885)

2.2.4 The Person-centred Approach (PCA)

Person-Centred Therapy (PCT) is often taught within the UK as the therapy of first choice to trainees who have embarked on training courses in counselling either at certificate or at diploma level. The reason for the popularity of PCT was once explained to me by one such trainer in terms of it being the sort of therapy which one may not practise terribly expertly and yet still do precious little harm! Apart from signalling a dismally low level of expectation from one’s trainees, I should prefer to consider a better reason for PCT constituting the therapy of first choice being because PCA constitutes a tremendously useful value-base from which one’s professional development may branch out in other directions at a later date. Whatever form of therapy one may end up practising, training in PCA offers one a set of relationally-oriented values that will stand the emerging psychological therapist in good stead for the remainder of her or his professional career.

Before it came to be called the Person-Centred Approach (PCA) or Person-Centred Therapy (PCT) (Mearns and Thorne, 2000, 2007), this species of therapy was called Client-Centred Therapy (CCT) (Rogers, 1951, 1961) and before that, non-directive therapy (Rogers, 1942) by its adherents. It is based on the principle of the actualising tendency (Rogers, 1961, pp. 350-351; Thorne, 1984, p. 106), whereby it is assumed that each individual has a drive to actualise her or his capacities or potential to the full. Rogers’ most classic paper outlining the six conditions that he considered to be the prerequisites for effective therapy to take place is Rogers (1957), but perhaps his fullest exposition of the theory underlying CCT, PCT and the PCA in general is to be found in Rogers (1959).

When practising according to the PCA, the therapist strives to create an accepting relationship with the client in which the latter may perceive themselves as being accepted by the therapist, and accepted unconditionally. It is hoped that this unconditional positive
regard that the therapist manifests towards the client will be perceived by the latter in such a way that it will in time percolate through to the client in such a manner that they may be able to begin to accept themselves unconditionally too. Rogers regarded the therapeutic relationship as crucial to the success of the therapeutic process, and to aid in the establishment of such a relationship, he used to advocate that the therapist was as congruent as may prove helpfully possible within the therapeutic relationship. By this, Rogers did not mean to imply that the therapist should always communicate to the client every thought about, or every single feeling toward the client that occurred to the therapist, but that the therapist should be sufficiently self-aware so as to enable them to be able to access their own thoughts about and feelings towards the client, but that the therapist would share them with the client only when they judged it therapeutic so to do.

Joseph and Linley sum up one of the core theoretical tenets of the PCA most succinctly when they write the following:

[A]ll psychological problems are essentially the same: they are all individual expressions of incongruence between self and experience, and as a result there is no need for specific treatments.

(Joseph and Linley, 2006, p. 106)

When these two positive psychologists write about “no need for specific treatments” they are explaining how the PCA differs from the medical model, whose chief characteristic is that it requires specific treatments for specific conditions. They believe that there is however “no absolute distinction between the facilitation of human growth and the relief of distress” (Joseph and Worsley, 2007, p. 218).

As with our previous volume on person-centred psychopathology (Joseph and Worsley, 2005), our aim in developing this book was to bring together experts in the person-centred approach who would write about their work in such a way as to illustrate the meta-theoretical assumption underpinning person-centred practice, i.e., that people are intrinsically motivated toward being fully-functioning. In this, we show how this way of thinking could be applied to people suffering from a variety of so-called psychological disorders. From the perspective of person-centred personality theory, there is no absolute distinction between the facilitation of human growth and the relief of distress, for both involve the person becoming more fully and congruently engaged with the process associated with organismic evaluation. This is what makes the person-centred approach different from other therapeutic approaches and what makes it an exemplar as a positive psychology.

(Joseph and Worsley, 2007, p. 218)
2.2.5 Existential-phenomenological Therapy

As so often happens with successful approaches to the psychological therapies, their success often attracts a number of theorists who tend to finesse existing theory such that many divergent schools of the central franchise come into being, each in turn attracting its own adherents. The existential-phenomenological group of therapies is no exception to this trend, boasting at least two main branches: transcendental phenomenology and existential phenomenology, the latter being what people are commonly referring to when they merely cite the terms existentialism or existential therapy within the context of the practice of the psychological therapies (Spinelli, 1989, p. 105).

As might be expected, existential therapy draws its theoretical base from existential philosophy: in particular, from the work of Soren Kierkegaard, Friedrich Nietzsche, Edmund Husserl, Martin Heidegger, Jean-Paul Sartre and Maurice Merleau-Ponty (Spinelli, 1997, p. 5). Its central tenet is that anxiety is created when people come up against what Yalom (1980, p. 8) calls the “four ultimate concerns: death, freedom, isolation, and meaninglessness. The individual’s confrontation with each of these facts of life constitutes the content of the existential dynamic conflict” (Yalom, 1980, p. 8). Van Deurzen-Smith (1997, p. 94) maintains that: “As human beings we are complex bio-socio-psycho-spiritual organisms” (van Deurzen-Smith, 1997, p. 94), and in so doing, she is elucidating what she refers to as “the four existential dimensions” (van Deurzen-Smith, 1997, p. 100) of human existence: the biological or the physical (Umwelt) (van Deurzen-Smith, 1997, pp. 103-111), the social (Mitwelt) (van Deurzen-Smith, 1997, pp. 112-117), the psychological or the personal (Eigenwelt) (van Deurzen-Smith, 1997, pp. 118-122), and the spiritual (Uberwelt) (van Deurzen-Smith, 1997, pp. 123-128).

As the existential-phenomenological psychological therapies contain many different emphases within their various subgroups, so too do some existential therapists integrate existentialism with other approaches to therapy. By way of an illustration of this, Mick Cooper practices existential therapy along with person-centred perspectives (Cooper, 2003, p. 4). The beauty of the experiential group of psychological therapies is that it is often quite practical to integrate some of the concepts of one approach to psychological therapy with those of another approach that also falls within the experiential tradition of the psychological therapies. As they are all classified as falling within the broadly humanistic tribe of allegiances, they all emphasise the quality of the human relationship between client
and practitioner as being central to the efficacy of their approach to the practice of the psychological therapies.

2.2.6 Gestalt Therapy

Credit for the first founding initiatives of Gestalt therapy is usually apportioned between Fritz and Laura Perls and Paul Goodman. If Perls’ book entitled *Ego, Hunger and Aggression* (Perls, 1969), which was first published in 1947, represents the first text on Gestalt therapy, perhaps the earliest definitive publication was Perls, Hefferline and Goodman (1973), which was first published in 1951. Another early publication that remains a seminal authority of Gestalt therapy even today is Polster and Polster (1974), which was first published in 1973.

Many people still try to recognise Gestalt therapy from the early demonstration film in which Perls works with Gloria (Shostrom, 1966). Whilst this early glimpse into the way in which Perls showcased Gestalt therapy is in itself interesting, it bears little resemblance to the various ways in which Gestalt therapy is actually practised in the present era. What it does demonstrate most ably however is Perls’ adherence to the phenomenological method, which is one of the four central theoretic planks of Gestalt therapy. Going from memory, there is one moment in this demonstration when Perls asks Gloria what she is doing with her feet. Later on in the session, Gloria – who I think it fair to say had by this time come to find Perls inquisitorial, not to say confrontational style somewhat tiresome – asked Perls why he had been asking her why she had been wiggling her feet, to which Perls replied by saying that he had not asked her *why* she had been wiggling her feet, but had only asked her *what* she had been doing with her feet. Furthermore, he suggested to her that she had distorted her recollection of their encounter: that was a different Fritz, he said: the Fritz of her imagination, rather than the ‘real’ Fritz who had been sitting across from her and mirroring her body posturing. This illustrates the phenomenological method, whereby the focus is on *description* and not on *explanation*. Indeed, in his introductory remarks to his encounter with Gloria, Perls encourages us neither to explain nor to interpret, as follows:

> The basic technique is this: not to explain things to the patient, but to provide the patient with opportunities to understand and to discover himself.

(Fritz Perls speaking in his introductory remarks to Part Two of Shostrom, 1966)
Perls also emphasised in his introductory remarks to his encounter with Gloria that introducing interpretation into the practice of Gestalt therapy always constitutes a mistake.

 Principally, I consider any interpretation to be a therapeutic mistake, as this would imply that the therapist understands the patient better than the patient himself.

 (Fritz Perls speaking in his introductory remarks to Part Two of Shostrom, 1966)

A second key element of Gestalt therapy is what is often termed the dialogical encounter between therapist and client. The emphasis – certainly these days – is on forming an inclusive relationship where the client has the space to experiment in what Perls himself termed “the safe emergency” (Shostrom, 1966) of the therapeutic encounter. This entails that the therapist relinquishes all attempts to control the direction of the session, but rather to act as something of a mirror that reflects an image of the client back to her- or himself. One can see Perls doing this at one point in the demonstration with Gloria (Shostrom, 1966), where he leans forward in his chair to reflect that Gloria has just modified her seating attitude in like manner.

This leads on to the third core element of Gestalt therapy which is its willingness for experiments to be conducted within its therapeutic frame. This constitutes one reason why Gestalt therapy is considered to be one of the experiential therapies. Gestalt therapists much prefer to work in the present with their clients, and so, if a client were to begin to speak about some significant person in their life – such as a parental figure, for example – the therapist would be more likely to modify the work to embrace an experiment whereby the client were actually to hold a dialogue with this person in the session. This could take the form of some empty chair work, a technique much beloved of Gestalt therapist and also much used in Moreno’s psychodrama (Moreno, 1987), whereby the client dialogues with what is effectively their perception of some other person. Gestalt therapy used often to be integrated with transactional analysis (Berne, 2009; Woollams and Brown, 1979) especially in the early life of these two approaches, both of which were devised in the mid-1950s.

The fourth and final core element of Gestalt therapy is its use of field theory. Fields can be considered as falling under two main categories: ontological (representing our subjective experience) or phenomenological (representing our lived environment). Gestalt therapy is designed to help us to become more aware of our character structure – which Gestalt
therapy considers to be fluid or dynamic, as opposed to being set in tablets of stone – by focusing on our phenomenological field within the context of our ontological field.

2.3 The paradigms on which I will be drawing in this research study

2.3.0 Introduction to paradigms

Paradigms are overarching structures that accommodate ontology, epistemology and methodology. Ontology is the study of being: what form of existence we understand when we speak of reality or of truth; epistemology is the study of knowing: what form does our knowledge take – or the relationship between the knower and the known, as it is sometimes expressed; and methodology constitutes how researchers use various research methods to determine what we know by gathering and then analysing data on our research topic.

Guba defines these terms rather broadly in the following terms:

(1) **Ontological**: What is the nature of the “knowable”? Or, what is the nature of “reality”?
(2) **Epistemological**: What is the nature of the relationship between the knower (the enquirer) and the known (or knowable)?
(3) **Methodological**: How should the enquirer go about finding out knowledge?

(Guba, 1990, p. 18)

Sometimes, one will hear researchers speak about qualitative and quantitative methodologies. My preference is for the application of the qualifiers *qualitative* and *quantitative* to the research *methods* themselves rather than to the research *methodologies*. The distinction I am invoking here is that research methods – whether qualitative or quantitative – are the research tools that we employ to gather and to analyse our data, whereas the methodologies (being the study of how to use those research methods in different contexts) constitute the strategies that determine how we are going to use the research methods and the philosophical understandings that underpin them.
2.3.1 The constructivist and social constructionist paradigm

Constructivism is the name given to a paradigm that is less concerned with measurement and proof than it is with description and interpretation; indeed, it is sometimes referred to as the interpretive paradigm. Reality or truth is conceived as being created either by individuals (constructivism) or by the general consensus of social and/or professional groups (social constructionism) (Bakhurst and Sypnowich, 1995; Fee, 1999; Gergen, 2001; Kitzinger, 1987; Middleton and Edwards, 1990; Radtke and Stam, 1994; Sarbin and Kitsuse, 1993; Shotter and Gergen, 1988; and Steier, 1991). Constructivism is a research paradigm that values forms of subjectivity that are not catered for by positivism.

Constructivist research often relies upon qualitative data such as interview transcripts or survey results, although it is worth noting that there is an increasing body of mixed methods research being undertaken and published these days, which uses a mix of qualitative and quantitative research methods. Guba outlines the constructivist paradigm

*Ontology: Relativist* – realities exist in the form of multiple mental constructions, socially and experientially based, local and specific, dependent for their form and content on the persons who hold them.

*Epistemology: Subjectivist* – inquirer and inquired into are fused into a single (monistic) entity. Findings are literally the creation of the process of interaction between the two.

*Methodology: Hermeneutic, dialectic* – individual constructions are elicited and refined hermeneutically, and compared and contrasted dialectically, with the aim of generating one (or a few) constructions on which there is substantial consensus.

(Guba, 1990, p. 27)

This piece of research is largely theoretical and abstract in nature. Lincoln and Guba have an important reminder about matters theoretical for us, which they express in the following straightforward terms:

All theories, including methodological theories, are constructions.

(Lincoln and Guba, 1985, p. 89)

And, four years later, these same authors expressed this same position as follows:

To put it in our own terminology, *knowledge is a human construction*, including, we might add, all theories and methodologies. Hence they cannot be taken as
ultimate or objective truths but suffer, and will continue to suffer, from human foibles.

(Guba and Lincoln, 1989, p. 67)

One page further on in the same work, they reiterate their position on knowledge thus:

We cannot stress too strongly the assertion that human knowledge consists of a series of constructions, which, precisely because they are humanly generated, are problematic, that is, indeterminate, unsettled, and ambiguous.

(Guba and Lincoln, 1989, p. 68)

It is, therefore, with the constructivist and social constructionist paradigm that we shall be principally concerned in terms of the methodology of this research study. But which of these two terms should we be invoking here: social constructionist or constructivist?

My preference within this particular research study is for the terms constructivism and constructivist rather than for the terms social constructionism and social constructionist. This is because this piece of research is concerned with how the human brain processes the data available to it, and in particular, with how the human brain symbolises our experiencing and thereby attaches meaning to our experiencing. This would seem to call for a consideration that places the emphasis upon the functioning of the individual human being rather than upon the individual as a constituent member of society. In making this choice, I am not attempting in the slightest to devalue the important contribution made by social constructionism to our understanding both of ourselves and of the world around us; it is simply that the focus of this research study lends itself more to a consideration of the individual human being whilst nevertheless acknowledging the importance exerted on human functioning by societal conditioning.

Writing about epistemology in social science research, Crotty (2003, pp. 57-58) also expresses a similar view on the distinction between the use of the terms constructivism and constructivist and social constructionism and social constructivist.

It would seem important to distinguish accounts of constructionism where this social dimension of meaning is at centre stage from those where it is not. . . . Constructivists, he [Schwandt – Ed] adds, ‘emphasize the instrumental and practical function of theory construction and knowing’.
This constructivism is primarily an individualistic understanding of the constructionist position and Schwandt contrasts it with a genuinely social constructionism:

Kenneth and Mary Gergen also challenge the idea of some objective basis for knowledge claims and examine the process of knowledge construction. But, instead of focusing on the matter of individual minds and cognitive processes, they turn their attention outward to the world of intersubjectively shared, social constructions of meaning and knowledge. Acknowledging a debt to the phenomenology of Peter Berger and Alfred Schütz, Kenneth Gergen (1985) labels his approach ‘social constructionism’ because it more adequately reflects the notion that the world that people create in the process of social exchange is a reality *sui generis*.

Contrary to the emphasis in radical constructivism, the focus here is not on the meaning-making activity of the individual mind but on the collective generation of meaning as shaped by conventions of language and other social processes. (1998, p. 240)

It would appear useful, then, to reserve the term *constructivism* for epistemological considerations focusing exclusively on ‘the meaning-making activity of the individual mind’ and to use *constructionism* where the focus includes ‘the collective generation [and transmission] of meaning’.

(Crotty, 2003, pp. 57-58 – emphases feature in these authors’ original texts)

Furthermore, as Crotty (2003, pp. 57-58) is quoting Schwandt (1998, p. 240) citing Gergen (1985) in the quotation within the quotation that appears immediately above, I thought that it would be appropriate to quote Gergen’s seminal paper myself by way of additional support for my decision to favour usage of the terms *constructivism* and *constructivist* in preference to *social constructionism* and *social constructionist* within this particular piece of research. Consequently, I quote a further explanation of Gergen’s on the distinction between these two pairs of terms from a footnote from the self-same paper that Crotty (2003, pp. 57-58) quotes Schwandt (1998, p. 240) as citing. Gergen offers this explanation immediately after he has cited “the social constructionist movement\(^1\)” (Gergen, 1985, p. 266) whilst offering the world an early take on social constructionism:

\(^1\)Although the term *constructivism* is also used in referring to the same movement, this term is also used in Piagetian theory, to a form of perceptual theory, and to a significant movement in 20\(^{th}\) century art. The term *constructionism* avoids these various confusions and enables a linkage to be retained to Berger and Luckmann’s (1966) seminal volume, *The Social Construction of Reality*.

(Gergen, 1985, p. 266, n. 1)
As the epistemological mechanism of dialectical constructivism, which features below at subparagraph 4.6.2, derives from Piaget and Pascual-Leone’s Theory of Constructivist Operators (TCO) (Pascual-Leone, 2015, p. 34), which also features below at subparagraph 4.6.2, my decision to employ the terms constructivism and constructivist serve also to maintain this link both with Piaget and with Pascual-Leone, who was a pupil of Piaget’s, and who also served as one of his research assistants.

2.4 Structural or functional models of governance and of regulation

To return to my earlier remarks contained in paragraph 1.4, we will recall that Mearns and Thorne (2000, p. 36) have stated that there are two main ways in which problematic issues may be looked at and subsequently managed: through what he has called either a functional form of governance or of regulation, or a structural form of governance or of regulation. The former is satisfied merely to point to those functions that will need to be managed or to those issues that need to be addressed, whereas the latter will only be satisfied once it has additionally stipulated those mechanisms by which these issues are to be addressed or regulated.

Here is what Mearns and Thorne have to say about this issue:

Another related symptom of creeping institutionalisation, and a special case of the slide to a deficiency model, is the gradual replacement of functionally expressed criteria with structural definitions. ‘Guidelines’ accompany all dimensions of professionalization. In counselling we have guidelines for accreditation/registration; guidelines for supervision; guidelines on counselling workloads; guidelines on ethical practice; guidelines for training courses and many, many more. If we take guidelines for training courses as an example, a ‘functional’ expression of a guideline states the objective that needs to be met and requires the course to articulate how that is to be achieved within its core theoretical model, whereas a ‘structural’ framing of a guideline dictates a prescribed solution. Put another way, a ‘functional’ expression of a problem allows for a divergence of solutions while a ‘structural’ expression requires a convergence to a stated solution. Inevitably, the institutionalisation of any profession tends to result in the gradual slippage from functionalism to structuralism. Below are three examples of functional and structural expressions of training guidelines taken from the person-centred training text, Mearns (1997a: 208).
FUCTIONAL

How does the course address the problems of trainees working with ‘difficult’ clients?

Does the course effectively address the issue of the trainee’s personal maintenance and development during training?

Is the course’s assessment system sufficiently robust to protect the profession?

STRUCTURAL

Courses should build-in a system of client ‘assessment’ to protect trainees from difficult clients.

The course should require trainees to be in personal therapy during the training.

The course must be tutor-assessed.

(Mearns and Thorne, 2000, p. 36 – emphasis features in Mearns and Thorne’s original text)

The significance of analysing the psychological therapies into the respective discourses with which they engage, as in the case being pursued in the present research study, is that it enables us to overcome a long-held preoccupation with theoretical orientation, which has been the principal set of constructs by which therapists have traditionally tended to identify themselves, at least in the Western world. If we envisage the psychological therapies classified according to the discourses that are central to their modus operandi, then what we end up with is Mearns and Thorne’s (2000, p. 36) functional form of governance. If the purpose of psychological theory is to help us to analyse and subsequently to understand the terrain across which we are assisting our clients to traverse, then this is clearly associated with the hermeneutic discourse, albeit delivered through an engagement with the relational discourse in the practice of the psychological therapies. We may state, therefore, that the functional form of the hermeneutic discourse is satisfied with an identification of the principal discourses that are being articulated, whereas the proliferation of psychotherapeutic theories constitutes in this instance the structural form of governance with respect to the hermeneutic discourse in the practice of the psychological therapies.

To illustrate this further, the hermeneutic discourse’s functional model states only that we need to find some meaningful way of understanding the psychotherapeutic landscape, whereas the hermeneutic discourse’s structural model attempts to prescribe the specific theory or theories which we should apply to our psychotherapeutic data in order to make sense of it. But what if our clients don’t happen to adhere to our own pet theoretical forms of understanding of human functioning? After all, why should they?
By seeking to identify the epistemology of potentiality paradigm therapy – to ascertain what is actually going on between therapist and client – this piece of research could be considered to amount to a functional analysis of potentiality paradigm therapy.
Chapter Three: Research Design, Methodology and Methods

3.0 Overview

In this chapter, I propose first to explain my reasons for having elected to pursue an abstract piece of research that relies upon secondary sources for its data corpus, as opposed to the empirical research design that is apparently to be expected of PhD candidates in Manchester Institute of Education. I shall then go on to address the paradigmatic matters of ontology and epistemology pertaining to this constructivist piece of research, before proceeding to a consideration of the research methodology that underpins my review of secondary sources in order to generate the data sets analysed in this research study. This chapter next features a discussion about trustworthiness and concludes with a consideration of those ethical issues thrown up by my engagement with this piece of research.

3.1 An abstract piece of research relying upon secondary sources

One’s research design will inevitably be determined by one’s interpretation as to how best to approach the task of digging or mining for the evidence that one needs to analyse in order to answer one’s research question in a meaningful manner. At the heart of my research question lies what philosophers and researchers refer to as epistemology, often described variously as the relationship between the known and the knower, how we recognise knowledge, “what is entailed in knowing, that is, how we know what we [think we – Ed] know” (Crotty, 2003, p. 8). This is suggestive of a piece of research that is likely to be of a fairly abstract or theoretical nature, and whose concerns will be most
appropriately addressed by the constructivist research paradigm, as Lincoln and Guba confirm.

All theories, including methodological theories, are constructions.

(Lincoln and Guba, 1985, p. 89)

Although a research focus of an abstract nature need not of itself preclude an empirical approach to that research, one does have to take into consideration the discipline to which our research question is attached: in this case, the understanding and the practice of potentiality paradigm therapy. If one is to be able to consider approaching either this discipline’s clients or indeed its practitioners for their views on this topic – the epistemology of potentiality paradigm therapy – then one needs to believe that one has a good chance, or at the very least, a fair chance of obtaining some useful data about this.

So the next question that a wise researcher would ask themselves is how well educated our counsellors and psychotherapists may be about matters epistemological. From my own experience of having trained with and worked alongside various cohorts of such practitioners, I would have to suggest that the likelihood of obtaining some decent data about psychotherapeutic epistemology would be patchy at best: I dare say that those practitioners trained to doctoral level would at least probably know what one was asking about, but those trained to other levels might struggle somewhat; and frankly, whilst there would be no reason automatically to exclude our clients from epistemological enlightenment, neither would there be any reason for necessarily expecting that they would have such an understanding, unless they had for example studied philosophy at some point in their lives. For these reasons, it struck me that surveying a client caseload about epistemology might produce a fairly patchy level of response, whilst interviewing practitioners of potentiality paradigm therapy might produce some useful data if I were to be able to distinguish those trained to doctoral level, or else those – clients or psychotherapists – who had enjoyed a philosophical education independently from any engagement that they may have had with the psychological therapies. The difficulties inherent in identifying such a cohort of respondents did not encourage me to pursue an empirical approach to this research study.

But did I ever consider an auto-ethnographic approach to this research study? The truthful answer is that whilst I may have considered it, I did not do so for very long. This is
because I did not consider that there was anything particularly special or noteworthy about my own particular journey through the terrain of this subject matter, but also because, right from the very inception of this piece of research, I had been very much aware that it was the theoretical constructs themselves that I wanted to keep at the heart of this research, and not myself. Quite literally, I had wanted to see how the theories themselves worked, and how they articulated one with another, and I did not want to distract myself from this task by assuming myself to be some kind of hero who had embarked upon an epic voyage of discovery! (It is true that there is a place for a more personal kind of input into this piece of research, but it lies in the interpretive synthesis in which a qualitative meta-synthesis culminates, as well as in the creative synthesis in which the Moustakas (1990) heuristic research cycle also culminates, and we shall have more to say about this later on.)

But why did I not employ a form of discourse analysis? Well, given that my research involves coding the data into three epistemological discourses – the experiential, the relational and the hermeneutic – a case could be made for suggesting that I am analysing the various discourses that are at work both in our understanding and in the practice of potentiality paradigm therapy. But this is not discourse analysis as such (after Potter and Wetherell, 1987) because those analytic tools that I bring to bear in this research study are not analysing how the various actors in potentiality paradigm therapy are using language to create those discourses. Whilst it is undoubtedly true that I could have constructed a piece of discourse analytic research to investigate how the theorists whose writings I am using as data in this research study have used language to construct their theoretical structures and configurations, this is not the piece of research on which I have embarked in this research study, as I am interested in how these epistemological discourses work and interact one with another rather than in how those writing about them may have been using language.

No, rather, I am using the term discourse here in the “interpretive repertoires” use of the term after Potter and Wetherell (1987, pp. 146-157; Wetherell and Potter, 1988), and as also used subsequently by many others, including Burman and Parker (1993), and as recapitulated more recently by Parker (2013).

Potter and Wetherell describe “interpretive repertoires” in the following terms:

Interpretive repertoires are recurrently used systems of terms used for characterizing and evaluating actions, events and other phenomena. A repertoire, like the empiricist and contingent repertoires, is constituted through a limited range
of terms used in particular stylistic and grammatical constructions. Often a repertoire will be organized around specific metaphors and figures of speech (tropes).

(Potter and Wetherell, 1987, p. 149)

And barely a year later as follows:

[R]epertoires are best described in relation to a particular empirical example. However, some points should be noted here in the abstract. In dealing with lay explanations the analyst often wishes to describe the explanatory resources to which speakers have access and to make interpretations about patterns in the content of the material. The interpretive repertoire is a summary unit at this level. Repertoires can be seen as the building blocks speakers use for constructing versions of actions, cognitive processes and other phenomena. Any particular repertoire is constituted out of a restricted range of terms used in a specific stylistic and grammatical fashion. Commonly these terms are derived from one or more key metaphors and the presence of a repertoire will often be signaled by certain tropes or figures of speech.

(Wetherell and Potter, 1988, p. 172)

So, having set discourse analysis to one side, the other consideration that impelled me towards looking for my data in the professional and the academic literature rather than in the more traditionally empirical forms of research endeavour is because, already having been aware of the personal nature of the resultant interpretive and creative syntheses that were in the offing, I wanted to counterbalance these rather personally referent research methods with those more likely to allow me to claim some sense of authority – albeit within fairly circumscribed limits, as discussed below in subparagraph 6.2.2 – than would be likely to have been engendered by more personally referent methods alone.

One way in which the different research methodologies differ is in where they locate this sense of authority. Had I, for instance, decided to have undertaken a more empirical piece of research, then I could have potentially been handing over authority to individual respondents, whether clients or practitioners. The problem here becomes that, in a research study that relies upon qualitative research methods, especially where long, semi-structured research interviews may be conducted, the number of respondents may be fairly low: my earlier doctoral research study (Gilmore, 2008) contained only four expert witness research interviews of about one-and-a-half hours each. It is easy to appreciate how in such a scenario having just one fairly ‘left-field’ respondent could skew one’s data quite considerably when numbers are so low.
By contrast, in a fairly abstract piece of theoretical research that relies upon secondary sources for its data, I am better able to rule out an excessive amount of influence accruing to any one ‘rogue’ respondent that could perhaps occur in a research study that was built around a more empirical research design. In effect, a review of the professional and academic literature places the authority with the authors of this literature – except for the fact that it is I qua researcher who gets the privilege of selecting the literature that I use in the study, so in some ways this aspect of authority rests with myself. This is why transparency in how I arrive at my decisions about my use of literature will be important to a study such as this, and more will be said about this later on in the present chapter.

(This issue of authority seems to me to be paired with that of rigour – long held to represent a critically important concept in research – and I have no doubt that we shall return to discuss both of these constructs at greater length later on in this chapter.)

3.2 The constructivist worldview that informs this research study

3.2.0 Introduction through the use of keywords

If I was asked to devise a short list of keywords with which to anchor or to locate this piece of research, my resultant list would probably look something like this: representational; abstract; epistemology; dialectical constructivism; hermeneutics; the interpretive paradigm; synthesis; and of course the potentiality paradigm and the psychological therapies. These last two obviously pervade the whole of the present work, and we shall be discussing synthesis in its various forms in subparagraph 3.4.2, below.

3.2.1 The representational nature of this piece of work

The facile approach to considering research methodology would probably advise that we measure what may be measured, and that we describe what can’t. But when we speak of describing those phenomena that cannot be measured, in what sense are we speaking here
of description? We could, for example, describe the psychological therapies as consisting of two or more people sitting around talking and listening to each other. As a description, this suffices if all that we are seeking to convey is how this form of practice looks to a casual observer, always assuming that observers were to be permitted in the practice of the psychological therapies! But I think that what we are after here is something rather more functional than such a perfunctory description that is based on little more than appearances.

By way of an illustration, if we were to open up people’s brains, would we find little modules lying around inside labelled experience, relatedness or hermeneutics? I think not. We would be much more likely to find various forms of grey matter and white matter, none of which would be likely to bear any labels.

Greenberg and Paivio capture something of this when they say that

> Painful, bad, and hopeless feelings are not “things as such,” but products of internal relations.

(Greenberg and Paivio, 1997, p. 98)

What these writers are doing here is directing our thinking well away from any physical representation of matter, whether in the form of modules or of grey or white matter. Indeed, the challenge here, and throughout this piece of research, is to try to establish a form of appropriate representation for the many rather abstract concepts that we are going to be referring to during the course of this piece of research. In my opinion, this word representation is a very important word, because it describes the form of reality of which we are going to be speaking throughout this research study, for it is a representational piece of work, in which constructs – like experiencing, relatedness, hermeneutics and indeed psychological therapy itself – are going to be cited and hopefully recognised as referring to phenomena whose meaning is shared by those who are involved in the practice of the psychological therapies. This is to say that the three central discourses – the experiential, the relational and the hermeneutic – are words that represent various forms of human functioning on which I shall try to elucidate as clearly as I may. They exist as such in my head, and if I am to do an at all decent job of enunciating how they articulate the potentiality paradigm with respect to the practice of the psychological therapies, then they will come to exist inside the reader’s head as well, where my hope is that they will come to stand for something approximating to the same phenomenon as they stand for in mine.
3.2.2 The scope for the utilisation of abstract research such as this research study

Another notion that has to be considered here – especially when people question the use of research that is as abstract as it is in this research study – is the subject of symbolic and conceptual utilisation. Writing about the findings of qualitative health research, Sandelowski points out that their use is often based on:

appeals to analytic or ideographic generalizability and transferability, or to transformative understanding: one that changes researchers, participants, and/or the way participants, problems, and events are viewed.

(Sandelowski, 2004, p. 1380)

Writing a little earlier in the same paper, she outlines the various ways in which different types of research may be of use.

*Symbolic utilization* is less visible and concrete [*than instrumental utilisation – Ed], as it entails no change per se but, rather, the use of research findings as a persuasive or political tool to legitimate a position or practice. Although its actionability resides largely in talk, symbolic utilization may be a precursor to instrumental utilization as a change in practice may ultimately result from this form of use. Conceptual utilization is the least tangible – and therefore the most dubious example of research utilization – as it entails no observable action at all but, rather, a change in the way users think about problems, persons, or events.

(Sandelowski, 2004, p. 1371 – emphasis of the opening two words features in original text)

I disagree with Sandelowski on this last point. To my way of thinking, rather than representing the *least* of anything, conceptual utilisation represents a *most important* tool for changing how we relate to things, or at least for checking that we really do want to continue with our present view of things. To equate change with merely observable action represents a crass way of conceptualising change. In my own clinical practice, I often introduce clients to the notion of change by suggesting that even if we were to review somebody’s situation and decide not to make any changes, this in itself represents change, for the decision to continue as one was before one reviewed things in itself constitutes change: a change from deciding to continue as before *without* having reviewed something to a decision to continue as before *after* having reviewed matters. This I call change.

Furthermore, as I have already said elsewhere (Gilmore, 2008), how we look at something as abstract as the practice of the psychological therapies may very well come to represent
just about all that we shall ever know about them during our own lifetime, or until our understanding of human brain functioning makes further considerable advances over its present state of knowledge. And even then, the psychological therapies will still retain a considerable abstract component to their practice, for the hermeneutic discourse could be considered to represent an abstract understanding, albeit of very many seemingly concrete situations. How we view ourselves and our lives can have a huge impact on how we lead those lived lives. This for me represents one of the fascinating aspects of the psychological therapies: they constitute a peculiar mix of both the concrete and the abstract. Indeed, it is when we are not clear whether we are expressing ourselves or our ideas in concrete or in abstract mode that therapy can at times go awry. “It is important to know when to be in agreement” as Romano-Lax once wrote (Romano-Lax, 2009, p. 382); well, twice, actually!

3.2.3 How the task at hand has shaped the research design and its methodology

Given that this piece of epistemological research has been designed to identify the main epistemological discourses by which their epistemological mechanism synthesises the data that is available to it, this seems likely to produce a more functional configuration of potentiality paradigm therapy than is customarily referenced by those theoretical allegiances that comprise its more structural counterpart. The research question that this poses, therefore, is to ascertain what work is actually being undertaken when potentiality paradigm therapy is practiced. This question – ‘What is actually going on in potentiality paradigm therapy?’ – is a question that is designed to identify the predominant discourses that are at work in this form of therapy. Once identified, I shall also want to try to produce an account of how these three central epistemological discourses operate to articulate the potentiality paradigm with reference to the practice of the psychological therapies.

What must be immediately apparent is that these are tasks that are unlikely to be aided by measurement, and nor are they likely to be found in the results of research studies, either; rather, they would seem to call for description and critical, analytic reflection. But the form of description that this calls for in the context of this research study is a form of description that is in sympathy with the overall epistemological task of configuring a more functional account of potentiality paradigm therapy. Therefore, it will need to be described in epistemological terms that articulate with the central research question of identifying the core epistemological discourses that are at work in potentiality paradigm therapy.
It can, I think, quite readily be appreciated that what I am proposing here is an account of
the practice of potentiality paradigm therapy that is composed of fairly broad brushstrokes.
This account will be concerned with the identification of epistemological discourses and
how they are configured so as to articulate the overarching potentiality paradigm with
reference to the practice of the psychological therapies. This would seem to call for little
in terms of measurement, but affords the assiduous researcher ample scope for description
that is in sympathy with the overall aims of the research study. Clifford Geertz’s seminal
work on thick description (Geertz, 1993a, 1993b) comes to mind here, and whilst it may be
a little premature to get into a detailed description of specific research methods at this
juncture, Geertz’s (1993a, 1993b) thick description is important here because of the way in
which it influences the nature of the type of data for which I shall be seeking in connection
with this piece of research. Geertz describes thick description as a tool or method that
anthropologists use when they are doing ethnography:

From one point of view, that of the textbook, doing ethnography is establishing
rapport, selecting informants, transcribing texts, taking genealogies, mapping
fields, keeping a diary, and so on. But it is not these things, techniques and
received procedures, that define the enterprise. What defines it is the kind of
intellectual effort it is: an elaborate venture in, to borrow a notion from Gilbert
Ryle, “thick description.”

(Geertz, 1993a, p. 6)

And so, even though I am not proposing to embark upon an auto-ethnographic research
study here, what I will need to be looking for, following on from Geertz’s lead, is data that
is sufficiently epistemologically rich (or possibly “thick” (after Geertz, 1993a, p. 6; 1993b)
in its description of the ways in which the potentiality paradigm is articulated with respect
to the practice of the psychological therapies. This need for epistemologically rich data
will in turn influence where I shall need to set about looking for my data, for I will need to
be looking in the sort of literature where such epistemologically thick descriptions are
likely to be found. I shall have more to say about such considerations (such as inclusion
and exclusion criteria) later on in this chapter, but for now it is worth noting that it is
considerations such as these that inform and shape the methodological structure of pieces
of research like this, such that all such considerations have to be blended together into a
coherent whole so that the research methods used articulate as helpfully as possible with
each other so as to answer the research question(s) being asked. This sense of blending
together just articulated suggests that the end results of my hermeneutic and
epistemological piece of research will in all probability need to be synthesised back into a
recognisable whole that articulates the potentiality paradigm with respect to the practice of the psychological therapies.

It would seem from the afore going that we are about to embark on a research study that will gather its data from the professional and the academic literature, and then attempt to code and to analyse this data so as to form some sort of impression of the core epistemological discourses that are at work in the articulation of the potentiality paradigm with respect to the practice of the psychological therapies. In a research study of this type, such extracts from the literature are likely to grow like a gathering snowball, or else to cascade down from one another as more literature is identified as potentially having something of relevance to say. Another descriptive term that may be applied to this research study is the term hermeneutic, in that it will be attempting to make sense out of the textual quotations that are extracted from the professional and academic literature that reflects the practice of potentiality paradigm therapy. All of this would seem to be pointing us towards research methods that are to rely upon the coding, analysis and interpretation of qualitative (textual) data rather than of any quantitative data, and would therefore seem to indicate a research study that is paradigmatically underpinned by the constructivist research paradigm – sometimes referred to as the interpretive paradigm – rather than by the positivist or the post-positivist research paradigms.

3.2.4 The paradigmatic assumptions that underpin the research design of this study

Before we go on to consider the paradigmatic orientation of this particular piece of research, it is important to understand what paradigms are and the role that they play in any consideration of the philosophical assumptions that underpin research. The notion of paradigms and the concept of normal science – themselves socially produced constructs – were first popularised in the 1960s by Thomas Kuhn (1962, 1970), who held that what he termed “normal science” comprised those forms of science that were widely accepted by the scientific community up until such a time that its precepts no longer adequately accounted for new discoveries, at which juncture what Kuhn terms a “revolution” occurred during the course of which the formerly accepted view of “normal science” was overturned to allow a newly emerging form of science to replace the old until the next revolution.
Generally speaking, a paradigm is comprised of various paradigmatic registers, amongst which the chief are *ontology* – the study of being or existence, or of the nature of reality and truth – *epistemology* – the study of knowledge, or how we know what we think we know, sometimes referred to as the relationship between the knower and the known – and *methodology* – the study of research design and the use of particular research methods (Crotty, 2003; Guba, 1990). Guba (1990, p. 18) sets out these terms as follows:

1. **Ontological**: What is the nature of the “knowable”? Or, what is the nature of “reality”?
2. **Epistemological**: What is the nature of the relationship between the knower (the enquirer) and the known (or knowable)?
3. **Methodological**: How should the enquirer go about finding out knowledge?

(Guba, 1990, p. 18)

This sequencing of paradigmatic components serves to illustrate how matters of ontology and epistemology influence and shape both our research design and the methodological mix that informs our decisions about the research methods that we eventually decide to employ. This comprises the main focus of this chapter: to provide an account of how I used the research methods that I did in this piece of research, and in particular, why I made the decisions that I did, taking into consideration the roles of ontology and epistemology in making those decisions.

I have already suggested that this research task articulates with the constructivist research paradigm (Bayer and Shotter, 1997; Gergen, 1994; Grodin and Lindlof, 1996; Kvale, 1992; Nencel and Pels, 1991; Riikonen and Smith, 1997; Semin and Gergen, 1990; and Simons, 1988) as theoretical issues – such as the epistemological discourses that I am investigating in this piece of research – are based upon constructs that are devised by humankind as it reflects upon its pursuit of its various endeavours. Neimeyer and Levitt have the following to say about those research methods that constitute constructivist research:

[A] research method might be classified as constructivist or social constructionist to the extent that it (a) elucidates ‘local’ as opposed to ‘universal’ meanings and practices, (b) focuses upon provisional rather than ‘essential’ patterns of meaning construction, (c) considers knowledge to be the production of social and personal processes of meaning-making, and (d) is more concerned with the viability or pragmatic utility of its application than with its validity *per se*.

(Neimeyer and Levitt, 2001, p. 2651)
This differs markedly from the positivist research paradigm, whose underlying logic was perhaps best outlined in 1935 by Karl Popper (2002b) and which is convened by devising a hypothesis that is open to refutation (Popper, 2002a), which is then put to the test in an experimental research design conducted under tightly controlled conditions through which the only permitted variable is the phenomenon under investigation. This paradigm is concerned with precise measurement of the objective phenomena and of the experimental reactions that it investigates. Guba (1990, p. 20) outlines the positivist paradigm in the following terms:

**Ontology:** *Realist* – reality exists “out there” and is driven by immutable natural laws and mechanisms. Knowledge of these entities, laws, and mechanisms is conventionally summarized in the form of time- and context-free generalizations. Some of these latter generalizations take the form of cause-effect laws.

**Epistemology:** *Dualist/objectivist* – it is both possible and essential for the inquirer to adopt a distant, noninteractive posture. Values and other biasing and confounding factors are thereby automatically excluded from influencing the outcomes.

**Methodology:** *Experimental/manipulative* – questions and / or hypotheses are stated in advance in propositional form and subjected to empirical tests (falsification) under carefully controlled conditions.

(Guba, 1990, p. 20)

The positivist research paradigm is based on the belief that reality exists in the form of immutable laws that are waiting to be discovered by humankind, rather like some kind of Higgs boson particle, and presumes no interaction on the part of the researcher with that which is being researched, other than through the discipline required tightly to control the experimental environment so that the researcher can contaminate neither the research situation nor its results. The most critical sense of agency on the part of the researcher is to hold the experimental reigns, as it were, of these highly controlled conditions under which the phenomenon being investigated is being put to empirical test, and then to observe and record the outcomes of such experimental testing. Guba and Lincoln express the assumptions of the positivist research paradigm in causal terms, as follows:

But such an approach [*the one adopted by the positivist research tradition – Ed*] implies a simplistic, causal, push-pull, mechanistic view of the world, rather than recognizing the shared responsibility and accountability implied by a “mutual simultaneous shaping” view of the world.

(Guba and Lincoln, 1989, p. 257)
That which Guba and Lincoln describe in the quotation immediately above as “a “mutual simultaneous shaping” view of the world” (Guba and Lincoln, 1989, p. 257) is what we should refer to today as either the social constructionist or constructivist research paradigm, which Guba (1990, p. 27) sets out in the following terms:

**Ontology:** *Relativist* – realities exist in the form of multiple mental constructions, socially and experientially based, local and specific, dependent for their form and content on the persons who hold them.

**Epistemology:** *Subjectivist* – inquirer and inquired into are fused into a single (monistic) entity. Findings are literally the creation of the process of interaction between the two.

**Methodology:** *Hermeneutic, dialectic* – individual constructions are elicited and refined hermeneutically, and compared and contrasted dialectically, with the aim of generating one (or a few) constructions on which there is substantial consensus.

(Guba, 1990, p. 27)

The constructivist research paradigm is characterised by a more dialectical or dialogical dynamic of interactions, whereby no one individual element of agency could necessarily be identified as bearing sole responsibility for any particular outcome [Guba and Lincoln’s “simplistic, causal, push-pull, mechanistic view” (1989, p. 257)], thereby eschewing the cause and effect logic that underpins the positivist research paradigm.

But even although it is the research *methods* that are qualitative rather than the methodology, many people still seem perfectly happy to refer to constructivist research as qualitative research, thereby drawing a distinction between this form of research and positivist research that usually revolves around precise forms of measurement whose results are often expressed in the form of tables of statistics. Guba and Lincoln also have something to say about this, as follows:

The single limitation that a constructivist, responsive, fourth generation evaluator would put on the use of quantitative methods is that no *causally inferential* statistics would be employed, since the causal linkages implied by such statistics are contrary to the position on causality that phenomenologically oriented and constructivist inquiry takes.

(Guba and Lincoln, 1989, p. 259)

In this passage, Guba and Lincoln are in effect making the same point as the one that they made previously (Guba and Lincoln, 1989, p. 257): namely, that it is the constructivist’s
position on *causality* that once again rules in favour of qualitative over quantitative research methods, because statistical measurement revolves around what they have referred to as implying . . .

[A] simplistic, causal, push-pull, mechanistic view of the world, rather than recognizing the shared responsibility and accountability implied by a “mutual simultaneous shaping” view of the world.

(Guba and Lincoln, 1989, p. 257)

Guba and Lincoln go on to describe how it is the meanings that we attach to our worlds that “are the stuff of a constructed reality.”

The point we wish to make is that it is not the physical reality of objects, contexts, and events that are of interest, either to us or to most human beings, it is the *meanings* we attach to them. Those meanings are the stuff of a constructed reality.

(Guba and Lincoln, 1989, p. 266)

The reason why the constructivist paradigm is called *constructivist* is because we each of us *construct* our own worlds. If we were all carpenters, then we could each of us construct the furniture that we would need. Although some of us undoubtedly have some carpentry skills, few of us actually construct our own furniture. What we do construct, however – *all* of us – are the meanings that we attach to our lived lives as we live them. It is these meanings which personalise our lived lives and make them unique to each of us, and it is in honour of our custom of constructing the meanings that we attach to our experiencing of our lived lives that the constructivist paradigm is called *constructivist*. In the sense that meanings are sometimes arrived at through interpretation, the constructivist paradigm is often referred to as the interpretive paradigm. Given the interpretive nature of the synthesis in which the qualitative meta-synthesis is designed to culminate, the interpretive paradigm seems to constitute a most apt alternative term by which to refer to the constructivist ontology of this highly representational and abstract piece of research.

Significantly, the constructivist paradigm is open to a plurality of belief systems, as opposed to the positivist research paradigm which is underpinned by the western scientific tradition (Popper, 2002b). Therefore, rather than the single objective reality whose uncovering is the quest of the positivist research paradigm, the constructivist research paradigm seeks out and investigates the multiple subjective ‘realities’ that are *constructed*
inside people’s heads – much like the way(s) in which the psychological therapies themselves operate (Gilmore, 2008) – with a view to achieving as thick a description (after Geertz, 1993a, 1993b) of them as may prove possible. Indeed, it is the constructivist research paradigm’s capacity to accommodate plurality that also commends it as being the research paradigm of choice to investigate our understanding and the practice of potentiality paradigm therapy, in as much as it would seem particularly well-suited to accommodating one of the most prevalent of recent trends in the practice of the psychological therapies: an increasingly dialogical nature, as documented below at subparagraph 4.3.17. In this paradigm, the inquirer and the inquired often merge into one joint enterprise and, much like the increasingly dialogical and dialectical nature of the practice of the psychological therapies these days, the findings of this species of research are generated by the relationship between these two research camps: the researcher and the researched. In terms of the methodology of constructivist research, a form of dialectic hermeneutics is at work by which individual constructions are studied until, through our analytic reading of them, we can discern conflicts, consensus or whatever else may be afoot!

3.3 The theoretical perspectives that inform this research study: interpretivism and hermeneutics

3.3.0 Overview

In this chapter, I propose to outline two important theoretical perspectives that inform and underpin this piece of research: the first more general theoretical perspective is usually referred to as interpretivism, and the second more specific theory is that of hermeneutics.
3.3.1 Interpretivism as the theoretical perspective that informs this research study

3.3.1.0 Introduction to interpretivism

Interpretivism is yet another of those social constructions about which we have spoken so much. Perhaps a more useful question to pose would be: What do we routinely mean when we invoke the term *interpretivism*? Let’s begin by looking at what we usually don’t mean.

3.3.1.1 What we do not routinely mean when we invoke the term *interpretivism*?

At first blush, it seems obvious that the term *interpretivism* derives either from the noun *interpretation* or else from the verb *to interpret*, and there is some truth in this observation; and yet, to leave matters here would be far too misleading. So let us begin our appreciation of the meaning of the term *interpretivism* by focussing on what we do not usually intend to convey when we invoke the term *interpretivism* in a research context.

When one engages in research that conforms to the Western scientific tradition that is underpinned by the positivist research paradigm, one invariably finds that the results of such research are described both linguistically and statistically. Well, this is what we do not usually mean to signify when we talk of *interpretivism*, and yet there is a sense in which we may suggest that interpretation of a kind has already taken place. Many may consider that, if there is any interpretation at all in positivist research, it takes place later in most publications when the results are discussed. But it is my contention that interpretation of a kind has already taken place once the research’s data have been analysed, for data analysis involves a reading of the data that has been gathered during the course of positivist research, albeit a reading that follows the data analytic conventions that are customarily associated with positivistic data analytic methods, usually arrived at statistically when measurement has taken place. So whether one is calculating Pearson’s product moment correlation coefficient (Bryman, 2016, p. 341) or Spearman’s rho (Bryman, 2016, p. 343), these are conventions that are designed to furnish a reading or a way of interpreting the data that has been arrived at by an analysis of the data generated by the research study. Therefore, data analysis equates to one form of interpretation.
It is probably fair to suggest that most scientists would be horrified at my use of the term *interpretation* here to describe the statistical outcomes of their research, especially given that the statistical procedures that lead them to their pages of statistical tables that pepper their research papers are so precisely configured. Although their objections would likely be based on their rather narrow understanding of the various uses to which the term *interpretation* may be put, the fact remains that both positivist scientists as well as social scientists are in effect attempting to achieve the same feat: we are all of us attempting to use data analytic mechanisms to reveal or to disclose relationships between the various phenomena that we are investigating. Writing about interpretivism, Crotty puts it thus:

> [P]ositivist science’s age-old claims to certitude and objectivity cannot be sustained . . . the findings of natural science are themselves social constructions and human interpretations, albeit a particular form of such constructions and interpretations.

(Crotty, 2003, p. 71)

As we have no wish unduly or unnecessarily to antagonise the scientists, however, we will not press the point further, but shall instead move on to a consideration of what we do routinely mean when we invoke the term *interpretivism*.

### 3.3.1.2 Then what do we routinely mean when we invoke the term *interpretivism*?

Notwithstanding the point made in subparagraph 3.3.1.1 (immediately above) about how any form of data analysis amounts to a form of interpretation of the results or the findings of a piece of research, this is not what we normally mean when we refer to *interpretivism*. No, when speaking of *interpretivism* within a research context, what we are usually speaking of is the philosophical worldview that suggests that the kind of understanding that we are after is likely to require an altogether different form of engagement with the phenomenon or phenomena under investigation than that which is typical of the positivist research paradigm, in which the researcher remains detached from the experimental variable, and whose role is to keep a firm hold of the tightly controlled laboratory conditions. Under the auspices of the interpretive research paradigm, the researcher will need to engage quite directly not only with the phenomena under investigation, but in some forms of research may be required also to investigate their own relationship to the phenomena under investigation. Of course, this calls for a high degree of reflexivity on the part of the interpretivist researcher.
Interpretivism is rooted in the human sciences generally and in philosophy more particularly. Interpretivism holds that people’s experiences are essentially contextually bound up with the time, geopolitical location and the mind of the human being who we would probably refer to as the actor in this interpretivist context (Holloway, 1997, p. 93). The German word Verstehen was used by Max Weber (1864-1920) to contrast the sense of understanding that he intended to convey by its use with the term explication or explanation that was conveyed by another German word, Erklären. This explicative approach was focused around the issue of causality, which underpins the positivist researcher’s need for prediction and control. Crotty (2003, p. 68) explains that

[T]he natural sciences are primarily concerned with the nomothetic and the human or social sciences primarily with the idiographic.

(Crotty, 2003, p. 68)

. . . where the term nomothetic represents a “search for law-like generalities or rule-following behaviour” (Holloway, 1997, p. 107), whilst its counterpart, idiographic, denotes an interest in researching the individual or the unique, “where lawlike generalities are not sought” (Holloway, 2003, p. 91).

Under the theoretical auspices of this interpretive worldview are subsumed research methodologies like symbolic interactionism, ethnomethodology and the phenomenological and hermeneutical approaches to research.

Additionally, it is also worth mentioning here that the phrase the interpretive paradigm is another way of referring to the social constructionist paradigm, which Morrow refers to as the “interpretivist-constructivist paradigm” (Morrow, 2007, p. 213), whose beliefs and assumptions Kelliher describes thus:

Interpretivists believe that reality is not objectively determined, but is socially constructed. The underlying assumption is that by placing people in their social contexts, there is greater opportunity to understand the perceptions they have of their own activities. By its nature, interpretivism promotes the value of qualitative data in pursuit of knowledge.

(Kelliher, 2005, p. 123)
Note how Kelliher (2005, p. 123) emphasises in this quotation how the ultimate goal of interpretivism is about achieving greater possibilities for understanding rather than being about the assumption of untrammelled latitude for making all manner of interpretations. Although the achievement of understanding obviously involves an element of interpretation along the way, its ultimate goal does not rest with the agency of interpreting other people’s perceptions or behaviour, but rather is directed towards the achievement of understanding the perceptions and behaviour of others. Interpretivism facilitates this form of inquiry by considering human beings in their social context, hence the term *social construction* for the name of this overarching paradigm. Crotty (2003, p. 67) writes that:

> The interpretivist approach . . . looks for culturally derived and historically situated interpretations of the social life-world.

(Crotty, 2003, p. 67 – all emphases feature in Crotty’s original text)

and most succinctly summarises the position advocated by Weber (1864-1920) as follows:

> Scientific experiments seek to know and explain (*Erkennen* or *Erklären*). Inquiry into human affairs seeks to understand (*Verstehen*).

(Crotty, 2003, p. 94 – all emphases feature in Crotty’s original text)

So does this mean that all research that relies upon qualitative research methods similarly relies upon the philosophical worldview of interpretivism to undergird its assumptions? Well, no, not necessarily; other philosophical positions have been advanced as alternative theoretical underpinnings to interpretivism, one of them being pragmatism, as discussed by Goldkuhl (2012). It is important therefore to appreciate that the term *interpretivism* is not to be regarded as a synonym for constructivism, or for research that relies upon qualitative research methods, as Goldkuhl remarks:

One important discussion concerning QRIS [*qualitative research into information systems* – *Ed*] is whether qualitative research is equal to interpretive, as this has sometimes been considered the case. Trauth (2001, p. 7) states that ‘interpretivism is the lens most frequently influencing the choice of qualitative methods’. There are, however, some reservations to make against such views. Myers & Avison (2002, p. 5) write ‘It should be clear from above that the word ‘qualitative’ is not [*a* - *Ed*] synonym for ‘interpretive’. Qualitative research may or may not be interpretive, depending on the underlying philosophical assumptions of the researcher’.

(Goldkuhl, 2012, pp. 135-136)
Even this short passage throws up two considerations that need to be addressed. First, Goldkuhl is right to articulate in the last sentence of this passage the significance of the theoretical underpinnings of our research methodologies: they are not the methodologies themselves, but they represent the philosophical systems that account for the theoretical assumptions that would need to be made in order to accord with the corresponding research methodologies. Second, I would criticise Goldkuhl (amongst many other researchers) for his use of the expression “qualitative research” (Goldkuhl, 2012, p. 135) in the above passage, for it is neither the research itself that is qualitative, nor the various research methodologies; rather, it is the research methods that may be considered to be classified as qualitative, as suggested by the passage of Trauth (2001, p. 7) that Goldkuhl quotes in this passage. This is why, if I consider it important to refer to research by using the word ‘qualitative’ at all, I use the expression ‘research that relies upon qualitative research methods,’ for using the expression ‘qualitative research’ is simply lazy writing that encourages sloppy thinking, and neither have any place in research.

3.3.2 Hermeneutics as a further theoretical perspective that informs this research

There are two reasons why hermeneutics is important to this research study: first, because I am using quotations from the professional and the academic literature as the data for this piece of research, and second, because of the highly interpretive nature of the interpretive synthesis in which this qualitative meta-synthesis will culminate at the beginning of the fifth chapter, below. So what do we mean when we refer to hermeneutics, then?

The term hermeneutics derives from the Greek word hermeneuein, meaning to understand or to interpret. In Greek mythology, the fleet-footed god Hermes – whose fleet-footedness was attributed to the ‘fact’ (in such a mythical context!) that he had wings on his feet – was tasked with the job of explaining the decisions of the gods to human beings. Straightaway, we can begin to gain some impression as to where understanding and interpretation sit side-by-side in this fable. Initially, hermeneutics owes its origins variously to Greek, Christian and Jewish cultures wherein hermeneutics was considered essential for the interpretation of biblical texts. Hermeneutics was therefore a constituent element in theological training, whereby those studying for holy orders studied the science of hermeneutics in order to arrive at their exegeses (explanations) of scriptural texts.
Crotty (2003, p. 92ff.) gives an account of how Friedrich Ast (1778-1841) and Friedrich Schleiermacher (1768-1834) were amongst the first hermeneuticists to envision the application of hermeneutics to a world beyond biblical exegesis, and how Schleiermacher in particular set about codifying a set of principles for the sympathetic understanding of texts more generally through having recourse to a form of empathy that involved putting oneself in the position of the speaker or writer and thereby being the better able to understand that which they had intended to convey. By dint of this psychological process of empathic listening, as well as through developing the linguistic capacity to devise an enhanced and sophisticated familiarity of the language and idioms employed by the speaker or writer, Schleiermacher’s achievement was to be able not only to understand what the speaker or writer had been trying to convey, but also by the familiarity of his cultural understanding of the times in which the speaker had been speaking, could also form an understanding of the assumptions that the speaker or writer would have been making, and which would similarly have been evident to the contemporary audience of the day.

Like Schleiermacher before him, the German historian, psychologist, sociologist and hermeneutic philosopher, Wilhelm Dilthey (1833-1911), was also a professor at the University of Berlin, and was to Schleiermacher what Mendelssohn was to JS Bach: a revivalist. Dilthey emphasised the historical nature of humankind, and believed most strongly that this sense of historical embeddedness should inform our understanding of what he termed Geisteswissenschaften, or the ‘sciences of the spirit, as he sometimes referred to it.’ He also believed that, whilst his was still an objective form of knowledge that he sought about human beings, research methods other than the positivist methods of the day were needed properly to research what we have come to know today as the social sciences. Crotty (2003, p. 95) represents Dilthey’s views on historical boundedness in the following terms:

The historically derived worldview of authors constrains what they are able to produce and cannot be discounted in hermeneutical endeavours.

(Crotty, 2003, p. 95)

The psychological approach of Schleiermacher’s empathy came to be replaced by the cultural analysis of Dilthey’s more sociologically informed approach. Dilthey’s use of the expression the hermeneutic circle is one in which . . .
[t]he interpreter moves from the text to the historical and social circumstances of the author, attempting to reconstruct the world in which the text came to be and to situate the text within it – and back again.

. . . Dilthey believes (that) objectivity and validity can be increasingly achieved as more comes to be learned about the author and the author’s world, and as the interpreter’s own beliefs and values are given less play.

(Crotty, 2003, p. 95)

This reference to historical and contextual learning coupled with the sense of discipline that lies behind Dilthey’s restraint on the exercise of “the interpreter’s own beliefs and values” (Crotty, 2003, p. 95) is suggestive of a degree of scholarship that enabled hermeneutics to be recognised as a constituent element of what came to be known as the social sciences.

Martin Heidegger (1889-1976) was a philosopher in the phenomenological tradition, for whom philosophy was all about ontology, and ontology was all about phenomenology (Crotty, 2003, p. 96). He was preoccupied with getting right down to the roots of our understanding of being, and the technique that he advocated for this was to attempt as best we could to rid ourselves of our cultural understandings – so, then, an opposite direction of travel from that of Dilthey – of those phenomena that we sought to investigate. In fact, he taught that what we would need to do would be to rid ourselves of our tendency to interpret that which we experienced in favour of an evenly hovering attention – were such a thing possible – such that, having ‘bracketed’ (this being his term for setting to one side) our culturally realised associations with our experiencing, we would then be able to experience the phenomenon under investigation just as it was, free from our own and society’s interpretations and understandings about it. Furthermore, if we could do this for everything in our lived lives, we should then be able to experience our very existence – our very being, which he termed Dasein, as in being-there, or, as he referred to one mode of Dasein, being-in-the-world – for exactly what it was. Heidegger’s most influential book was *Being and Time* (Heidegger, 1962).

Hans-Georg Gadamer (1900-2002) took a somewhat different view of what Heidegger considered prejudice, from which the serious investigator would need to protect her- or himself by bracketing off their existing views of those things they were investigating. Gadamer, whose most influential book was *Truth and Method* (Gadamer, 1989), took the view that if prejudice could prejudice us against something, then it could also prejudice us
in favour of something. In fact, he suggested that it was our prejudices (pre-judgements), which he termed our fore-structures, that were what allowed us to understand or to interpret matters by virtue of our anticipatory structures that gave us what he termed our *anticipation of completeness*, whereby former pre-judgements were always open to being revisited and revised. Gadamer also suggested that our capacity for understanding matters pertaining to the outside world would be increased if we were to be able to increase the level of our own self-understanding, a principle that he shared with the psychotherapists of today. He considered such understandings to represent an essentially linguistic form of endeavour, as language, in addition to being through whose use is how we communicate with the outside world and the people who populate it, also defined our very existence in the world. He saw understanding as a lifelong process of learning which was not designed to arrive at any point whereby the individual could claim that their understanding was complete. Thus he adopted the position that there was no method that could lead to understanding, because this constituted a goal that could never be reached (Malpas, 2015).

That form of hermeneutics that seems originally to have been bound up in the study of religious tracts and other texts has today transformed itself into the science of hermeneutics that has spread its remit to refer to virtually any act of agency whereby an actor plays a part in some form of social transaction, although it comes into its own in what Gadamer would have called ‘languaged’ intercourse, if only because language allows for relatively easy analysis. Traditionally, hermeneutics has come to be understood as comprising a contextually bound understanding of a particular discourse, whereby each individual element is best apprehended when understood within the wider context of the discipline under which it falls. This is what hermeneuticists understand as entering the hermeneutic circle (Packer and Addison, 1989a), wherein the individual is understood within the context of the whole, and the whole is understood in terms of its constituent parts. Crotty puts it thus:

[T]o see hermeneutics as a sharing of meaning between communities or individuals is to situate hermeneutics within history and within culture.

(Crotty, 2003, p. 91)

Given this description of Crotty’s, it is easy to see how hermeneutics has come to be so closely associated with language, which is where so much of our sense of meaning is acculturated.
Self-evidently, hermeneutics comes into play in the understanding that I am creating in this piece of research when I select certain quotations and where to place them within the text of the present research study. Koch has the following to say about how hermeneutics works in the dialogue “between researcher and text” (Koch, 2006, p. 92):

One of the basic tenets of philosophical hermeneutics is that a dialogue takes place between researcher and text, or reader and interpretations, acknowledging that the researcher and reader bring to the analysis her or his own preconceptions. The themes emerging from the text are not always the same for researchers and readers because perfect agreement when analysing the same material would not be expected. Readers may not share the author’s interpretation but they should be able to follow the way in which the author came to it.

(Koch, 2006, p. 92)

In response to Koch’s eminently sensible criteria, my commentaries on the texts that I use in this manner constitute my interpretations of their significance in terms of the present piece of research, and the nature of the research study itself represents the context against which the significance of my interpretations are to be seen and judged. One of the greatest attributes that will have contributed towards the trustworthiness of me qua researcher, and hence also towards the rigour of this research study, is the conscientiousness with which I have referenced all quotations cited, and the transparency with which I have shown the reader how I have arrived at the various analyses of the data that I have referred to in this piece of research.

In connection with my aim of achieving methodological and analytic transparency in respect of this piece of research, it is worth noting the following reservation expressed by Dixon-Woods, Cavers, Agarwal, Annandale, Arthur, Harvey, Hsu, Katbamna, Olsen, Smith, Riley and Sutton (2006) about transparency in the context of research that relies upon qualitative research methods conducted within the interpretive paradigm:

[I]t is important to note that, as with any qualitative analysis, full transparency is not possible because of the creative, interpretive processes involved.

Nonetheless, I have done my best to account for all of the decisions that I have made with respect to the implementation of those research methods that I have employed within this piece of research.

My addition of the criteria that my interpretive synthesis should equally demonstrate that its conclusions have emanated from my analysis of the data has also contributed to the trustworthiness of me as a researcher who has navigated the research terrain in a responsible manner. Nevertheless, it will still be important that the interpretive synthesis in which my qualitative meta-synthesis culminates is one that is couched in terms that will have meaning for those engaged either in research into or in the practice of the psychological therapies. Without the resonance created by such meanings, my research would constitute little more than an academic exercise, and so in this sense it will be important that the terms of my interpretive synthesis are chosen with due regard to this requirement. The sense of creativity stipulated by Moustakas’s term creative synthesis as in the sixth and final phase of his heuristic research cycle will help towards creating this sense of resonance and its concomitant meaning(s) of my resultant interpretive synthesis, which is to be found at paragraph 5.1, below.

3.3.3 Conclusion to the theoretical perspectives that inform this research study

This piece of research is essentially, then, at once a hermeneutic research study as well as an epistemological piece of work, for once one strips away the psychotherapeutic theories with which we psychological therapists have seemingly become so comfortable in recent years, and replaced them with textual quotations from the professional and the academic literature, one is left with an understanding or an account of the functions that are attended to and utilized in the practice of the psychological therapies. It is these central functions that have become the epistemological discourses within which is subsumed my configuration of potentiality paradigm therapy: the experiential, the relational and the hermeneutic discourses. The data corpus of this research study is comprised of the numerous texts that I have studied and from which I have quoted in this thesis to circumscribe these three epistemological discourses, but the guiding ethos that is at once interpretive and hermeneutic is the one that underpins the research methods utilised in this piece of research.
3.4 Overarching research design: an iterative, recursive or abductive research study leading to a qualitative meta-synthesis

3.4.0 Overview

In this paragraph I want to outline the nature of this research study’s research design – variously referred to as iterative, recursive or abductive – before going on to document the overarching research design itself: that of a qualitative meta-synthesis.

3.4.1 Overarching research design: an iterative, recursive or abductive design

Positivist research usually adopts a hypothesis-testing approach that is underpinned by deductive reasoning, whereby data is gathered, analysed and then a research hypothesis is tested by having recourse to the results of the analysed data, and then finally the conclusions of the research are deduced there from. Constructivist research often begins inductively by discerning the meaning of whatever data has thus far been gathered, only to switch over the a deductive form of reasoning later on once the researcher has something that they can put to the test. This form of research that alternates between induction and deduction is variously termed iterative, recursive or abductive research, as Morrow (2007, p. 215) explains.

As opposed to the deductive, hypothesis-testing approach of quantitative research, qualitative inquiry begins with research questions instead of hypotheses. The research questions lead to particular data-gathering strategies; and, as data accrue, the analytic strategy begins inductively as the researcher works to understand the meanings of participants. As themes and categories emerge, they are tested deductively by comparing and contrasting them with existing and new data. This alternating cycle of induction and deduction is termed iterative, recursive, or abductive.

(Morrow, 2007, p. 215)

This is indeed the case with this piece of research, whereby data was sought initially surrounding potentiality paradigm therapy (an inductive approach), and once the three discourses of the experiential, relational and hermeneutic domains had become established as recognisable themes in my data, I then sought to substantiate their existence and to
explicate the role that they played in our understanding and in the practice of potentiality paradigm therapy (a deductive approach).

3.4.2 Overarching research design: a qualitative meta-synthesis

It should be clear from a reading of this chapter so far that this research study represents an abstract piece of research that is devoid of any contact with clients, therapists and their clinical work. I am interested in the way(s) in which the theoretical structures that circumscribe potentiality paradigm therapy are configured, and especially in how they may be reconfigured in a more functional as opposed to a more structural manner (after Mearns and Thorne (2000), as explicated above in paragraphs 1.4 and 2.4). Although this research study leads us to an articulation of the epistemology of potentiality paradigm therapy, I am not proposing the kind of philosophical investigation into beliefs, justification, knowledge, et alia, such as outlined by epistemologists like Audi (2011); rather, I am using the term epistemology to imply that the nature of the three discourses that feature in this piece of research – the experiential, the relational and the hermeneutic – may be viewed as constituting epistemological discourses in so much as they inform us as to the precise nature of what it is that actually helps bring about client change in the conduct of potentiality paradigm therapy.

Given that this is not something about which I would be likely to find out very much through any form of research that set about trying to measure epistemology, it soon became clear to me that I should need to devise a research design that relied upon thick description (after Geertz, 1993a, 1993b) about the nature of this epistemology and how it worked or articulated the potentiality paradigm within the context of our understanding of and within the practice of the psychological therapies. This insight in turn led me to the realisation that I was likely to be embarking upon a textually-based piece of epistemological research, as I considered that the best way to study this topic would be by having recourse to the professional and the academic literature, which is what some academics would refer to as a ‘secondary sources’ research study, whilst others would call it a ‘library’ study, and still others a ‘desk-based’ study.

Stiles points out that this form of research study is by no means the most economical in terms of wordage:
Because verbal data cannot be averaged, data reduction in qualitative research is typically done by summaries and excerpts from a text. Inevitably, this is less compact than aggregation of numeric data. Authors usually select good examples [in which – Ed] to ground their interpretations, but they imply that other passages could have been selected to make the same points.

(Stiles, 1993, p. 595)

And indeed, this is very much the case with this piece of research too. Given that my aim constitutes a reconfiguration of the paradigmatic and theoretic structures that underpin potentiality paradigm therapy, and given that my data is to comprise quotations from various elements of the professional and academic literature relating to the practice of potentiality paradigm therapy, the overarching design of this piece of research takes the form of a qualitative meta-synthesis, whereby various accounts of the functional and epistemological workings of potentiality paradigm therapy will be explored by comparing and synthesising the data gleaned from the various quotations assembled and selected from the literature. It is the need for a reconfiguration of these paradigmatic and theoretic structures into more functional forms that requires the form of interpretive synthesis that constitutes the end product of the qualitative meta-synthesis and the creative synthesis that constitutes the sixth and final phase of the heuristic research method devised by Moustakas (1990) and outlined in subparagraph 3.5.3, below.

And speaking of creativity, which of course we are when we come to consider the interpretive and creative synthesis in which the qualitative meta-synthesis culminates, Audi also has something to say about “[t]he essential place of imagination in developing scientific knowledge” (Audi, 2011, p. 301).

Scientific knowledge . . . [n]ormally . . . emerges only through using imagination, both in formulating questions and in framing hypotheses to answer them.

(Audi, 2011, p. 300)

Indeed, it is this requirement for a synthesis that constitutes one of the characteristics that distinguishes a qualitative meta-synthesis from a quantitative meta-analysis. In some respects, this comparison could be viewed as suggesting that the qualitative meta-synthesis be considered as constituting the interpretive paradigm’s equivalent of the quantitative meta-analysis, the latter of whose main function is to aggregate the results of several research studies that have relied upon quantitative research methods underpinned by the
positivist research paradigm. This is what Cronin, Ryan and Coughlan have to say about this comparison between a quantitative meta-analysis and a qualitative meta-synthesis.

Unlike meta-analysis, where the ultimate intention is to reduce findings, meta-synthesis involves analysing and synthesizing key elements in each study, with the aim of transforming individual findings into new conceptualizations and interpretations.

(Cronin, Ryan and Coughlin, 2008, p. 39)

Another comparison between a quantitative meta-analysis and what some used to call qualitative meta-ethnography, but which most tend these days to refer to as a qualitative meta-synthesis, is illustrated by Doyle in the following terms:

Like meta-analysis, meta-ethnography utilizes multiple empirical studies but, unlike meta-analysis, the sample is purposive rather than exhaustive because the purpose is interpretive explanation and not prediction. Meta-ethnographers reconceptualize new interpretations for the collective that may differ remarkably from the component parts.

(Doyle, 2003, pp. 325-326)

Here, Doyle is pointing out that one really important difference between these two forms of study is due to the different purposes for which they are designed, but there are of course other differences as well. Whilst the qualitative meta-synthesis is designed to offer “interpretive explanations” of the subject under scrutiny, quantitative meta-analyses are designed to offer predictions that are more aligned to the positivist and post-positivist research paradigms. This much more interpretive flavour of the qualitative meta-synthesis is extremely important, not only to distinguish it from the quantitative meta-analysis, but also to the intrinsic value of the qualitative meta-synthesis itself, as we shall come to discern from many of the following quotations. Noblit and Hare, for example, “argue that a meta-ethnography should be interpretive rather than aggregative” (Noblit and Hare, 1988, p. 11).

A meta-ethnography synthesizes the substance of qualitative research, while meta-analysis synthesizes the data. It is helpful to think of a meta-ethnography as any interpretive study.

(Noblit and Hare, 1988, p. 81)
And so, just as we saw earlier (at subparagraph 3.2.3, above) how Geertz’s (1993a, p. 6; 1993b) thick description emanates from ethnography, so too it now turns out does the qualitative meta-synthesis, deriving in the first instance from Noblit and Hare’s seminal work on ethnography (Noblit and Hare, 1988), which focuses on synthesizing qualitative studies in what they then termed “meta-ethnography.” However, their meta-ethnographic method has since been expanded to include qualitative research studies and theoretical accounts more widely, and is these days usually referred to as qualitative a meta-synthesis.

Before going on to consider how the qualitative meta-synthesis has evolved, I want to return to the other differences to which I briefly referred above. If we look back to the quotation of Doyle’s (2003, pp. 325-326), we may see that Doyle is here talking about “empirical studies” (Doyle, 2003, p. 326) as constituting the staple diet of her meta-ethnographies, whereas I am looking to review the theoretical writings of potentiality paradigm theorists in search of quotations about the epistemological foundations of potentiality paradigm therapy – not research studies at all! This is because I have been quite unable to identify any research studies that would yield the thick descriptions that I need. Because I shall need to find data that is as epistemologically rich as possible, I shall need to seek this epistemologically rich data in the theoretical writings of potentiality paradigm’s leading theorists rather than in research studies. However, I acknowledge that, instead of this, quantitative meta-analyses would aggregate the results of research studies.

The other point worth noting from Doyle’s (2003, pp. 325-326) quotation is that, because “the sample is purposive rather than exhaustive because the purpose is interpretive explanation and not prediction,” an exhaustive sample is not required. Whilst a quantitative meta-analysis would be expected to aggregate the results of all the research that is available in the area being investigated, what I shall be seeking for my qualitative meta-synthesis is a sample drawn from the professional and academic literature that reflects the general consensus that has been established amongst leading potentiality paradigm theorists. Inclusion and exclusion criteria will be discussed later in this chapter.

To consider for a moment from whence the qualitative meta-synthesis may have emerged, it is probably true to suggest that such a straightforward agreement as to the interpretive nature of synthesis as exists today has not always been so uniformly understood by researchers of all persuasions. Writing about synthesis – the precursor to the qualitative
meta-synthesis – Doyle cites theorists who adhere more to the aggregative camp, such as Krathwohl (1997) and Ward and Reid (1983), who have tended to view syntheses as . . .

’a process for accumulating knowledge relevant to a given topic, question, or issue and for showing interrelationships among the pieces of knowledge and the question or issue’ (Ward and Reed, 1983, p. 11). Others ascribe a more interpretative component to synthesis (Eisenhart, 1998; Noblit and Hare, 1988; Strike and Posner, 1983). Each step in the interpretive process ‘involves an increase in unity or integration of material . . . [and] some degree of conceptual innovation or the invention or employment of concepts not found in the characterization of the parts as means of creating wholes’ (Strike and Posner, 1983, p. 346). Although synthesis is typically perceived as an accumulative process as Ward and Reed described, this is at a lower level than a conceptually innovative one. To Strike and Posner (1983), a synthesis with a high level of conceptual innovation would be more useful than one with a lower level, even if the additive results were high.

(Doyle, 2003, p. 322)

So what we have in the afore-going passage is Doyle setting out a hierarchy of the genus synthesis, whereby the more “accumulative” or aggregative species of this genus are set at the lower end of the usefulness spectrum, whilst the more “conceptually innovative” or interpretive species are set at the higher end of the usefulness spectrum of this genus.

All this reading about qualitative meta-synthesis generally, and these references to synthesis more particularly, had the effect of making me want to look in a little more detail at the works that Doyle cited in the previous quotation in an effort to understand a little better from whence the qualitative meta-synthesis had emanated. Even Ward and Reed (1983), who Doyle cites as subscribing to synthesis as comprising “an accumulative process,’’ still make mention of interpretation, as the following quotation attests:

The process for moving from research reports to a consolidation and integration of the findings can be called synthesis. The process for moving from the synthesis outcome to products that are useful to various groups of practitioners can be called interpretation. In many cases, a clear intermediary synthesis product does not exist, so synthesis/interpretation, as used by Roberts, would be a more accurate term. In some chapters [of the volume edited by Ward and Reed (1983), and to which the chapter from which I am here quoting serves as an introduction – Ed], authors differentiate synthesis and interpretation or refer to synthesis done for researchers or for practitioners; more frequently, synthesis is used to refer to any combination of synthesis and interpretation or to synthesis alone.

(Ward and Reed, 1983, p. 12 – those emphases that lie outside of the editorial square brackets feature in Reed and Ward’s original text)
What Ward and Reed are telling us here is that, although the early syntheses often needed to be interpreted before they could be applied to practitioners’ work, et alia, it seems that nowadays the interpretive element is often included in the synthesis itself, as it most certainly is by the time that we come to talk of the qualitative meta-syntheses that we shall encounter later.

But what of Strike and Posner’s (1983) position on all of this, for their work was also cited by Doyle (2003, p. 322)? They also make the point that a simple “collection or “assemblage”” (Strike and Posner, 1983, p. 346) is insufficient to merit the term synthesis. By the time that one has achieved an increase in the levels of “unity or integration of (the) material” (Strike and Posner, 1983, p. 346), we have very probably earned the legitimate use of the term integration, whereby various diverse elements of the material have become amalgamated: “Here the conceptual integration is high” (Strike and Posner, 1983, p. 346). The assiduous reader will note that we have now added another dimension to our integration at this juncture: that our integration now operates at a conceptual level. This is what Strike and Posner go on to say about this aspect of the process:

Synthesis is usually held to be an activity or the product of activity where some set of parts is combined or integrated into a whole. When synthesis is an intellectual activity, it requires combining intellectual parts into an intellectual whole. This is the process of integration.

This characterization of synthesis has the disadvantage of excessive breadth. Most intellectual activities involve some degree of integration or some move from part to whole. It is unclear what such a view of synthesis would exclude.

(Strike and Posner, 1983, p. 346)

. . . probably because it would exclude very little indeed! But Strike and Posner (1983, p. 346) continue in a more helpful vein, thus:

Synthesis has a second noteworthy property. It involves some degree of conceptual innovation, or the invention or employment of concepts not found in the characterization of the parts as means of creating the whole.

(Strike and Posner, 1983, p. 346 – emphases features in Strike and Posner’s original text)

And it is this sense of innovation or invention that gives an added value that qualifies what would otherwise have remained at the level of integration to be considered to represent a synthesis. Strike and Posner then go on to give an example of lower and higher levels of
conceptual innovation, which basically suggests that simply spotting a common denominator running throughout one’s material would qualify only as a fairly low level of innovation, but where making a link between such an observation and a concept that has not hitherto featured in one’s observation(s) would qualify as a higher level of conceptual innovation.

Strike and Posner then go on to offer us the following definition:

The relation between conceptual innovation and synthesis can be defined as follows: Among the class of intellectual activities or products where parts are combined into wholes, those cases which are higher in conceptual innovation are more central to synthesis than those which are low on conceptual innovation.

This statement expresses two ideas. The first is that the notion of combining parts into a unified whole is essential to the concept of synthesis. Any intellectual activity which exhibits this property can be plausibly characterized as synthesis. Second, however, among cases of synthesis, activities or achievements which are high on conceptual innovation seem to be clearer cases. The discovery of a grand new scientific theory or the creation of a new philosophy which integrates diverse phenomena into a unified view seem [sic] to represent synthesis most clearly. It can be argued that generalizing over a few cases is also an act of synthesis, but not a paradigmatic case, nor an act central to the concept. The relevant difference seems to be the degree of conceptual innovation involved. Thus it is reasonable to say that synthesis is the act of unifying intellectual parts into a coherent intellectual whole, but that cases of synthesis involving a high degree of conceptual innovation lie at the centre of the concept.


My own reading of this last paragraph of Strike and Posner’s is that, whilst the “combining of parts into a unified whole is essential to the concept of synthesis” (Strike and Posner, 1983, p. 347), it is not in itself sufficient to qualify for the term synthesis. Rather, I take the view that the “combining of parts into a unified whole” is sufficient to qualify only for the term integration. My view is that in order to qualify at all for the term synthesis, there has to be some kind of transformative end product that adds something new, usually by making reference to a concept that did not feature in the former, unsynthesised but merely integrated material. I view this distinction as constituting a qualitative distinction, whereas the degree of innovation referred to by Strike and Posner represents a quantitative distinction: “The relevant difference seems to be the degree of conceptual innovation involved” (Strike and Posner, 1983, p. 347). I have already expressed elsewhere (Gilmore, 1986) my preference for qualitative distinctions, as I find them more distinctive than quantitative distinctions, and distinctiveness is surely what is required in such distinctions.
Barely a year later, however, and writing under the subheading “Extending Meta-
Analysis,” Louise Jensen is quite clear that by the time that we come to be considering
qualitative meta-synthesis, the “simple accumulative logic or averaging across studies”
(Thorne, Jensen, Kearney, Noblit and Sandelowski, 2004, p. 1346) is a wholly inadequate
basis for a research method to qualify for the label qualitative meta-synthesis:

In qualitative health research, we have come to understand that metasynthesis must
be quite different from simple accumulative logic or averaging across studies. The
goal is clearly interpretive, not mere aggregation to achieve unity; it is not a
summary portraying the lowest common denominator. Metasynthesis is not a
method designed to produce an oversimplification; rather, it is one in which
differences are retained and complexity enlightened. The goal is to achieve more,
not less. . . . The key characteristic of a metasynthesis is the transformation of this
new conceptualization. . . . Metasynthesis is a method inherently designed to
facilitate knowledge development. As such, it can be understood as a form of
discourse that contributes to a fuller understanding of the phenomenon of interest.
Particularities are retained, and the reconstruction enhances the complexity. It
might therefore be considered a deconstruction for the purpose of restructuring an
order from which to operate. In this way, metasynthesis functions as a translation,
a means to grasp the particulars within the wholes.

(Thorne, Jensen, Kearney, Noblit and Sandelowski, 2004, p. 1346)

These authors are making some important points about qualitative meta-syntheses in a
relatively short extract, albeit one that I have further compacted for reasons of space and
conciseness of expression. They are telling us first that a qualitative meta-synthesis
eschews the aggregation that is the hallmark of the quantitative meta-analysis in favour of
a synthesis that is not a zero sum game, for this would surely represent one of the forms of
oversimplification that these authors are advising us to avoid. In fact, rather than
oversimplifying by reducing everything to its “lowest common denominator,” a qualitative
meta-synthesis aims for the creation of the more complex picture – “more, not less” – that
represents not only the synthesising element of the qualitative meta-synthesis, but also the
sixth and final phase of Moustakas’s heuristic research cycle, which he termed a “creative
synthesis” (Moustakas, 1990) and which I have outlined at subparagraph 3.5.3, below.
Perhaps most significantly, these authors remind us that the compilation of a qualitative
meta-synthesis requires an interpretive element, without which it would stand no chance of
achieving the “transformation” of the original data into a “new conceptualization” (Thorne,
Just a dozen pages later, and whilst contrasting “qualitative meta-syntheses” with “qualitative metasummaries,” Thorne, Jensen, Kearney, Noblit and Sandelowski further reinforce the distinctive qualities of qualitative meta-syntheses as constituting “more than the sum of parts, in that they offer novel interpretations of findings.”

Metasyntheses are integrations that are more than the sum of parts, in that they offer novel interpretations of findings. These interpretations will not be found in any one research report but, rather, are inferences derived from taking all of the reports in a sample as a whole.

(Thorne, Jensen, Kearney, Noblit and Sandelowski, 2004, p. 1358)

Furthermore, this widening of its appeal has also been extended to embrace theoretical accounts that are not in themselves the direct product of a research study, as is the case in the present piece of research.

To our way of thinking, the synthesis of qualitative research should be as interpretive as any ethnographic account.

(Noblit and Hare, 1988, p. 11)

Note the use of the term “account” here by those often considered to be the ‘founding fathers’ of the qualitative meta-synthesis, Noblit and Hare; and once again, as follows:

We refer to the texts of studies . . . as accounts, studies, and ethnographies.

(Noblit and Hare, 1988, p. 13)

Zimmer also writes of ‘accounts’ as falling within the purview of the qualitative meta-synthesis, whether or not emanating directly from research studies, and also of their “epistemological intent,” as follows:

The salient elements in the procedures for qualitative meta-synthesis described earlier entail the bringing of numerous interpretive accounts into coherence with consideration for language, context, time, contradiction, and epistemological intent.

(Zimmer, 2006, p. 316)

So I am taking these last three quotations to suggest that a tradition has been established whereby theoretical accounts may be subjected to a qualitative meta-synthesis irrespective
of whether or not these accounts have emerged directly from any particular piece of research. Zimmer’s reference to “epistemological intent” is something that I also find encouraging for my purposes, especially given the epistemological nature of this research study into potentiality paradigm therapy’s three principle epistemological discourses.

One of the other points made by Zimmer is that a “[q]ualitative meta-synthesis is useful in mid-range theory development” (Zimmer, 2006, p. 317). To flesh this point out in a little more detail, she writes as follows, frequently quoting from Schreiber et al (1997, p. 315) within single inverted commas:

Schreiber et al. (1997, p. 315) specify three theory-related purposes for meta-synthesis. The first is theory building, where findings from diverse sources can be used to ‘push the level of theory beyond the level possible using data from only one sample’. The second is theory explication, a ‘lateral and deductive, analytic’ process where an abstract concept in one study is filled out through synthesis of findings from other studies. Theoretical development is the third, and refers to the synthesis of findings into a product that is ‘thickly descriptive, and comprehensive’ and thus more complete than any of the constituent studies alone. These authors also propose that any of these three purposes can be ‘complementary or overlapping’ (p. 315). Similarly, Paterson et al. (2001) state that the primary goal of qualitative meta-synthesis is mid-range theory and/or theoretical framework development.

(Zimmer, 2006, pp. 313-314)

This I also find encouraging for my purposes, as my objective in this piece of research is first, to build a composite picture of the main epistemological discourses that underpin the practice of those of the psychological therapies that are subsumed under the aegis of the potentiality paradigm, before going on next to explore the nature of their articulation of the potentiality paradigm with especial reference to the practice of the psychological therapies.

Jungwoo Lee also commends the qualitative meta-synthesis because of its potential to be used as “an exploratory research method.”

[I]t is known to be an exploratory research method designed to build or extract a common frame of reference from qualitative research results.

(Lee, 2010, p. 221)
Additionally, there are grounds for believing that a qualitative meta-synthesis constitutes a research method of choice because of the parallel process that it articulates with human growth as articulated by the potentiality paradigm, as the following quotation illustrates:

People in this view are thus dynamic systems attempting to maintain the coherence of their organizing processes by continuous synthesis and restructuring. The person grows toward greater and greater complexity and coherence by constantly assimilating her or his own experience, integrating incongruities and polarities. Growth is inherently dialectical. This view does not privilege an internal process of feeling over the meaning-creating processes of symbolization and reflection, nor does it privilege internal experience over contact with others. Rather, it seeks a dialectical synthesis of all elements, emotion and cognition, internal and external, biological and social, as the crucial act in the creation of meaning. It is thus itself a synthesis of phenomenological, constructivist, and relational/field theory views. (Greenberg and Van Balen, 1998, pp. 51-52)

Considering the number of times that the word occurs in the above cited paragraph on the dialectical nature of human growth, synthesis would appear to be very much the order of the day here, and this also resonates with the sort of dialectic hermeneuticism to which I alluded, especially towards the conclusion of subparagraph 3.2.3, above, when describing the working out of the constructivist research paradigm.

Finally, another reason for considering a qualitative meta-synthesis to be the research design of choice for this particular research study is because, not only does the interpretive synthesis that lies at the heart of the qualitative meta-synthesis resonate with the creative synthesis that constitutes the sixth and final phase of Moustakas’s (1990) heuristic research cycle, but also because synthesis more generally reflects what the epistemological model of dialectical constructivism is designed to reflect: the manner in which the human brain integrates and synthesises data not only from our five senses and our emotion schemes (including our cognitive and perceptual capacities), but also from the three epistemological discourses highlighted by the present piece of research, before weighing up the various interpretations of this synthesised data that are available to it. This is what lies at the core of the epistemological mechanism that we refer to by the name dialectical constructivism. Whether we are to refer to the synthesis contained in this research study as creative [after the sixth and final phase of Moustakas’s heuristic research cycle (Moustakas, 1990)] or as interpretive (after Eisenhart, 1998; Noblit and Hare, 1988; and Strike and Posner, 1983), it is to be found in paragraph 5.1, below) which is itself located at the very opening of the fifth chapter of the present research thesis.
3.5  A narrative account of the administration of the various constituent research methods as the research process unfolded

3.5.0  Introduction

In this paragraph, I propose to give a narrative account of what I actually did during the course of this piece of research, including the thinking that underpinned my decisions at critical points along the way. This will include the usual perennial favourites such as data selection, data gathering and data analysis, along with the overarching research design and my use of specific research methods.

3.5.1  Literature review

Having done a lot of preliminary thinking about how this piece of research might pan out, I was left with a list of paradigms, theories, models and forms of governance and regulation which I thought might have something pertinent to say about this piece of research. The next thing that I did was to conduct a literature search for these terms with a view to compiling a review of the literature which would comprise something akin to a snapshot of my existing knowledge of these concepts prior to beginning the data gathering phase of my research, and which would be documented in the second chapter of this thesis. For this trawl of the literature, I utilised Google Scholar as well as the databases and search engine provided by the University of Manchester Library.

In case the lack of a rigorous plan of campaign at the outset of this literature review should surprise some, perhaps I should reiterate that this piece of research opened with an inductive phase whereby my main aim was to survey what the principle players in this sport might be. My research strategy was reviewed in light of the inductive phase of this research study, and many of the elements that I had imagined I might include fell by the wayside: many of the models that I had identified, such as the Criterion–referenced, the Norm-referenced and the Ipsative Models of Assessment, the Self-Reflective Practitioner Model, the Medical Model, the Medicalisation of Human Distress and Wamplod’s Contextual Model, have been omitted altogether, and other models such as Description versus Interpretation and Understanding versus Explanation – about which I had written so
much – have had to be severely curtailed, almost to the point of passing references, although some of them may perhaps come to feature in some form of later work.

Of course, the main players, such as the Potentiality and the Pathology Paradigms, as well as those psychotherapeutic therapies that are subsumed under the Potentiality Paradigm, have retained their place in the final version of this thesis. In many ways, however, the open-minded attitude towards constructivist research requires that we classify as preliminary those decisions about what we will include and what we will have to omit, however interesting such omissions may be.

This trawl of the literature serves additionally to locate this research study within both the psychotherapeutic disciplines and within the research canon: this constitutes an epistemological, hermeneutic, paradigmatic, literature-based, secondary sources piece of research: one that is wholly theoretical and abstract in nature, and which is devoid of any direct clinical involvement. The literature review serves to demarcate the territory across which we shall be journeying, and may also be considered to define, circumscribe or to clarify some of the terms or theoretical building blocks that we shall encounter, as well as those topics and sub-disciplines that we shall be visiting along the way.

3.5.2 Data gathering

I then began the considerable task of identifying texts from the professional and academic literature that addressed the subjects of my enquiry, and from which I was to extract quotations along the way to reflect the nature of the subject into which I shall be investigating. As the focus of my research depends upon the distinction between the potentiality and the deficiency models, I first tried to use Google Scholar and the search engine provided by the University of Manchester Library to trawl the literature for results about the potentiality model as applied to the practice of the psychological therapies. In order to make these attempts, it was obviously necessary for me to pair the term potentiality with other terms to indicate that I was searching for results within the context of the potentiality model. This required that I pair the term potentiality with terms like therapy, psychological therapy, psychotherapy, counselling, counseling, counselling psychology and counseling psychology. Using both spellings of the word counselling/counseling was particularly important, as many of the publications about the psychological
therapies are published in the United States of America, where our word *counselling* is spelt in its shorter form: *counseling*.

However, remarkably few results of any significance were returned by these search engines. This, as I soon came to appreciate, is because, although people do occasionally write about, for example, the potentiality paradigm, they seldom do so using the word *potentiality*, meaning that such results would never have been returned in any search that relied upon the use of this term. (If I may be permitted a moment of self-criticism, this was to become something of a continual issue in the course of the execution of this piece of research, and one for which I suppose I should have been better prepared given that I knew that this was to constitute a largely theoretical and abstract research study from the outset.) The problem with *deficiency*, however, is an altogether different issue: the word *deficiency* is in such common usage that once again, few if any results were returned that were useful for the purposes of my research. So what was I to do?

It was at this point that the application of the heuristic research cycle (Moustakas, 1990) became clearer to me after a remark made to me by my then two Academic Supervisors, Drs. Clare Lennie and Terry Hanley. I came to realise that actually, my thinking about these research foci was something that had been going on in my head for a long time now, and that this pattern of thinking closely matched Moustakas’s (1990) heuristic research cycle. But would a heuristic research method be suitable for use by someone like me?

As a seasoned practitioner of the psychological therapies with many years of experience on which to draw, having recourse to Moustakas’s (1990) heuristic research cycle would allow me the freedom to bring to bear as much of my experience as would be of value to this research study. In effect, this involved me in following my own instincts as to where to look for material that would be likely to generate material that would be of sufficient epistemological value to this piece of largely epistemological piece of research.

Reliance upon one’s own knowledge of the literature, as opposed to relying exclusively upon some of the more traditional literature search methods, is also a method that is supported as being likely to be much more time-efficient than traditional literature trawls by Greenhalgh and Peacock’s 2005 paper on the audit that they conducted on primary sources. In this paper, they conclude that:
Systematic review of complex evidence cannot rely solely on predefined, protocol-driven search strategies, no matter how many databases are searched. Strategies that might seem less efficient (such as browsing library shelves, asking colleagues, pursuing references that look interesting, and simply being alert to serendipitous discovery) may have a better yield per hour spent and are likely to identify important sources that would otherwise be missed.

(Greenhalgh and Peacock, 2005, p. 1065)

Another important consideration in my decision to pursue a heuristic research method is that heuristics can represent a fairly protracted procedure, spanning as it does several periods of time spent cycling and recycling back and forth across the various phases of the heuristic research cycle (see subparagraph 3.5.3, immediately below). Fortunately, my election to pursue this piece of research over six part-time years rather than over three full-time years would afford me ample time for this cycling and recycling back and forth between the various stages of the heuristic research cycle required of this approach to this piece of research.

Before resuming my narrative about how I used my research methods to gather my data, I will pause to give an outline of Moustakas’s heuristic research method (Moustakas, 1990).

### 3.5.3 Heuristics

Heuristics is a term coined from the Greek by Moustakas (1990) – himself of Greek extraction – that is used to describe a process by which one may contribute to research by examining one’s own experience and by paying careful attention to what it may reveal both about the subject of one’s research and to one’s relationship with it.

Moustakas (1990) identified six phases in his heuristic research process, although there is scope for considerable latitude in how these phases are configured within the overall procedure. I shall now move on to outline this procedure, along with illustrations of how I have engaged with this heuristic process with respect to my engagement with the present piece of research.

The first phase is one of *initial engagement* when one begins to cultivate a fascination with some phenomenon into which one wishes to research further. My *initial engagement* with this research topic was when, during the research for my previous doctorate (Gilmore,
I became fascinated by the kind of discourse that was being articulated by the
potentiality and the deficiency models, which was a subject that cropped up in the semi-
structured research interview that I conducted with Alan Jamieson, who at the time was the
Deputy Chief Executive Officer of the British Association for Counselling and

The next phase of this heuristic process – one of immersion – was when I began reading in
earnest for my present doctorate the many texts which I identified over a period of time as
potentially having something to contribute towards my understanding of these two models
– the potentiality and the deficiency models – which I had by now turned into paradigms,
at least in my own imagination. Of course, this immersive phase was also one under
whose auspices was subsumed much reflective consideration surrounding how these
models might work, and how eventually I may configure them as paradigmatic structures.

The third phase of this process, which Moustakas (1990) referred to as one of incubation,
is essentially one whereby one is often said to distance oneself from the material, often by
becoming preoccupied with something else. My own work as a psychological therapist in
private practice provided me with all the excuse that I would need to immerse myself in
something else. However, the reason for what some people often understand as a caesura
in the heuristic research procedure in fact constitutes an opportunity to allow a different
aspect of one to engage with the material: one’s less-than-fully-conscious self, which some
of the psychodynamic fraternity might consider to represent our preconscious mind. So in
this sense of the word, what one is actually doing under the sobriquet of immersion is to
allow ourselves to immerse our material in a lower or, as some might prefer to say, a
higher form of consciousness; nevertheless, considering this a lower portion of one’s
mental apparatus is convenient in the present context because of the other associations with
the word immersion, indicating as sometimes it does the dropping of some form of matter
into a liquid solution, possibly so that the element of liquidity might free up the still
viscous consistency of the material, thereby allowing us to expand our perceptions of it,
and to free up our reflective thinking about it into the bargain.

Phase four of this heuristic process is one that Moustakas (1990) termed illumination,
whereby fresh perspectives and other ideas about one’s material may strike one at any
time. When they do, it is handy to be in a position to jot down any ideas as they occur to
one. Unfortunately for me, the time at which fresh perspectives most often occur to me is
literally immediately after I first lie down in bed to go to sleep. Obviously, what I should have done is to have had a notepad and pencil by my bedside ready to make suitably brief notes of whatever may have occurred to me at various points in time. However, I soon found out that if I were to follow this ostensibly sensible procedure, I would then be quite unable to drop off to sleep, sometimes for several hours on end, and so I soon abandoned this otherwise sensible plan, with the result that I sometimes got straight back up again in order to rush into my study to note down whatever had occurred to me. Whilst this may not be considered the most convenient strategy by many researchers, following my own strategy did at least allow me both to avail myself of whatever ideas would come, as well as to get myself a decent night’s sleep. Abstract processes and plans for carrying them out are all very well, but the practicalities of life, however tiresome, have also to be taken into consideration: deprived of much needed sleep, I am utterly useless, as I and many of those who know me know to our collective cost and mutual chagrin!

The fifth phase of the heuristic process, which Moustakas (1990) called *explication*, is typically when one is trying to write about one’s material, or trying by any other means, such as through the use of spider diagrams or other graphic devices, to communicate one’s ideas to others. It is as though this explicative procedure itself prompts further clarification about how one’s ideas fit together, presumably because having to explain something – which is what one is doing when one is writing about something – necessitates ensuring that one’s thinking about the subject matter is sufficiently rigorous in order for it to submit itself to the printed page. A good example of such *explication* in my case was when I was preparing a PowerPoint presentation for use in a presentation that I had been asked by my then two Academic Supervisors to deliver on *Potentiality and Deficiency Models of Psychological Care* to the second year of the DCounsPsych trainees at the University of Manchester in Room C3.21 from 12:45 to 15:15 hours on Wednesday, 19th October 2011.

Although considerably refined and finessed since then, it was at this juncture that I first came up with the rubric that describes those forms of the psychological therapies that are subsumed under the aegis of the potentiality paradigm as constituting “an engagement with an experiential discourse, delivered by a relational discourse, and which is best understood when analysed from the perspective of a hermeneutic discourse.” Note once again the fact that this *explication* came to me precisely because I had been required to develop a sufficiently plausible (after Frank, 1973; Frank and Frank, 1991) and detailed account of my thinking on this subject to a cohort of second-year trainees on the University of
Manchester’s training programme leading to the award of the degree Doctor of Counselling Psychology. Such a public performance delivered to doctoral level trainees could hardly afford to be wishy-washy or couched and delivered in anything less than professional terms, thereby prompting in me the best of thinking that was at once creatively engaging and yet sufficiently analytically rigorous.

The sixth and final phase of this heuristic procedure is often referred to as comprising something of a creative synthesis. It is designed to be indicative of all of one’s ideas having come together in something approaching a finalised form. In this case, one could consider this PhD thesis to represent a creative synthesis (note the occurrence of that word synthesis again) of my ideas as they have been influenced and shaped by my engagement with the heuristic procedures first advocated by Moustakas (1990). If I am honest about this, however, I must say that having to compile a PhD thesis on such a topic – necessarily involving as it must several read-throughs of the developing and the eventual thesis – tends to rob one of any sense of creativity that may, however fleetingly, have come to the fore. However, creativity there most definitely will have been, and for me the period during which I first came up with this description of my take on the potentiality paradigm did at least genuinely feel like a truly creative process at the time of its inception, and for that however fleetingly experienced ‘a-ha moment’ or “peak experience” (after Maslow, 1968, pp. 71-114; 1970, pp. 164-165; 1976, pp. 162-172), I am genuinely thankful.

3.5.4 So what did I do next, then?

Given that the results of my more traditional forms of literature searches had been so discouraging, I determined that I had better make what use I may of my long involvement with the psychological therapies, and look to my own familiarity with the professional literature in order to generate suitable texts from which to start searching for suitable quotations. I started with Mearns and Thorne’s writings about the topics of the potentiality model and the deficiency model (Mearns and Thorne, 2000, p. 33; Mearns, 2003, p. 63), including their writing about structural and functional forms of governance and regulation (Mearns and Thorne, 2000, p. 36ff), and followed any links that cascaded down from those original writings. Indeed, given that the traditional literature searches had yielded so little of direct use to this piece of research, the practical means of following on from one piece of the literature to the next would justifiably be termed either cascading or snowballing.
depending either on how wet or how cold one likes one’s climate to be. Eventually I ended up with a data set of some 263 items, each of which I typed out myself directly from the source of the text so as to maximise my own sense of immersion in the data, and then stored it all on a hard drive so that I may return to it whenever I may wish. It was also for reasons of wishing to maximise my immersion in this data that I had decided beforehand not even to attempt to utilise any computer assisted qualitative data analytic software (CAQDAS). These decisions applied to my entire data corpus.

I should perhaps make clear at this point that I am following Braun and Clarke’s use of the terms data set and data corpus, as set out in the following quotation of theirs:

Data corpus refers to all data collected for a particular research project, while data set refers to all the data from the corpus that are being used for a particular analysis.

(Braun and Clarke, 2006, p. 79 – emphases feature in the authors’ original text)

I soon came to appreciate that when one examines more closely the writings about potentiality paradigm therapy, the three central themes of this piece of research – experiencing, relatedness and hermeneutics – come up again and again, and it is these three themes that became the three central discourses featured in this piece of research. Indeed, from this point on, it was these three discourses that were to guide my subsequent literature trawls, during the course of which I searched for references that either positioned each particular discourse within the psychological therapies, or which expressed something about its function within the practice of potentiality paradigm therapy.

It was from this juncture onwards that the nature of this piece of research turned from being based upon inductive principles to deductive principles, as I set about the task of seeking to qualify the importance that I had attached to these three discourses and to their central role in both the practice of and in our understanding of potentiality paradigm therapy.
3.5.5 Inclusion and exclusion criteria for the data gathering literature searches

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<thead>
<tr>
<th>Inclusion Criteria</th>
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<td>English language accounts</td>
<td>Non-English language accounts</td>
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<tr>
<td>Potentiality paradigm therapy</td>
<td>Non-potentiality paradigm therapy</td>
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<td>Experiential currency</td>
<td>Non-experiential currency</td>
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<td>Epistemologically rich accounts</td>
<td>Epistemologically impoverished accounts</td>
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<td>Mainstream consensual opinions</td>
<td>Marginal authors’ viewpoints</td>
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<tr>
<td>Well-respected texts such as handbooks</td>
<td>Highly specialised or minority texts</td>
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As my indeed modest achievements in modern languages are not up to deciphering specialist texts, the first filter to apply to my search for my data was that it would need to have been published in the English language and non-English texts would either have to have been translated into English or else omitted from consideration. Given the abstract nature of some of the concepts for which I would be interrogating the professional and the academic literature, and given the appallingly poor standard of the translations that organisations like Google et alia routinely provide, even where less abstract constructs are involved, I determined that by far the best way to proceed on this matter would be to confine myself to reviewing English texts.

Obviously, the second of these six filters is that I am concerning myself only with potentiality paradigm therapy within this piece of research, and so any non-potentiality paradigm forms of therapy, such as pathology paradigm therapy, would need to be excluded from my data corpus and from any constituent data sets.

The third filter concerns the main ‘currency’ or type of therapy being considered. Therapy that doesn’t have a considerable experiential component would probably fail to meet the potentiality paradigm requirement, and so would be excluded from this research study.

Although all of these filters are important, by far the one that has the most capacity either to contribute to or to detract from the success of this research study is the requirement for literature extracts that are genuinely epistemologically rich in the data that they provide. Patton has this to say about the importance of what he refers to as “information-richness.”
The validity, meaningfulness, and insights generated from qualitative inquiry have more to do with the information-richness of the cases selected and the observational/analytical capabilities of the researcher than with sample size.

(Patton, 1990, p. 185 – emphases feature in Patton’s original text; also cited in Morrow, 2005, p. 255)

Another consideration that is important to factor into this context is the way(s) in which our chosen research design – a qualitative meta-synthesis – operates. One researcher who draws our attention to this point is Doyle (2003, pp. 325-326).

Like meta-analysis, meta-ethnography utilizes multiple empirical studies but, unlike meta-analysis, the sample is purposive rather than exhaustive because the purpose is interpretive explanation and not prediction. Meta-ethnographers reconceptualize new interpretations for the collective that may differ remarkably from the component parts.

(Doyle, 2003, pp. 325-326)

What Doyle (2003, pp. 325-326) is saying here is that, whereas research that relies upon a quantitative meta-analysis is likely to have a predictive function to it, underpinned by the positivist research paradigm that undergirds the Western scientific tradition, research that relies upon a qualitative meta-synthesis is much more likely to have a more interpretive purpose to it, as already outlined in subparagraph 3.4.2, above. Now if one factors into this discussion the aggregative nature of the quantitative meta-analysis, one can begin to appreciate how important it is to ensure in so far as may be possible that one is in a position to begin one’s aggregations from a position of having included the outcomes of each and every research study available, for when one is relying upon a aggregative mechanism, even including or excluding the results of just one research study could appreciably alter the outcome of one’s aggregations; this however is not so with a qualitative meta-synthesis, as the interpretive function is not reliant upon absolute inclusivity of the outcomes of all research studies. One tends to interpret research findings based upon to whence their general trend(s) may be appearing to lead one’s conceptualisation of the phenomenon or phenomena under investigation rather than on the aggregation of their total outcomes, thereby emphasising just how different are these two mechanisms of the quantitative meta-analysis and the qualitative meta-synthesis. The differences between these two research designs are also to be expected to be reflected in their respective research methods.
“But what does all this mean,” I hear the engaged reader ask? If total inclusivity is not important, or at least not as critical in a qualitative meta-synthesis as it would be in a quantitative meta-analysis, then what is of critical importance? Well, we have already mentioned in this very subparagraph one such factor in our inclusion criteria: accounts that are genuinely and meaningfully epistemologically rich accruing from our trawl of the professional and academic literature, for if the purpose of this research study is to learn about the epistemology of potentiality paradigm therapy, then analysing some truly epistemologically rich data is clearly going to represent an imperative *sine qua non*.

Another consideration is that we shall need to ensure that those extracts that we choose to cite in this piece of research are genuinely representative of a generally accepted consensus of opinion surrounding those topics that we are claiming that they represent. This really touches on issues of what would be termed “validity” and “reliability” in the terminology of the positivist research paradigm, but which we have become accustomed to referring to as “trustworthiness” when considered within the context of the constructivist research paradigm. (A more expansive discussion of this will be found below in paragraph 3.6.) In effect, this quest for consensus amounts to whether our chosen texts are truly representative of what the majority of those engaged in the practice and the study of the psychological therapies would consider as constituting the accepted consensus within the profession, and hence be thought of as having the capacity to speak authoritatively about whichever approach(es) to or aspect(s) of therapy we may be dealing with at any given moment? When such texts are referred to in such a research study as this, does what a text articulates about the person-centred tradition, for example, necessarily correspond to what another such text may be articulating about the same approach or topic? And does what one person understands by the expression ‘the person-centred approach’ necessarily correspond to another person’s understanding of the same expression or approach?

It is in order to address just this issue that I have considered it important to confine my trawl of the professional and academic literature to what I have termed “mainstream consensual opinions” in the fifth and penultimate of my six inclusion/exclusion criteria guiding my data-gathering literature searches. This has had the effect of restricting my purview to mainstream opinions, which meant that my trawling of the literature was going to be slanted in the direction of a preference for mainstream authors, by which I mean those authors around whose opinions a certain degree of consensus has grown up over time. This leads on to my sixth and final filter, which was to begin my search for well-
respected texts and to avoid those texts which might be considered to apply to highly specialised applications of the psychological therapies, or those texts that would seem to appeal only to a minority of practitioners or theoreticians. But what was I attempting to achieve in expressing these last two preferences?

More particularly, my intention was deliberately to avoid any marginal or ‘left-field’ takes on therapy, such as the following: Arthur Janov’s Primal Scream Therapy (Janov, 1978, 1981, 1988, 1991, 2006, 2007), Colour Therapy (sometimes referred to as Chromotherapy, or in the USA as cromatherapy or colorology) (Anderson, 1990), Crystal Healing (Tiller, 1997; Tiller, Dibble and Fandel, 2005) and Wilhelm Reich’s Orgone Therapy (Reich, 1951) (which is generally considered these days to represent more of a biofeedback technique than a purely psychological form of therapy). Each of these examples of what I referred to above as constituting “‘left-field’ takes on therapy” qualified for consideration as having been “certainly discredited” (Norcross, Koocher and Garofalo, 2006, p. 517) by way of having received a mean score of over 4.5 on “a 5-point, Likert-type scale” (Norcross, Koocher and Garofalo, 2006, p. 516) across which the findings of the second round of Norcross, Koocher and Garofalo’s Delphi Poll. Their results have been conveniently assembled (as Table 2 in Norcross, Koocher and Garofalo, 2006, pp. 518 – 519) as a schedule of some fifty-five potentially “discredited psychological treatments and tests” (Norcross, Koocher and Garofalo, 2006, p. 515) that they have classified as having been “potentially discredited” (Norcross, Koocher and Garofalo, 2006, p. 517), and to which I refer the reader interested in gaining a more detailed grasp of these findings.

But I was aware of wanting to make a concerted effort to do rather more than merely to exclude “potentially discredited treatments” (Norcross, Koocher and Garofalo, 2006, p. 517); I wanted to confine myself wherever possible to quoting only from practitioners and theorists who could be considered as subscribing to one or more of the mainstream forms of the practice in the field of the psychological therapies. This would not necessarily mean that each author should themselves be a well-known name in their own right, but rather that they should be writing about a form of therapy whose legitimacy could genuinely claim to have secured something of a generally accepted consensus. So, in terms of the potentiality paradigm therapies, then, I should certainly include all of those approaches to therapy subsumed within paragraph 2.2, above. But why should I have been so concerned about the range of therapies that I wished to include within the purview of this research study?
The answer to this last question involves considering once again the nature of the research design that I have chosen to adopt for this piece of research: a qualitative meta-synthesis that accords me as the sole researcher much latitude in terms of the data corpus that I decide to review, how I divide up my data sets, how I analyse all this data, and how I were eventually to configure the interpretive synthesis in which a qualitative meta-synthesis culminates. Had I coupled all of this latitude with a choice of theoretical writings from various approaches to the practice of the psychological therapies, then I could have ended up producing an interpretive synthesis that few practitioners would have stood much chance of recognising as constituting a valid commentary on the study of potentiality paradigm therapy. Of course research should not consider itself debarred from entering into any area of practice or human experience, but my own preference as a researcher is for using research to make comments about an area of study that are at least recognisable by the majority of that discipline’s practitioners. Should I have ended up drawing my data from some of the more marginal ‘left-field’ areas of practice, then I believe that I should have found it very much more difficult to persuade any subsequent readership that I had conducted a piece of research that was of any use to anybody interested in the practice or the study of the psychological therapies in general, or of potentiality paradigm therapy in particular. Indeed, the following sentence reproduced from Norcross, Koocher and Garofalo’s (2006) paper reinforces the importance of achieving some form of consensus in such matters:

Thus, we conducted a poll of leading mental health professionals to help secure a consensus and to establish more refined characterizations of treatments and tests ranging from not at all discredited to certainly discredited.

(Norcross, Koocher and Garofalo, 2006, p. 515 – all emphases feature in their original text)

Undoubtedly, these researchers used “leading mental health professionals” [My emphasis – Ed] rather than, say, novitiate mental health professionals because they wished explicitly to achieve some form of consensus around the opinions to be expressed, and because in professional circles consensus tends to be grouped around authority. It is usually those more established professionals who inspire within their professional circles authority in the opinions that they express or to which they subscribe, especially when their authority emanates from research that is underpinned by methodologically rigorous research design. Conversely, had I deliberately gone out of my way to have chosen practitioners or theoreticians who subscribe to ‘left-field’ views on the practice of the psychological therapies, the outcomes of my research could scarcely have claimed very much authority.
In addition to the more traditional search mechanisms, such as those offered by the University of Manchester Library and by Google Scholar, now that I had established a better sense of what I was looking for, I could begin my own trawl of the professional and academic literature based upon my own familiarity with this literature. Apart from the texts by Mearns and Thorne (2000) and Mearns (2003), which I had already read, I chose next to turn to textbooks and handbooks such as Greenberg, Watson and Lietaer’s (1998) *Handbook of Experiential Therapy*, Hutterer, Pawlowsky, Schmid and Stipsits’ (1996) *Client-Centered and Experiential Psychotherapy: A paradigm in motion* and the sixth edition of Lambert’s (2013) *Bergin and Garfield’s Handbook of Psychotherapy and Behavior Change*. These proved invaluable sources of quotations because the authors of the various chapters of such standard texts tend to be chosen to represent the received opinion about each discipline that is being featured, meaning that one can be fairly certain of being able to quote from mainstream consensual theorists and their theoretical constructs rather than from more marginal or ‘left-field’ viewpoints. From texts such as these, many more references cascaded down, and I dutifully followed them all up over the next few years.

But what precisely was I looking for from these quotations? Well, whilst much the same inclusion and exclusion criteria that I have already outlined above for my data gathering literature searches also obtained with respect to the individual quotations that I used, I wasn’t really looking for anything too precise at the outset. In addition to the above-cited inclusion criteria, there was also an added exclusion criterion for the use of direct quotations in respect of the compilation of this thesis. I tended to avoid using quotations whose point had already been made, and made more convincingly, by another quotation that had already been included except for those instances when I wished to illustrate the significance of a particular point by reiterating the number of occasions on which it keeps cropping up, such as the very short pithy quotations that I used in subparagraph 4.4.7, below, to illustrate how meaning is formed; also, the same quotation will occasionally be presented in a different context when a different point is being illustrated, or when a different aspect of the same point is being illustrated. The same quotation can contribute meaningfully to a thesis when it illustrates more than one point.

Initially, I set about looking for passages of text that seemed to me to relate in one way or another to each of the three discourses under investigation: the experiential, the relational and the hermeneutic. At this point in the research, my open mind didn’t care too much
about precisely what they said about each discourse: just that they said something – almost anything that could be considered as constituting a comment about one or other of these three epistemological discourses. And of course, it is as one pursues this endeavour of seeking significant perspectives of one’s research topic(s) that one is also defining what one means by, in this case, these three discourses. So one would do well to enter into this phase of the research with as open a mind as may be possible on the question of what precisely relates to one’s epistemological discourses, for this is how boundaries are tested and redefined. In a very real sense, then, I had already begun my data analysis even as I was still trawling the literature, in that I was constantly considering ways in which I could code the data that I gathered into one or other of these three epistemological discourses, but I shall have more to say about this data analytic phase of the research in the following subparagraph (3.5.6.0). I considered using grounded theory as my principle data analytic mechanism at one point, but decided against using it on the basis that it would have not suited the first inductive phase of this research study as well as would the qualitative meta-synthesis on which I eventually settled as my overarching research design.

At the conclusion of this phase of my research, I ended up with three more data sets: 89 items illustrating the experiential discourse, 51 items featuring the relational discourse and 113 items illustrating the hermeneutic discourse. Adding all these three data sets together with a further data set of 263 items (which comprised data relating to potentiality paradigm therapy more generally but without relating to any of these three epistemological discourses in particular) makes a total data corpus of 516 items, although each of these collections grew in number as my research proceeded. Obviously, I was not going to be able to include references to all 516 items that then comprised my full data corpus, so I would need to examine each in turn to establish which of these quotations had something significant to contribute. Many could be excluded on the grounds that they simply reiterated something that had already been stated, and so my next job was to group these quotations into various categories according to what they said about each aspect of their particular discourse, and of course there would be some items that spoke to more than one discourse (see data analysis in the next section). This form of coding of the data contained within each data set required continually cycling between reading and re-reading each datum unit and reflecting on how its meaning may articulate the overarching discourse of each of the three discourses contained within this piece of research. This process may be likened to what Stiles describes as “intensive engagement with the material [and] iterative cycling between observation and interpretation” (Stiles, 1993, p. 602), or “close
engagement with the material [and] repeated cycling between interpretation and data” as Elliott, Fischer and Rennie (1999, p. 219) put it.

But if one has decided to use the published literature as one’s research data in a research study such as this one, then one must include direct quotations from those authors and theorists upon whose work one is drawing. This is in order to achieve maximum transparency: first, to enable the reader to follow the researcher’s thinking, and second, so as to preclude any possibility that those who read and evaluate the fruits of one’s research may accuse one of using other people’s work on which to impose a narrative of one’s own devising to which these writers would not themselves have subscribed. Obviously, each quotation must be thoroughly referenced at each occasion on which it appears in such a research study, and I know that I have been most meticulous in this regard.

But my use of direct quotations has also permeated the remainder of this piece of research. Even in a methodology chapter such as this I have tried to use quotations from other theorists and researchers to illustrate the point I am trying to make even if this should be a point that relates more to research methodology than it does to the understanding and practice of potentiality paradigm therapy. Furthermore, this practice of utilising direct quotations demonstrates to the reader that I have genuinely read all those works from which I am quoting, as well as having understood the significance of the various points that those authors and researchers have been trying to make. In brief, if one is compiling a research thesis that draws upon the professional and the academic literature for one’s data, then the remainder of the thesis should reflect this respect for and reliance upon the literature as well. My policy of using direct quotations liberally throughout this thesis achieves a degree of congruence with my use of literature to garner the data that I have analysed for this piece of research.

There will always come a point, however, when one seems to be getting no further forward with the task of gathering one’s data: whilst there will always be more literature to trawl and more quotations to cite, there will come a point when no further meaningful or significant observations about one’s research topic(s) come to one’s attention. Rather like the researcher who has become immersed in her or his data, one feels that one has become saturated (Bowen, 2008; Strauss and Corbin, 1998) with one’s material with no remaining capacity for the absorption of any more data that would constitute any meaningful addition to one’s data corpus. This is probably the time to stop.
3.5.6. Data analysis

3.5.6.0 Introduction

The data analytic process is essentially one that is designed to make sense out of the data that one has gathered and in a manner that addresses the question that lies at the heart of the research: in the case of this piece of research, what is the epistemology of potentiality paradigm therapy?

When working in the positivist research paradigm, one’s data analytic mechanisms often take the form of statistical analyses. Given the importance of measurement in the Western scientific tradition, this is usually appropriate. However, one perspective of this form of data analysis is often, nay usually overlooked: that whilst statistical devices are often regarded as useful analytic mechanisms within the positivist research paradigm, their employment nevertheless represents an act of interpretation.

Those of us working in the constructivist research paradigm also employ interpretive devices, and this paragraph offers the reader an account of the interpretive devices that I have chosen to use in order to make sense of the data that I have cited in this research study, and an explanation as to why I have considered them appropriate to my research question.

I have already written (in subparagraph 3.5.4, above, to be exact) about how this piece of research had begun to switch from employing inductive logic to deductive logic around the time that I was settling my thinking around the three epistemological discourses – the experiential, the relational and the hermeneutic – in the later stages of my data gathering phase, and this phase of the research also illustrates how data gathering and data analysis do not always proceed from one to the other as though each were bounded from the other in quite the same manner as may appear in the accounts of positivist research studies. For as I was still gathering data, I had already begun not only to code some of the data that I found into one or more of the three epistemological discourses with which I was working, but I had furthermore begun actively to seek data that would illustrate not only the existence of these three epistemological discourses, but also data that would illustrate how these discourses operate within the practice of potentiality paradigm therapy.
Furthermore, I became aware that this process whereby I was focussing on how these three discourses worked in potentiality paradigm therapy was also influencing those individual quotations that I would extract from the various texts from which I had been gathering my data, for I was now looking not only for data that spoke about each of these three discourses, but also at how I might use other quotations in order to construct a narrative that would explain how each of these three epistemological discourses operated, and in so doing, how they each articulated the potentiality paradigm in the practice of the psychological therapies.

3.5.6.1 Thematic analysis

In addition to a heuristic (after Moustakas, 1990) element of making use of my own experience as a student and practitioner of the psychological therapies in order to know where to look for some of my data, one of the key data analytic mechanisms to feature in this research study is thematic analysis (Braun and Clarke, 2006, 2012), whereby I code and group according to their thematic significance various sets of quotations selected according to their epistemological richness (after Morrow’s (2005, p. 259) expression “data richness” and Geertz’s (1993a, 1993b) expression “thick description”) from the professional and the academic literature under one or other – or sometimes under one or more of the three epistemological discourses: the experiential, the relational or the hermeneutic.

Initially, I read as much as I could from texts that I thought may have something of value to say about potentiality paradigm therapy, and I coded various passages of data into one or more of three discourses: the experiential, the relational and the hermeneutic. This constitutes an example or an illustration of how coding can help one to analyse one’s data so as to uncover themes (Braun and Clarke, 2012, p. 61-65) when these codes are analysed further. I also coded other passages that, whilst not seeming to refer to any of these three specific discourses, nevertheless seemed to have something of interest to say about potentiality paradigm therapy, and these I coded into a sort of miscellaneous data set. This is to say that I would extract a passage that made reference to any one or more of these three facets of potentiality paradigm therapy, and I came to consider these as my data sets. Whether these extracted passages had anything of relevance to say about my research question is a judgement that I was going to have to postpone making until I had determined
what my eventual research question was going to be, and this I could not discern until I had amassed sufficient data to begin to move from this first, inductive phase of my data gathering phase into the second, deductive phase whereby I was able to discern a more focussed research question: What is the epistemology of potentiality paradigm therapy?

As for those passages that I eventually selected from my data sets in order to include in my thesis – the fifth of Braun and Clarke’s (2012) six phases in their model of thematic analysis – I selected from amongst those passages those that seemed to have something of interest to say about any aspect of potentiality paradigm therapy that I thought could be related to the epistemology of potentiality paradigm therapy. This, it should be noted, went much further than simply having something of interest to say about my research question, for I was at all times keeping an open mind about the need to review or to revise my research question in the light of the identification of further patterns in the data. Indeed, it is this open-mindedness that seems so fundamentally essential to and characteristic of research that relies upon qualitative research methods.

Braun and Clarke (2012) cite many different ways of conducting thematic analysis. In particular, they suggest that the researcher’s analysis of the data may be presented in a separate chapter from the data’s own exposition, or they suggest that the two may be combined in the same chapter, which is what I have done here, preferring an approach whereby the assiduous reader may follow the analytic commentary on each quotation in situ instead of having to be continually referring from one chapter to another. This is what Braun and Clarke (2012, p. 67) have so say on this subject:

Data must be interpreted and connected to your broader research questions and to the scholarly fields within which your work is situated. Some qualitative research [sic – Ed] includes this as a separate discussion section; other research incorporates discussion of the literature into the analysis, creating a Results and Discussion section. Both styles work with TA [thematic analysis – Ed]. An integrated approach works well when strong connections exist with existing research and when the analysis is more theoretical or interpretive. This approach can also avoid repetition between results and discussion sections.

(Braun and Clarke, 2012, p. 67 – emphasis features in the authors’ original text)

As the qualitative meta-synthesis for which I am aiming in this piece of research would certainly qualify both as a theoretical and as an interpretive analysis, I have considered it
appropriate to combine these two elements – the data exposition and its attendant coding and analysis – in the same fourth chapter, which I have entitled accordingly.

Braun and Clarke cite two versions of thematic analysis: “a theoretical or deductive or ‘top down’ way” (Braun and Clarke, 2006, p. 83; 2012, p. 58) and “an inductive or bottom up way” (Braun and Clarke, 2006, p. 83; 2012, p. 58). However, it should not be forgotten that the interpretive synthesis that is the outcome of the qualitative meta-synthesis research design also constitutes an important element of the data analysis mechanism in such a piece of research as this. Polit and Hungler refer to synthesis in the following definition of data analysis that appears in their glossary (Polit and Hungler, 1999, pp. 695-718):

> The systematic organization and synthesis of research data, and the testing of research hypotheses using those data.

(Polit and Hungler, 1999, p. 699)

Furthermore, interpretation also constitutes an important element of qualitative analysis, which Polit and Hungler define in the following terms:

> The organization and interpretation of nonnumeric data for the purpose of discovering important underlying dimensions and patterns of relationships.

(Polit and Hungler, 1999, p. 712)

Braun and Clarke (2012, p. 57) define thematic analysis in the following terms:

> Thematic analysis is a method for identifying, analysing and reporting patterns (themes) within data.

(Braun and Clarke, 2006, p. 79)

> TA [Thematic Analysis - Ed] is a method for systematically identifying, organizing, and offering insight into patterns of meaning (themes) across a data set. TA allows the researcher to see and make sense of collective or shared meanings and experiences. Identifying unique and idiosyncratic meanings and experiences found only within a single data item is not the focus of TA. This method, then, is a way of identifying what is common to the way a topic is talked or written about and of making sense of those commonalities.

(Braun and Clarke, 2012, p. 57)
They have written about how thematic analysis is an exceptionally flexible research method for the analysis of data emanating from research that relies upon qualitative research methods. They write in particular about its capacity to thematise meanings:

Indeed, Holloway and Todres (2003: 347) identify ‘thematizing meanings’ as one of a few shared generic skills across qualitative analysis.

(Braun and Clarke, 2006, p. 78)

They go on to say that:

Although often (implicitly) framed as a realist/experiential method, thematic analysis is actually firmly rooted in the second camp, and is compatible with both essentialist and constructionist paradigms within psychology.

(Braun and Clarke, 2006, p. 78)

So it should represent a suitable research method for use in a study such as this one, where data needs to be categorized into certain discourses, as in “interpretive repertoires” after Potter and Wetherell (1987). This “interpretive repertoires” use of thematic analysis represents the second “constructionist” use of Braun and Clarke’s thematic analysis.

Thematic analysis can be an essentialist or realist method, which reports experiences, meanings and the reality of participants, or it can be a constructionist method, which examines the ways in which events, realities, meanings, experiences and so on are the effects of a range of discourses operating within society.

(Braun and Clarke, 2006, p. 81)

The next issue to be determined is whether I wanted to conduct what Braun and Clarke refer to as an “inductive” versus a deductive, or what they call a “theoretical thematic analysis” (Braun and Clarke, 2006, pp. 83-84). As is widely recognised, an inductive analysis begins with the data and seeks patterns or themes by subjecting that data to analysis, whereas a deductive analysis begins with a theory that the researcher wishes to subject to some kind of test by sifting through the data to see whether or not the data may confirm the theory. As if to illustrate this wide recognition of the sequencing of the two main forms of thematic analysis, there follows an illustration of the rationale for the drawing of just such a distinction from LeCompte and Goetz.
A stereotypic distinction labels experimentation as hypothesis verifying and ethnography as hypothesis generating. This simplification has been challenged legitimately by some scholars. Our position is that such dimensions as generation-verification and induction-deduction are continuous rather than discrete processes and that researchers shift along these continua as they proceed through any particular research project and follow some line of investigation. Although ethnographers customarily depend on generative and inductive strategies in the early phases of a research study, they direct later stages of the interactive collection-analysis process to deductive verification of findings.

(LeCompte and Goetz, 1982, p. 34, n. 1)

As the diligent reader will be able to discern from the following account, it is just such a research design as that suggested above by LeCompte and Goetz that I have followed in the present piece of research by availing myself of instances of both forms of thematic analysis, even although I started off with an idea in mind as I set about each of my trawls.

Initially, to inform my research, I was searching for material on the distinction between the potentiality and the deficiency models, and although the results from the more traditional form of literature searches were discouraging to say the least – it transpired that the single greatest instance of the use of the term potentiality generated by such literature searches was by cardiac surgeons – by the time I had delivered my workshop on Potentiality and Deficiency Models of Psychological Care to the second year of the DCounsPsych trainees at the University of Manchester in Room C3.21 of the Ellen Wilkinson Building from 12:45 to 15:15 hours on Wednesday, 19th October 2011, I had at least established the notion that potentiality paradigm therapy comprises an engagement with an experiential discourse, delivered by a (usually dialogically) relational discourse, and which is best understood when analysed from the perspective of a hermeneutic discourse. (Had I thought that I was conducting a positivistic form of research study, then I should doubtless have considered this to have represented some form of hypothesis, but I wasn’t, and so I didn’t.) In spite of having initiated this part of my enquiry with the terms potentiality and deficiency, this nevertheless represents an inductive form of thematic analysis, during the course of which I have worked out from my reading of texts about the potentiality and the deficiency models that potentiality paradigm therapy requires an engagement with three discourses: an experiential one, a relational one and a hermeneutic one, as documented more fully earlier in this subparagraph (3.5.6.1). In other words, these are the three discourses that were indicated by my analysis of my data corpus.
At this juncture, the form of thematic analysis that I had been utilising changed from inductive to deductive, or to what Braun and Clarke term “theoretical thematic analysis” (Braun and Clarke, 2006, pp. 83-84). This is because, although I was still searching for instances of certain theoretical terms cropping up in the literature, what I was now doing was, in effect, putting to the test my notion that potentiality paradigm therapy comprised an engagement with the three epistemological discourses: an experiential, a relational and a hermeneutic discourse. In my use of inductive thematic analysis, which Braun and Clarke describe as “data driven” (Braun and Clarke, 2006, p. 83), I uncovered these three epistemological discourses from my reading of those texts that I found whilst searching for potentiality paradigm therapy, together with further references to other texts that cascaded down from my initial searches. In my subsequent use of theoretical (deductive) thematic analysis, which Braun and Clarke describe as “more explicitly analyst-driven” (Braun and Clark, 2006, p. 84) in that it “would tend to be driven by the researcher’s theoretical or analytic interest in the area” (Braun and Clarke, 2006, p. 84), I looked for and found many references to these three epistemological discourses, thereby confirming that at least one reading of potentiality paradigm psychological therapy resonates with my earlier notion about the constitutioanl nature of potentiality paradigm psychological therapy comprising an engagement with these three epistemological discourses: the experiential, the relational and the hermeneutic. Indeed, Cronbach asserts that . . .

[E]ffective inquiry works back and forth between the heuristic and the confirmatory.

(Cronbach, 1982, p. ix; also cited by Lincoln and Guba, 1985, p. 25)

. . . which of course is just what I have been doing in this piece of research: cycling back and forth between my heuristically developing sense that potentiality paradigm therapy comprises an engagement with the three epistemological discourses of experiencing, relatedness and hermeneutics, and then seeking confirmatory evidence that these three discourses feature prominently in the practice of potentiality paradigm therapy.

Simply to code or to categorise each piece of text into one or other of these epistemological discourses would amount to little more than what Braun and Clarke classify as thematic analysis that is carried out “at a semantic or explicit level,” whereby “[i]f we [were to] imagine our data three-dimensionally as an uneven blob of jelly, the semantic approach would seek to describe the surface of the jelly, its form and meaning, while the latent
approach would seek to identify the features that gave it that particular form and meaning” (Braun and Clarke, 2006, p. 84).

In contrast, a thematic analysis at the latent level goes beyond the semantic content of the data, and starts to identify or examine the underlying ideas, assumptions, and conceptualizations – and ideologies – that are theorized as shaping or informing the semantic content of the data. . . . Thus, for latent thematic analysis, the development of the themes themselves involves interpretive work, and the analysis that is produced is not just description, but is already theorized.

Analysis within this tradition tends to come from a constructionist paradigm, and in this form, thematic analysis overlaps with some forms of ‘DA’ (discourse analysis – Ed) (which are sometimes specifically referred to as ‘thematic DA’, where broader assumptions, structures and/or meanings are theorized as underpinning what is actually articulated in the data.

(Braun and Clarke, 2006, pp. 84-85)

One instance of using thematic analysis at the latent level is where I observe how one epistemological discourse (the experiential) articulates most particularly with another of these discourses (the hermeneutic), as outlined at subparagraph 4.5.3, below, and, indeed how these discourses articulate the potentiality paradigm most effectively when all three of them work together like three ropes intertwined around each other, thereby constituting a thicker, stouter rope of even greater resilience, as outlined at subparagraph 4.5.1, below.

By way of a coda to this subparagraph, one thing that definitely does not win Braun and Clarke’s approval is any expression that suggests that themes somehow simply ‘emerge’ from the data. This is how they express their irritation at such an articulation.

[I]nsufficient detail is often given to reporting the process and detail of analysis. It is not uncommon to read of themes ‘emerging’ from the data. . . . An account of themes ‘emerging’ or being ‘discovered’ is a passive account of the process of analysis, and it denies the active role the researcher always plays in identifying patterns/themes, selecting which are of interest, and reporting them to the readers.

(Braun and Clarke, 2006, p. 80)

I have tried to follow Braun and Clarke’s (2006, p. 80) excellent leadership on this point!
May, however, has no such reticence about accepting due credit for her analytic work.

We talk about “emerging from the data” – which is garbage. We DRAG it out of the data!

(May, 1994, p. 10 – emphasis features in May’s original text)

3.5.6.2 Alternative analytic research methods

Of course, other research methods are, as always, available, and one other research method that I considered for use here was qualitative content analysis (QCA). What persuaded me against utilising QCA, however, was the following point, which is ably made by Graneheim and Lundman (2004, p. 107) when discussing the basic principles of QCA:

[N]o data should fall between two categories or fit into more than one category. However, owing to the intertwined nature of human experiences, it is not always possible to create mutually exclusive categories when a text deals with experiences.

(Graneheim and Lundman, 2004, p. 107)

Indeed, it is not! As some of the extracts that I have cited in this piece of research qualify for inclusion in more than one of the three epistemological discourses, and as an even greater number of potential extracts that I had gathered but eventually decided not to include also fell into this category, this ruled less than ideal the use of QCA in this research study. Furthermore, the three epistemological discourses that feature so prominently in this piece of research do genuinely feel more like themes which keep recurring like a leitmotif in different guises at different points along the way, such that thematic analysis felt at an instinctive level so much more appropriate for my purposes than QCA, and the fact that this piece of research was designed to approach its subject matter with such broad brushstrokes served only to reinforce my decision to persevere with thematic analysis.

I also considered using a systematic review (Greenhalgh and Peacock, 2005, p. 1065), but decided that this would not constitute an ideal research design for me to employ with respect to this piece of research for, as Dixon-Woods, Cavers, Agarwal, Annandale, Arthur, Harvey, Hsu, Katbamna, Olsen, Smith, Riley and Sutton (2006) point out, it would require a “pre-specified, secure, and well-defined” “set of categories,” which would be contraindicated by the inductive phase of this research study.
Conventional systematic review methodology is well-suited to aggregative syntheses, where what is required is a summary of the findings of the literature under a set of categories which are largely pre-specified, secure, and well-defined.


I also considered the use of grounded theory for its theory-building properties, but what discouraged me from perusing this idea any further was its unsuitability for the earlier inductive phase of this piece of research, as I mentioned above at subparagraph 3.5.5.

Another research approach that I considered adopting was an ethnographic approach, but I decided against this because I wanted to keep the focus on the theoretic constructs rather than on my own journey through this piece of research as I grappled with these ideas. Furthermore, I didn’t consider that there was anything particularly noteworthy about ‘my journey’ through all of this research, so I decided against adopting an ethnographic approach.

Dixon-Woods, Booth and Sutton’s (2007) paper on synthesizing qualitative research draws our attention to one other difference between the qualitative meta-synthesis that I am producing here and the instances of syntheses – referred to variously as meta-ethnographies, meta-syntheses, interpretive synthesis, meta-interpretation based on meta-ethnographies, qualitative metasummary, metasummary, metasynthesis, qualitative meta-analysis and qualitative data analysis – that they cite in their trawl of this sector of the research literature. Nomenclature apart, what I am compiling here is a qualitative meta-synthesis of the theoretical writings of potentiality paradigm practitioners of the psychological therapies, and not of the research literature on potentiality paradigm therapy.
3.6 Trustworthiness, rigour, validity and reliability

Trustworthiness, as it is now usually referred to in constructivist circles, or validity and reliability to cite their positivist predecessors, are considered to be terms that feature in research’s ‘quality assurance’ language, and are sometimes collectively referred to by the term ‘rigour.’ Perhaps we can get an idea as to what they actually refer to if we begin by exploring the positivist terminology first.

Part of the difficulty in achieving clarity of vision in this area of research is due to what Tobin and Begley (2004, p. 389) refer to as “a tendency to discuss philosophical and technical issues in the same context” (Tobin and Begley, 2004, p. 389). Here is what they have to say about the issue.

Difficulty arises because of a tendency to discuss philosophical and technical issues in the same context: ‘Philosophical issues relate to questions of epistemology . . . technical issues bespeak the consideration of the superiority or appropriateness of methods of research in relation to one another’ (Bryman, 2002, p. 14). The former is theoretical and the latter intensely practical.

(Tobin and Begley, 2004, p. 389)

This is doubtless one reason why, when writing about research methodology, we try to separate our consideration of matters philosophical (more particularly, epistemological) from more practical considerations.

A further reason cited to account for the difficulties generated by the naturalistic or the interpretive paradigm compared to the more traditional positivist paradigm is attributed by Donmoyer (1990) to the individualistic subjective meanings that feature so much more importantly to research that relies upon qualitative research methods.

Another area of difficulty emanates from the dynamic nature of the research process when utilising qualitative research methods. This is what Tobin and Begley have to say about this particular difficulty when writing about the six constitutive elements of what they term “goodness” (Tobin and Begley, 2004, p. 391).
However, the presentation of goodness as a linear process may be misleading as it could be applied solely to the writing up of projects and thus would become a ‘post hoc’ standard. Qualitative research is not linear, as often presented in methodological literature, but dynamic and interactive. The researcher is constantly moving back and forth between design and implementation. Goodness therefore becomes an overarching principle of qualitative inquiry and an interactive process that takes place throughout the study.

(Tobin and Begley, 2004, p. 391)

The same could be said about the ethical issues that are routinely generated by research that relies upon qualitative research methods, which we will consider in the following paragraph (3.7) below.

Back in the days when the only research undertaken was positivist, the terms validity and reliability were the terms that were designated to refer to the quality of the research undertaken. The degree of validity claimed for each piece of research was considered to represent a measure of the extent to which the research methods employed genuinely measured those variables which the researcher(s) claimed that their research measured. Reliability actually meant replicability, and it measured the extent to which different researchers could be expected to replicate each piece of research and expect to get the same or, at the very least, markedly similar results on each occasion that they did so. Indeed, measurement was one of the concepts that lay at the heart of the positivist era of research in which precision and measurement were everything, or almost everything. Given the objective nature of positivist research, and the manner in which all variables except for the experimental variable were tightly controlled in experimental conditions, there should be no reason why the results of other researchers conducting the same piece of research should deviate significantly from those of the original researchers – so long, that is, that the research had been properly designed and executed. This much is now considered to be general knowledge, and it underlies one of the principle functions of the positivist research paradigm: namely, that it was intended to enable fairly accurate prediction of the reactions of whatever it was whose behaviour or other properties were being investigated.

It is perhaps no surprise that behavioural psychology was the dominant psychological paradigm to emerge from the positivist research tradition. In behaviourism, individual difference was reduced as much as was considered possible such that the prediction of animal – including human – responses could also be considered to be one of the aims of
behaviourism. Skinner and Watson were considered to be two of the pioneering researchers to have contributed to this behavioural tradition. Bandura’s addition of the O (standing for organism) to his forefather’s S – R (stimulus – response) model introduced the element of individual difference into the behavioural repertoire.

One of the more practical reasons why research conducted according to the constructivist research paradigm – sometimes referred to as the interpretive paradigm because of the hermeneutic manner in which such research’s findings need to be analysed – could not be conducted in anything like as objective a manner as was positivist or indeed post-positivist research is because measurement does not play such a defining role in constructivist research as it does in positivist research. One of the pivotal philosophical differences between the positivist and the constructivist research paradigms is what Gergen (2001) referred to as ‘the contested nature of knowledge’ (Gergen, 2001; Guba and Lincoln, 1998) and to a plurality of methods and the beliefs about the nature of knowledge (or epistemology) that underpin them (Greene, 1998; Vidich and Lyman, 1998, pp. 71-72).

As for the terms validity and reliability, well, some researchers see no reason for not continuing to apply them, for they consider validity and reliability to be synonymous with what is often referred to as rigour in research circles, and hence still valid for research conducted according to the constructivist paradigm. Morse, Barrett, Mayan, Olson and Spiers (2002) constitute one such group of researchers who espouse this view, arguing that employing what they refer to as verification procedures during the course of the research allows for rigour to be built into the research, whereas in their view, trustworthiness tends to refer to post propter hoc evaluations which, as they occur substantially after the research itself has been largely completed, cannot therefore influence the quality or the rigour of that research itself. Another example of this position is that of Long and Johnson (2000, p. 35), who conclude that whilst they are happy to employ the criteria of validity and reliability, there may in some research that relies upon qualitative research methods be a need to employ “different means of addressing (these) existing criteria” (Long and Johnson, 2000, p. 35).

An early example of those researchers who believe that those engaged in constructivist research require quality criteria that focus specifically on their type of research are Guba and Lincoln, two of the luminaries of that discipline that came to be known as evaluation, and whose work is cited by Laura Krefting (1991) amongst many others. In his 1981
paper, Guba (1981) determined that there were four criteria that could be used to evaluate the degree of quality achieved in research: *truth value, applicability, consistency* and *neutrality* (Guba, 1981, pp. 79-80; Krefting, 1991, p. 217). Guba (1981, pp. 80-82) then went on to explain how each of these four criteria may be expressed differently according to whether one’s research is subsumed within what he then referred to as the “scientific” paradigm, which we would refer to as the positivist research paradigm, or what he was then calling the naturalistic paradigm, which we today would refer to as the constructivist paradigm. *Truth value* is considered to come down to *internal validity* when working in the positivist paradigm and to *credibility* when working according to the constructivist paradigm, whereas *applicability* becomes *external validity* when working in the positivist paradigm and *transferability* when working according to the constructivist paradigm. *Consistency* becomes *reliability* when working in the positivist paradigm and *dependability* when working according to the constructivist paradigm, and *neutrality* comes down to *objectivity* when working in the positivist paradigm and *confirmability* when working according to the constructivist paradigm (Guba, 1981, pp. 80-82; Krefting, 1991, p. 217).

Lincoln and Guba (1985, pp. 289-331) reiterated these “naturalistic” (Lincoln and Guba, 1985) criteria and suggested various means whereby these criteria could be expressed and satisfied. By the time of their 1989 volume, however, Guba and Lincoln (1989, p. 11 and p. 19, n. 1) had ceased referring to this alternative paradigm as the naturalistic paradigm and had begun referring to it as the constructivist paradigm (Guba and Lincoln, 1989, p. 11 and p. 19, n. 1).

Another example of those researchers who believe that constructivist research requires its own dedicated criteria for addressing matters of quality is that of Graneheim and Lundman (2004) who argue that the latter day umbrella term *trustworthiness*, comprising as it does the criteria of credibility, dependability and transferability, better suits research that relies upon qualitative research methods. Writing about the use of qualitative content analysis in nursing research and education, they offer the following meanings of trustworthiness’s three sub-criteria. *Credibility*, they suggest, “deals with the focus of the research and refers to confidence in how well data and processes of analysis address the intended focus (Polit and Hungler, 1999)” (Graneheim and Lundman, 2004, p. 109). *Dependability*, they suggest, “seeks means for taking into account both factors of instability and factors of phenomenal or design induced changes”, that is, the degree to which data change over time and alterations made in the researcher’s decisions during the analysis process” (Graneheim and Lundman, 2004, p. 110). Finally, *transferability*, they suggest, “refers to ‘the extent to
which the findings can be transferred to other settings or groups’ (Polit and Hungler, 1999, p. 717)” (Graneheim and Lundman, 2004, p. 110).

Leininger – from the world of nursing research – is another researcher who believes that those research methods that rely upon qualitative methods require their own terms to denote the quality or the rigour of the research. She has this to say on the evaluate criteria to be used.

The first principle to uphold is that *quantitative and qualitative paradigms have different philosophic premises, purposes, and epistemic roots that must be understood, respected, and maintained for credible and sound research outcomes.* Both qualitative and quantitative paradigms have entirely different philosophic assumptions and purposes that lead to different goals, different uses of research methods, and the need for different criteria to fit with each paradigm. A full awareness of this first principle makes it imperative that critiques and evaluations be consistent with the philosophic tenets of each paradigm and that the methods used are derived from or congruent with the paradigm purposes.

(Leininger, 1994, p. 101 – all emphases feature in Leininger’s original text)

This last point of Leininger’s – the principle that the research methods used and those evaluations of the research design that are offered should be consonant with the research paradigm in which the research is being conducted – has surely become one of the most dominant standards that is applied to research of whatever paradigm today. Her preferred terms are as follows: *credibility* for truth value, *confirmability* for consistency of evidence, *meaning-in-context* to denote the contextualisation of ideas and experiences within particular environments, *recurrent patterning* for repeated instances of experiences, expressions, events or activities that constitute identifiable patterns, *saturation* for full immersion leading to redundancy, and *transferability* to denote the extent to which the findings of one qualitative study may be transferred to other similar situations (Leininger, 1994, pp. 105-107).

Morrow seems to be making a play for adopting a mid-point position, whereby the best of both worlds may remain open to those researchers whose research depends upon qualitative research methods. She writes about this as follows:

I see quality or validity in qualitative research as paradigm bound to a certain extent; that is, there are particular standards of trustworthiness that emerge from and are most congruent with particular paradigms. However, I also view certain qualities as indispensable regardless of the research paradigm, such as sufficiency of and immersion in the data, attention to subjectivity and reflexivity, adequacy of
data, and issues related to interpretation and presentation. Thus, my recommendation to qualitative researchers [sic] is that we ground our research not only in the substantive theory base leading to the questions guiding the research but also firmly in the paradigm that is most appropriate to that research as well as in more transcendent criteria for trustworthiness.

(Morrow, 2005, p. 250)

Morrow’s insistence on the importance of attending to matters of reflexivity would certainly be shared by many researchers working in the constructivist tradition these days. On the page following the one on which the previous quotation features, writing about what she terms “Goodness or Trustworthiness in Qualitative Research” (Morrow, 2005, p. 251), Morrow reiterates her concern, first expressed on the previous page of her paper, that trustworthiness should be considered “paradigm bound” (Morrow, 2005, p. 250).

Criteria for trustworthiness in qualitative research are closely tied to the paradigmatic underpinnings of the particular discipline in which a particular investigation is [being – Ed] conducted.

(Morrow, 2005, p. 251)

Mention should also be made of the importance of the researcher’s immersion in the data whilst at the same time not becoming impervious to the pitfall of overlooking the fact that there are always other ways of viewing one’s data. Morrow writes as follows on this point:

As with many aspects of qualitative methodology, it is difficult to define immersion precisely. Immersion in the data begins to take place during data gathering and transcription of interviews. It continues with repeated readings of transcripts, listening to tapes, and review of field notes and other data. These repeated forays into the data ultimately lead the investigator to a deep understanding of all that comprises the data corpus (body of data) and how its parts interrelate.

(Morrow, 2005, p. 256 – emphasis features in the author’s original text)

I can certainly claim to have become thoroughly immersed in the data that I have gathered for this piece of research, and indeed I feel as though I have been living with it for the past eight years! (The need for immersion in one’s research data constitutes a potential reason for favouring the part-time routes that I have taken in both of my doctoral programmes.) However, this alone can serve as no guarantee for the quality of any piece of research. Writing under the subheading “Adequacy of Interpretation” (Morrow, 2005, p. 256), Morrow outlines “the continuous and interactive process” (Morrow, 2005, p. 256) of
research that can often end up taking the researcher back into the field in a quest for supplementary data.

Data analysis, interpretation, and writing are a continuous and interactive process, often leading the investigator back into the field for additional data.

(Morrow, 2005, p. 256)

I can also certainly attest to having been lead “back into the field for additional data,” for I have been continually reading more and more books and papers about my research right up until the completion of the writing up phase of this research study; but there comes a point when the research has to finish, at least if one’s thesis is ever to get submitted or one’s research paper published. But one’s interpretation can never be considered to have been adequate unless and until one has first become thoroughly immersed in one’s data. If, however, one’s immersion is of the mind-closing type, then one’s interpretation is likely to suffer from failing to appreciate that data can be read and understood in different ways. It behoves those of us who would consider ourselves researchers, then, to exercise care to ensure that the nature of our immersion is one that facilitates a process whereby we may be open to fresh perspectives, rather than a mindless one which encourages a narrowing of viewpoint.

Rolfe (2006) argues cogently for the position that I also adopt on matters pertaining to the evaluation of that research which relies upon qualitative research methods. My own observation is that whilst some researchers adhere to the more contemporary notion of trustworthiness, most researchers then seem to have to come up with a whole battery of other criteria whose satisfaction may be taken as suggesting that a certain degree of trustworthiness may be considered to have been achieved. In other words, trustworthiness has to be defined separately for different species of research. Under these prevailing circumstances, it seems as though the term trustworthiness represents a somewhat token word around which many different definitions of quality have had to have been constructed, and then explained, in order to lend meaning to the notion of trustworthiness.

Rolfe (2006) states that, as no consensus seems yet to have been reached in this matter – as I have illustrated earlier in this subparagraph – there is probably a reason for this. One reason could be that the research community is singularly lacking in perception, although given the selection procedure for those wishing to peruse research coupled with the protracted periods of training that accompany such career pathways, this would seem an
unlikely explanation. No, I suspect that the most likely reason for this lack of consensus would appear to be that there is no single research paradigm that would be able to subscribe in any meaningful way to any single definition of trustworthiness – or whatever other term one may care to substitute at this juncture.

Rolfe (2006) outlines thus three basic positions on the evaluation of quality in research:

The literature on this issue can be broadly divided into three positions: those writers who wish qualitative research to be judged according to the same criteria as quantitative research; those who believe that a different set of criteria is required; and those who question the appropriateness of any predetermined criteria for judging qualitative research. Of the three positions, the second appears to have generated the most debate, and a number of different frameworks and guidelines for judging the quality of qualitative research have been devised over recent years.

(Rolfe, 2006, p. 304)

Haven’t they just? Rolfe delivers his judgement on this conundrum most pithily in the following terms that are taken from the abstract to his paper:

The second of the above positions is rejected in favour of the third. It argues that, if there is no unified qualitative research paradigm, then it makes little sense to attempt to establish a set of generic criteria for making quality judgements about qualitative research studies.

(Rolfe, 2006, p. 304)

. . . Especially when such criteria then have to be defined more particularly by devising a further set of criteria to lend more appropriate meaning to the more generic criteria. Rolfe concludes the exposition of his position on this topic in the following terms:

The quality of the research cannot be assured by the rigorous application of a set of previously agreed strategies and procedures. . . . Quality judgements entail a subjective ‘reading’ of the research text, and the responsibility for appraising research lies with the reader rather than with the writer of the report; with the consumer of the research rather than with the researchers themselves. This does not preclude the researchers from appraising the quality of their own work, but rather suggests that the readings of the researchers carry no more authority than those of the consumers of that research.

(Rolfe, 2006, p. 309)
Personally, I tend to place my trust in people rather than in constructions like research methods and paradigms; people after all have a sense of agency, whereas research methods are only as useful as the skills of those who operate within or across them. As if to express their agreement with me on this point, Lincoln and Guba make the point that:

[T]rust is biographically specific, that is, it is a relationship existing between two persons on a one-to-one basis.

(Lincoln and Guba, 1985, p. 257; also cited in Guba and Lincoln, 1989, p. 200 – in both cases, each emphasis features in these authors’ original texts)

In which case, why all this talk about trustworthiness, then? I appreciate that I am considering terminology here rather than research methodology per se, but I should feel able to place much more confidence in talking about the notion of credibility with respect to research in the interpretive paradigm. For example, I may or may not trust my own judgement or somebody else’s judgement about something, but I should be prepared to arrive at a judgement as to how credible the message coming from a piece of research may be once I have had a chance to evaluate for myself its research design and how its methods have been applied.

Polit and Hungler define credibility in the following terms:

A criterion for evaluating the data quality of qualitative data, referring to confidence in the truth of the data.

(Polit and Hungler, 1999, p. 699)

Interestingly enough, writing about programme evaluation according to the interpretive paradigm, Greene employs the terms credible and trustworthy (my emphasis), as follows:

This work [research studies conducted according to the interpretivist paradigm – Ed] can make no contributions to social policy and program decision making unless it is perceived as credible and trustworthy.

(Greene, 1998, p. 386)

However, it is difficult to determine whether she is using these two terms here – “credible and trustworthy” (Greene, 1998, p. 386) – to imply that they may be used synonymously, or whether she actually means to refer to different qualities by invoking each term.
My impression of the whole issue of quality within the research firmament is that it is as if we have become like rather insecure children who need the security of a blanket formula – a security blanket, if you will – by which we may judge the quality of research, whatever term we may designate to refer to this notion of quality or rigour – and so we do our best to devise certain criteria – whether validity, reliability, trustworthiness, et alia – and then we try our hardest to stick to them even if they sometimes seem to make precious little sense when examined more closely. Contrary to this orthodoxy, what I admire so much about Rolfe’s position – that “the responsibility for appraising research lies with the reader rather than with the writer of the report; with the consumer of the research rather than with the researchers themselves” (Rolfe, 2006, p. 309) – is that it requires each of us who reads research reports to accept individual responsibility for evaluating that which we have read.

That this view should emerge from Rolfe should not surprise us, for he has made a similar point about how the evidenced-based practice guidelines – and the NICE practice guidelines that, at least in part, depend upon them – have given healthcare practitioners an opportunity to share “responsibility (if not accountability)” (Freshwater and Rolfe, 2004, pp. 64-65) for their own clinical judgements. Prior to the advent of NICE guidelines, each healthcare worker had little choice but to accept responsibility for their own clinical decision-making and the clinical judgements from which they emanated, whereas in today’s NICE culture, if anyone should question a clinical judgement, all the healthcare worker has to do is to cite NICE guidelines in order to justify their clinical decision-making: this is what the NICE guidelines advise, and so this is what the patient gets! (Such a strategy is useful for covering one’s back from future criticism, and should therefore be considered an illustration of defensive practice.) This is what happens when guidelines become the new dogma, and this is one reason why I consider it preferable that we each accept responsibility for arriving at our own judgements with respect to the credibility of the research that we read. Rather than relying upon generic criteria that then go on to cite further criteria, we should evaluate the credibility of research according to the specific criteria that reflect what each particular research method is designed to achieve.

But if we are to return specifically to the implications of Rolfe’s (2006) position – that, rather than relying upon a predetermined set of generic criteria that are presumed to be relevant to all research, the quality of research is best judged afresh according to those criteria that are most relevant to the overarching research design and the individual research methods employed in that particular piece of research – then we would do better
to establish the criteria against which the quality of a qualitative meta-synthesis should be judged, for that constitutes the overarching research design of this present piece of research.

The criteria for judging the credibility of a qualitative meta-synthesis such as evinced by the present research study are fourfold: first, that the resulting synthesis should be interpretive in nature; second, that the interpretive synthesis in which this research study culminates should evince at least a modicum of creativity and novelty; third, that its interpretive synthesis seems genuinely to be a product arising out of the data; and fourth, how well it resonates as having something useful to contribute to – in the case of this particular piece of research – the way(s) in which we view the discipline of the psychological therapies. I shall now offer some illustrative examples of each of these criteria from the literature on qualitative meta-syntheses to justify my adoption of these various criteria for a qualitative meta-synthesis.

The interpretive nature of the qualitative meta-synthesis, formerly going under the name of meta-ethnography, was established by Noblit and Hare as early as in 1988, thus:

To our way of thinking, the synthesis of qualitative research should be as interpretive as any ethnographic account

(Noblit and Hare, 1988, p. 11)

The case for the creativity and the novelty of syntheses is made by Strike and Posner in the following terms:

Synthesis . . . involves some degree of conceptual innovation, or the invention or employment of concepts not found in the characterization of the parts as means of creating the whole.

(Strike and Posner, 1983, p. 346 – emphases features in Strike and Posner’s original text)

May advocates the use of intuition and creative reasoning when using qualitative research methods:

[T]he expert analyst may be informed substantially by intuition and creative reasoning.

(May, 1994, p. 18)
This requirement for novelty and creativity has carried over from synthesis into the interpretive synthesis in whose production the qualitative meta-synthesis culminates, as confirmed by Louise Jensen writing in Thorne, Jensen, Kearney, Noblit and Sandelowski (2004, p. 1346).

The key characteristic of a metasynthesis is the transformation of this new conceptualization.

(Louise Jensen writing in Thorne, Jensen, Kearney, Noblit and Sandelowski, 2004, p. 1346)

After all, although we should not want to grant researchers unlimited latitude or undue license in devising their creative or interpretive syntheses, given that their syntheses are precisely that – creative and interpretive – there would on the other hand be little point in expecting them to illustrate the form of “neutrality” of which Guba and Lincoln write:

Objectivity responds to the positivist demand for neutrality, and requires a demonstration that a given inquiry is free of bias, values, and/or prejudice.

(Guba and Lincoln, 1989, p. 235)

The degree to which the interpretive synthesis seems genuinely to be a product of an analysis of the data (and its ultimate abstraction) is expressed, albeit in fairly implicit terms, by George Noblit writing in Thorne, Jensen, Kearney, Noblit and Sandelowski (2004, p. 1347), who describes the data analytic process in the following terms:

[W]e moved the synthesis from the level of data to the level of interpretation.

(George Noblit writing in Thorne, Jensen, Kearney, Noblit and Sandelowski, 2004, p. 1347)

This is to say that the data itself – the quotations taken from the literature – are reproduced exactly as they appear in their original locations in the literature from which it has been taken. It is at the level of the interpretive synthesis that these syntheses are arrayed as if to form some theoretic narrative that makes sense at the abstract level. A note of caution is in order at this juncture, however: in order to make this abstraction work well, it is important that the data which results from one’s mining of the literature is at once sufficiently “thickly descriptive, and comprehensive” (Zimmer, 2006, p. 313). It is for just this reason that I made a point of highlighting the need for sufficiently detailed accounts of functional
– as opposed to systemic – theory in the inclusion criteria for my literature trawl so that it would generate data that would be epistemologically rich enough to contribute in a meaningful way to this piece of research.

As for the degree to which the interpretive synthesis resonates as having something to say about the way(s) in which we view the discipline that constitutes the psychological therapies, well this has also been covered in the previous paragraph, where I have pointed out that the data remains untrammelled either by interpretation or by synthesis in its initial iteration, but is only subject to both of these treatments in the actual interpretive synthesis in which the qualitative meta-synthesis culminates, and which also constitutes the final phase of the data analysis. It is my own opinion that the terms in which the abstractions are framed in this study are sufficiently central, and obviously so, to the practice of potentiality paradigm therapy as to leave no doubt as to their relevance to our view of this discipline.

Another significant element in the evaluation of research is that such evaluations are themselves best evaluated in the light of the claims that the researcher(s) is/are making for each particular piece of research. If we stop to consider this for a moment, it is clear that if researchers were not able to establish the extent of the claims that they propose to make on behalf of their research, then less deterministic, more exploratory forms of research, for example, could hardly be expected to be entertained for publication. A researcher having recourse to a qualitative meta-synthesis, for example, is unlikely to find her- or himself in a position to prove anything, but they should be able legitimately to claim that they have contributed towards a picture of the particular phenomenon under investigation as it is currently viewed by the practice-based and the research communities within that discipline.

In terms of following my own advice with respect to the present research study, I am happy to observe that what lies at the heart of the epistemology of potentiality paradigm therapy is the mechanism of dialectical constructivism, which represents a model that has been designed to reflect the manner in which the human brain integrates and synthesises the data that it receives. It is in this sense that the qualitative meta-synthesis contained herein is wholly relevant to the study and practice of potentiality paradigm therapy.

Harré and Secord have this to say about our use of models in our understanding of epistemology:
The key to the understanding of the epistemology and logic of creative science, and thus to understanding its methodology is to be found in the notion of the *model*. A model is a realistic representation of something, like its subject in some ways and unlike it in others, often leaving some of its relations with its subject uncertain.

(Harré and Secord, 1972, p. 73 – emphasis features in Harré and Secord’s original text)

And then, just over the page:

[A] model of a subject is a representation of a real thing, or process *[such as the way in which constructivists can only assume that the human brain synthesises the messages it receives, as modelled by dialectical constructivism – Ed]* by a real or imagined thing or process. Such models can be distinguished as *iconic* models.

(Harré and Secord, 1972, p. 74 – emphasis features in Harré and Secord’s original text)

The way in which constructivists model the way in which the human brain synthesises the messages that it receives, as modelled by dialectical constructivism, constitutes an illustration of the way in which Harré and Secord (1972, p. 74) claim that “a model of a subject is a representation of a real thing, or process” (Harré and Secord, 1972, p. 74).

The diligent reader will observe that the notion of *synthesis* is equally prevalent in both the overarching research design of this piece of research – a qualitative meta-*synthesis* that is designed to culminate in the production of an interpretive *synthesis*, which brings together and lends expression to the various findings of the research study – and in one of the research methods employed – Moustakas’s heuristic research cycle, which also features as its sixth and final phase what Moustakas himself termed a “creative *synthesis*” (Moustakas, 1990 [My emphasis – Ed]). According to the rather loose definition of construct validity given below by Long and Johnson (2000), some may consider this to represent an instance of *construct validity*, whereby the constructs employed to undertake the research take on the same or a similar form as the material that is being researched: a constructivist representation of the manner in which the human brain integrates and synthesises the data that it receives, as stated above. This is how Long and Johnson define construct validity:

[C]onstruct validity is associated with consideration of the proximity of the instrument to the construct in question.

(Long and Johnson, 2000, p. 32)
In terms of Long and Johnson’s above cited sentence, the *instrument* (the research design or the research method) is represented *both* by the interpretive synthesis that is the end product of the qualitative meta-synthesis and by the creative synthesis of Moustakas’s heuristic research cycle (Moustakas, 1990), whereas the *construct* is the way in which the human brain integrates and synthesises the data that it receives (the epistemological mechanism that goes under the name of *dialectical constructivism*). However, this may represent little more than a rather loosely drafted definition on the part of Long and Johnson, as it has proved difficult to identify any similar definition of construct validity, and I am always less than wholly comfortable asserting something on the basis of one isolated incidence of its assertion.

Lincoln and Guba refer to this particular phenomenon in terms of either “congruence” (Lincoln and Guba, 1985, p. 38) or “value-resonance” (Lincoln and Guba, 1985, p. 38), and suggest that where this happy state of affairs exists, the inquiry is much more likely “to produce meaningful results” (Lincoln and Guba, 1985, p. 38). In fact, so important do these writers consider this point to be that they describe it – albeit in a footnote – in the following terms:

“This assertion is one of the most central in this book.”

(Lincoln and Guba, 1985, p. 46, n. 12)

This should not be confused with “isomorphism,” which is a term used by Lincoln and Guba (1985, p. 294), Guba and Lincoln (1989, p. 236) and Morrow (2005, p. 251), amongst others, to refer to what Lincoln and Guba once defined as “the extent to which the findings of an inquiry display an isomorphism (a one-to-one relationship) with . . . reality” (Lincoln and Guba, 1985, p. 294).

“So, what of the application of these concepts to the present research study?” I hear you ask. Well, one of the criticisms that is most easily levelled at a qualitative meta-synthesis such as this is that I, in my role of researcher, have accorded myself so much latitude that I could with relative ease construct such a qualitative meta-synthesis to support virtually any position that it may suit me to adopt, and there is to be sure sufficient truth in this criticism to merit further exploration. For instance, given that it is I who selects the quotations that constitute my data, and I also who analyse this data, I could be said to hold undue influence over the outcome of the present piece of research. So does this constitute valid
criticism of this research design, or are there ways in which I could defend myself against such criticism? This is what Dixon-Woods, Cavers, Agarwal, Annandale, Arthur, Harvey, Hsu, Katbamna, Olsen, Smith, Riley and Sutton (2006) have to say about this aspect of producing what they term “a synthesizing argument” whilst writing about “[c]onducting a critical interpretive synthesis:”

Clearly, the production of a synthesizing argument, as an interpretive process, produces one privileged reading of the evidence, and, as the product of an authorial voice, it cannot be defended as an inherently reproducible process or product.

(Dixon-Woods, Cavers, Agarwal, Annandale, Arthur, Harvey, Hsu, Katbamna, Olsen, Smith, Riley and Sutton, 2006)

It is their expression a “privileged reading” generated by “an authorial voice” that stays with me, and which reminds me to be suitably humble and cautious about my claims for this piece of research.

Given that the outcome for which one is aiming in a qualitative meta-synthesis is an interpretive synthesis of one’s research data, one could argue that the researcher has to choose her or his research data with the nature of this interpretive synthesis very much in mind. So does this mean that the researcher’s selection of, in this case, the texts that he mines for his research data really amount to the researcher exercising a privilege that is rightly and justifiably his to exercise? Well, yes and no, which, if left unqualified, I appreciate is less helpful, so let me elucidate further.

The diligent reader may recall that this research study begins as an inductive piece of work – at which point the three epistemological discourses were identified as worthy of confirmation – only later to turn into a deductive piece of work, at which juncture I was looking for evidence to establish the viability of these identified three discourses – the experiential, the relational and the hermeneutic – as constituting three of the main epistemological accounts of what was really going on in the practice of potentiality paradigm therapy. Therefore, if I had already begun to search for confirmatory evidence as to the existence of and, just as importantly, of the role played by these three epistemological discourses in the practice of potentiality paradigm therapy by the time that I had arrived at the deductive phase of my research, then this would seem to me to represent an entirely justifiable next step in the research process.
Of course, one criticism that could be levelled at this research design could be that, in seeking for confirmatory evidence, I was failing to search for any non-confirmatory evidence that may be available to the diligent researcher, but then this was searched for during the opening phase of the research, in which I was looking at the various data sets that grew out of my initial trawl of the professional and academic literature. It was not only because of the wealth of data that I managed to find supporting the existence of the three epistemological discourses – experiential, relational and hermeneutic – that I concluded that these three discourses could well constitute the epistemology of potentiality paradigm therapy, but also because I could find no non-confirmatory evidence during this first, inductive phase of the research that I then decided to pursue the second deductive phase of this research study by looking for confirmatory evidence in respect of these three discourses. Whilst it would, however, be legitimate to enquire as to what form any non-confirmatory evidence might have taken, such as negative cases (after Perakyla, 1997, p. 212), the fact remains that I could neither identify nor create any. Whilst one may, subject only to the limitations of one’s imagination, create almost anything, one may only construct something whose raw materials or constituent elements one has already discovered to have been pre-existing; this after all is what the paradigm wars (Guba, 1990) were all about; but if one cannot even construct anything out of what one has already discovered, then one must indeed be truly struggling!

We may turn next to examine the level of latitude that the researcher affords her- or himself by having recourse to a qualitative meta-synthesis, but before we do so, let us pause to consider just for a moment whether having unlimited latitude is necessarily a bad thing in what is after all a form of research design that is supposed to culminate in the construction of an interpretive synthesis, after Strike and Posner, as follows:

Synthesis involves a conceptual innovation, as well as a reinterpretation of some of the ideas synthesized. Such a reinterpretation should be progressive and should increase our understanding of the materials synthesized.

(Strike and Posner, 1983, p. 357)

It is precisely this augmentation of our understanding of the epistemology of potentiality paradigm therapy that constitutes one of the primary goals of this piece of research, and which is why therefore a qualitative meta-synthesis represents such a valid form of research design for addressing this goal.
In constructing a qualitative meta-synthesis that is designed to reflect the manner in which the human brain integrates and synthesises the data that reaches it, I am constructing a view or a ‘take’ on what is really going on in potentiality paradigm therapy, which is why I refer to the three discourses – experiential, relational and hermeneutic – as epistemological discourses. Now, if all that I am trying to achieve is to construct an interpretive synthesis, which is the form of structure in which a qualitative meta-synthesis usually culminates, then it could be argued that all that I need do is to engage in some kind of fantasy by which I could end up almost ‘dreaming’ up my interpretive synthesis along the way. Whilst this may be considered a fairly cynical view of the value of a qualitative meta-synthesis, it is nevertheless important to be able to justify why one places such credence in the value of such an interpretive synthesis in the first place.

One of the purposes of an interpretive meta-synthesis – not unlike that of the creative synthesis in which Moustakas’ (1990) research cycle culminates – is to prompt a novel way of looking at something, or “conceptual innovation” to quote the words of Strike and Posner (1983, pp. 344, 346, 347, 356, 357, 359 and 361). Indeed, whilst writing about “[s]ynthesis as [d]ialectical [r]esolution,” Strike and Posner amplify on the use of synthesis in the following terms:

In dialectical logic, a synthesis is regarded as the creation of a new conception, level of understanding, or state of affairs achieved by overcoming the tension between two conflicting or opposed ideas or states. The synthesis is the product of the resolution of conflict between a thesis and an antithesis.

(Strike and Posner, 1983, p. 350)

And given the prominence of the role of dialectical constructivism in the epistemology of potentiality paradigm therapy, Strike and Posner’s observations about the role of synthesis in what they refer to as “dialectical logic,” (Strike and Posner, 1983, p. 350) are of interest.

It is, however, important to note one of the four criteria for a successful qualitative meta-synthesis that I outlined earlier in this paragraph (3.6): “that its interpretive synthesis seems genuinely to be a product arising out of the data,” although this is a criteria that I had to add myself because, much to my surprise, I had failed to find anything to this effect in the literature about the qualitative meta-synthesis! The necessity for adding this criterion is precisely to stop any unethical wag playing fast and loose with their research data, but rather to insist that, however interpretive a synthesis may be, it needs to be able to be
perceived as having been arrived at through a valid analysis of the research study’s data, as is the case in the present piece of research.

Tobin and Begley (2004, p. 392) express this in the following terms by relating it to confirmability:

\[ \text{Confirmability (comparable with objectivity or neutrality) is concerned with establishing that data and interpretations of the findings are not figments of the inquirer’s imagination, but are clearly derived from the data.} \]

(Tobin and Begley, 2004, p. 392)

I consider that this requirement is a perfectly reasonable one to expect from a researcher; perhaps my only quibble might be that, in the case of a qualitative meta-synthesis, my interpretations are both products of my own creative imagination as well as being derived from the data that I have cited from the professional and personal literature relating to the practice and to our understanding of potentiality paradigm therapy.

So let us come on now to examine our old friends: trustworthiness, rigour, validity and reliability, as they may be evinced in the present research study. Given that reliability is a term from the positivist research tradition that denotes the degree to which other researchers may be expected to repeat the same piece of research and achieve the same or very similar results, it becomes immediately clear that when working in the constructivist research paradigm’s more interpretive precepts, this is not an expectation that many researchers would expect to hold, if only because of the more interpretive nature of the means of data analysis and of the more subjective nature of the research that usually forms the focus of such research. Nevertheless, Koch (2006, p. 92), comparing the positivist research paradigm’s term \textit{external validity} with that which Guba and Lincoln (1989) render as “transferability,” suggests “that transferability is dependent upon the degree of similarity between the two contexts” (Koch, 2006, p. 92).

Now this depends upon what exactly one considers to constitute the “context” (Koch, 2006, p. 92) here. Given that my research may be viewed as constituting a commentary upon our understanding of the theoretical constructs, models, theories and paradigms related to our understanding of and the practice of potentiality paradigm therapy, this could be taken either way. For instance, one may take the view that such theoretical constructs pertaining to potentiality paradigm therapy are the same the world over, and that the
context is therefore virtually identical the world over. On the other hand, however, if what we are concerned with is our understandings (note here my use of the plural form of this noun) of these theoretical constructs, then these could legitimately be said to differ from one individual to the next. I think that I should prefer to go with the former worldview on this topic, in the sense that even those theoreticians and practitioners who differ in their understandings of these constructs would nevertheless be in a position to understand the alternative positions adopted by some of their colleagues. Therefore, I consider this sufficient to allow me legitimately to consider that the “context” whose definition is being implied by Koch (2006, p. 92) here may indeed be considered sufficiently similar to allow for the conditions of external validity (or transferability, to cite Lincoln and Guba’s (1989) preferred term) to be considered to have been met. Sandelowski (1986), who uses the term “fittingness,” holds the view that:

a study meets the criterion of fittingness when its findings can ‘fit’ into contexts outside the study situation and when its audience views its findings as meaningful and applicable in terms of their own experience.

(Sandelowski, 1986; cited in Koch, 2006, p. 92)

I consider that I have supplied plenty of context (in chapter two, above, as well as elsewhere throughout this research study) to enable the serious reader both to understand the points that I am making herein and also to follow how I have reached my understanding(s) of them.

Although also a survivor of the positivist research tradition, validity is a different matter, in that it is seen as representing the extent to which the research methods employed in any given piece of research can be said with confidence to be representing that phenomenon or those phenomena which the researchers are claiming that their research has been designed to represent. One of the mechanisms that I have utilised in the present research study to attend to this criterion is transparency: to ensure that I have been quite clear as to those approaches to the psychological therapies that I am considering to be subsumed under the potentiality paradigm. To this end, paragraph 2.2 (above) has been devoted to outlining these therapeutic approaches. Indeed, much of chapter two (above) has been devoted to clarifying those terms to which I make specialised reference through this piece of research.

Another point to be made is that, given that the human brain integrates and synthesises the data that reaches it, how appropriate it is that I should have chosen a qualitative meta-
synthesis to express how the human brain’s integrating and synthesising functioning may be seen afresh. Some may consider that this represents construct validity, although I prefer to consider that this represents a form of consonance between the research design and that which the research is claiming to be investigating. After all, consonance has always been regarded as one of the core conditions of person-centred therapy (Mearns and Thorne, 2000, 2007) and of client centred therapy before it (Rogers, 1951, 1961), as well as having been considered an appropriate a highly appropriate phenomenon upon which to reflect by many other forms of potentiality paradigm therapy as well.

But if we were to consider whether the research design and the research methods employed under its auspices were equally safe to be considered as contributing to this research study’s validity, this question would constitute a more complex challenge to our discernment than merely ensuring that we had defined our terms with due diligence. If we are to assume that our avowed intent in this piece of research is to establish the epistemology of potentiality paradigm therapy, then in effect our question essentially becomes: What is it that is really going on in the practice of potentiality paradigm therapy?

How suitable to execute this task is a qualitative meta-synthesis that relies upon a heuristically driven trawl of the professional and academic literature to gather its data, and a thematic analysis to code and to analyse its data? Well, given that we are trying to avoid adopting any extremist or overly fanciful positions on the practice of potentiality paradigm therapy, I should say that it is as useful a strategy as one would be likely to devise given our present handle on research that relies upon qualitative research methods, especially as the interpretive synthesis in which this form of research typically culminates affords us an excellent opportunity to devise new ways (“conceptual innovation” (Strike and Posner, 1983, p. 357) or novelty) of understanding potentiality paradigm therapy, especially when one appreciates that grounded theory would have been quite unsuitable for the earlier inductive phase of this piece of research, as I mentioned above at subparagraph 3.5.5.

Furthermore, my stipulation of inclusion and exclusion criteria (also detailed above in subparagraph 3.5.5) makes it clear that my intention has been all along to avoid any consideration of outlandishly eccentric forms of therapy, as considering such approaches would surely have jeopardised the consensus of opinions that is such an integral element of this research study. This has been a highly structured and well thought through piece of research that has, in the opinion of this researcher, done the job that it was designed to
achieve, even if others would doubtless have done it differently. That there are always alternatives methods shouldn’t be considered as necessarily devaluing that which has been achieved in this research study, especially as it has been reliant upon data that has been collected from some of the most eminent theoreticians to have contributed to our understanding of potentiality paradigm therapy.

“But what of trustworthiness and rigour?” I hear you cry. Well, trustworthiness can be considered to stand for whether the research either offers a view of the topic that people would be able to recognise if they were to familiarise themselves with the population being investigated, or else whether the research would make sense of the phenomenon being examined or, in the case of this piece of abstract research, with the theoretic phenomena being explored.

A further component that adds to the trustworthiness of the present piece of research could be considered a form of triangulation. I have cited material from a considerable number of different theoretical works, and this is a strategy that I have deliberately pursued in order to help establish the credentials of the present research study. If my aim has been to offer the attentive reader a view of the various psychotherapeutic theories around which a generally accepted consensus could be considered to prevail, then I will have avoided the charge of using the work of obscure or disputed theorists around whose work no generally accepted consensus may be considered to have coalesced. To refer to this as an example of triangulation is something that may not occur readily to many researchers, but I am happy to consider it as adding an additional layer of trustworthiness to the present piece of research. Whilst Tobin and Begley (2004) have expressed the view that triangulation may be considered as adding a level of completeness to any given piece of research, we have already established (above, in subparagraph 3.5.5) that completeness is not a criteria that is critical to the qualitative meta-synthesis (Doyle, 2003, pp. 325-326). Elements of my thinking are drawn towards Tobin and Begley’s (2004, p. 393-394) use of the term crystallization, although I agree with their point that this could be considered as expressing a view that one (by implication, correct) view of something may be implicated by the use of such an expression. I prefer to think of my use of the literature from which I have cited quotations in the present research study as constituting a form of consensus, but at the end of the day, these are merely words, so I will not spend any more time debating their usage, preferring instead to examine the concepts themselves and how they are being utilised.
However, as a *caveat*, there is another important point to be made about trustworthiness. In a piece of purely theoretical, non-empirical, abstract research such as the present study, fewer of the constructs that are often cited as potentially having something to contribute towards trustworthiness are available when compared to the researcher whose research was more straightforwardly empirical. This is especially so for those whose research has neither respondents nor co-participants, which also reduces the range of ethical issues thrown up by the research. Lincoln and Guba (1985, p. 363) express this matter succinctly in the following terms:

[T]he trustworthiness techniques may not be applicable in every instance.

(Lincoln and Guba, 1985, p. 363)

The point with which I would like to leave this consideration of rigour in research that relies upon qualitative research methods is taken from Rolfe’s (2006) excellent paper on this important subject. His paper (Rolfe, 2006) makes the point that no configuration or formulaic constructions are likely to be able to ensure rigour in any piece of research that relies upon qualitative research methods. His viewpoint rests on yet another aspect of the constructivist research paradigm, or the interpretive paradigm if one should prefer. The other descriptor that I am attaching to this paradigm is the *relational* paradigm.

This derives from the fact that, whilst the positivist research paradigm is by general consensus considered to represent rational constructions that profess to yield objective findings, the relational paradigm requires to be read by people who are prepared to invest their time and energies in trying to *relate* to the material that it explores. It is this need for a relationship betwixt the researcher and the reader, or between the research and its consumers, which has suggested to me the attachment of the descriptor the *relational* paradigm. Others may consider that what I am referring to here amounts to little more than the need to read constructivist research with a sympathetic attitude towards it, which of course is nothing more than positivist researchers have been doing with respect to their readings of scientific research ever since the dawn of the modernist era: they have been reading such research by having adopted a rationalist attitude towards what they expect to find in positivist research studies.
Given this underpinning of readers of constructivist research who are willing to devote their time and their energies to relating sympathetically to the material whose research reports they are reading, such attuned readers will be able to appraise the trustworthiness or the rigour of the research for themselves, and this is the position that Rolfe (2006) argues we need to adopt in our reading of constructivist research, if only because no formulaic application of various measures traditionally considered to guarantee the rigour of such research will necessarily achieve its objective.

However, once one acknowledges the centrality of the relationship between the researcher and the researched in constructivist research, one soon comes to appreciate that a more relational approach to rigour is actually called for and is more congruent, both with the relational paradigm as well as with potentiality paradigm therapy as well. Rolfe (2006, p. 309) sums this up in the following terms towards the end of his important paper:

Quality judgements entail a subjective ‘reading’ of the research text, and the responsibility for appraising research lies with the reader rather than with the writer of the report [into the research – Ed]; with the consumer of the research rather than with the researchers themselves. This does not preclude the researchers from appraising the quality of their own work, but rather suggests that the readings of the researchers carry no more authority than those of the consumers of that research.

(Rolfe, 2006, p. 309)

 Rolfe justifies his adoption of this position by pointing out that it is the rigour that is inherent in the research report that we are appraising rather than the rigour with which the actual piece of research itself was conducted. He makes this point as follows, citing Sandelowski and Barroso’s (2002) paper in support of his argument:

Sandelowski and Barroso (2002) argued against ‘epistemic criteria’ for making judgements about qualitative research, claiming that the epistemological scope of qualitative methodologies was simply too broad to be represented by any single set of criteria. Instead, they advocated that qualitative research should be judged according to aesthetic and rhetorical considerations, pointing out that ‘the only site for evaluating research studies – whether they are qualitative or quantitative – is the report itself’ (p. 8). This conclusion stems from the observation that judgements are never directly about the research study itself, but only of the study as it is represented in the report, and that the report is ‘a dynamic vehicle that mediates between researcher/writer and reviewer/reader, rather than a factual account of events after the fact’ (p. 3).

(Rolfe, 2006, p. 308)
Sandelowski and Barroso’s (2002) point (cited above by Rolfe (2006, p. 308) about the appropriateness of appraising research that relies upon qualitative research methods along “aesthetic and rhetorical considerations” also resonates with (Jerome D) Frank and Frank and Frank’s point about the rhetorical nature of psychotherapy (Frank, 1973; Frank and Frank, 1991), and so would appear to achieve a certain measure of congruence with the Franks on this point.

3.7 Ethical considerations

At first blush, the absence of any clinical contact, either with clients or with practitioners, may seem to have robbed this research study of many of the ethical issues that are perhaps most routinely discussed in empirical research involving human research participants. So, given this state of affairs, what still remains to be considered from an ethical dimension?

The most significant ethical issue pertaining to the present piece of research surely involves my own use of self and my own sense of agency. If the diligent reader is minded to relate the remaining points of this paragraph to this principle of my use of self, then this will provide ample illustration of what I mean by my use of self and my sense of agency.

The following example illustrates the sort of difference that conducting a piece of abstract or purely theoretical piece of research can make compared to an empirical research study. If I were conducting a piece of empirical research whose data was generated by research participants, then I would be under an obligation to treat them with respect at all times. One instance of evincing such respect would be that I would inform each research participant that they were free to withdraw from participation in this research study at any time without any need to justify or to explain their decision. In the present piece of research, however, research participants are a bit thin on the ground. To transfer the principle of being allowed to withdraw from the research at any point to the present research study, I suppose that I could consider each author from whose work I have abstracted quotations to use as data as constituting a research participant but, as their published writings had been in the public domain – sometimes for a considerable period of
time – withdrawing their work from print would hardly constitute a practical option. Nevertheless, I am still required to treat them – whether or not still living – and their work with all due respect.

I may do this by ensuring that I am representing those authors whose work I have chosen to cite in as faithful a manner as may prove possible. However, ‘faithfulness’ isn’t a word that one often comes across in contexts such as this, so what do I intend by invoking it here? Well, obviously I am required to reproduce all quotations precisely as they appear in their original publications, for all of my data was already in the public domain before I pressed it into service here. This, after all, is to do no more than to respect the authors’ and their publishers’ copyright. Added to this goes an equally obvious requirement that all references to the published literature should be accompanied by full and complete referencing that accords with, in this case, the Harvard referencing system. So, all this having been attended to, what else remains?

I have already said earlier in this chapter – towards the conclusion of subparagraph 3.2.3, to be precise – that this piece of research is in many ways a hermeneutic piece of work in that it revolves around the need to make sense of those texts that I have chosen to cite in this research study. So, straight away, this leads us into the matter of how meaning is distilled from textual material whilst at the same time trying to remain faithful to the authors’ original meanings. In point of fact, could not one automatically make an assumption that, given that I am extracting textual quotations and lifting them from out of their original contexts, some change in their meaning is bound to follow, if merely from their transplantation?

I would suggest that such a pitfall could certainly represent one aspect of the use of secondary sources that needs to be watched closely so as to ensure that one is not taking liberties with material that was not one’s own in the first instance. One of the principles for attending to this responsibility is suggested by the discipline of hermeneutics: that one interprets meaning from a fragment based upon its location within a wider body of work, and with respect to the meaning that it will have been intended to signify in that original context (Packer and Addison, 1989a). This is why I am sometimes suspicious when I see just two or three words extracted from somebody else’s writing and appearing within quotation marks in the middle of somebody else’s text: because I cannot appreciate even
the immediate context of this phrase’s original appearance, I am unable to form any opinion as to how much of a transformation of meaning may be being implied by its wholesale transfer into a new context without any attendant explanation. It is for just this reason that I prefer to quote in whole paragraphs, or at the very least in whole sentences, wherever practicable.

Of course, this does not mean to say that one may not challenge an author’s meanings, but one should be quite transparent about doing so. One should be equally transparent also when one is shifting from making an observation about another author’s work to offering an interpretation of the meaning that we are supposing is inherent in their work. Indeed, I would suggest that it is this quality of transparency that represents a virtue in this form of research when working in the interpretive paradigm, for it is this trait or quality of transparency that represents our best defence against being laid open to challenges of manipulation of other authors’ writings for purposes of our own. This is why we insist upon absolutely transparent referencing throughout all academic work, whether or not it is to be published, for to fail so to do in a research context could leave us open to being accused not only of plagiarism, but also of the manipulation of our own research findings; it is as fundamental a principle as that!

Nor is it just a matter of the accurate replication of other people’s words: rather, it is about the meanings that those words are understood to embrace or to imply; and meaning represents another form of social construction, of course, which leaves them – whether the authors or their intended meanings – especially vulnerable to interpretation or even to abuse! Nevertheless, as all of my data has already been in the public domain – some of it for a very considerable period of time – there should be no confusion as to which elements of this piece of research represent my own work and which that of others. Nevertheless, I still need to ensure that the interpretations that I attach to these authors’ works are fair and proportionate, and that I am not trying to claim too much authority for what after all remains just one person’s ‘take on’ or ‘reading of’ potentiality paradigm therapy. One mechanism that I have found helpful in this respect is to refrain from making any comments about an author’s work that I would feel uncomfortable making to that selfsame author were s/he the external examiner in my viva voce examination.

But of course, it is not just with respect to the use of quotations from other authors’ works that we need to exercise the greatest of care. This is just one area of concern that in my
opinion applies particularly to such an undertaking as this research study. There are other areas of research – not particular to the use of secondary sources, but more generic – and which feature in almost every piece of research that also demand the utmost care and attention. I am thinking here about the ways in which we analyse our data, and how we extrapolate our conclusions from those analyses.

With respect to the analysis of our data, it is critical that we select data analytic mechanisms that will genuinely deliver the form of analysis that is required by our research question, which is what used to be referred to as validity, but which, in research that relies upon qualitative research methods, may be referred to these days as truth value or trustworthiness (Morrow, 2005). In both a qualitative meta-synthesis and in the heuristic research method, it is the resultant interpretive/creative synthesis that constitutes the outcome of each method, and that also constitutes the proof of the data analytic pudding, if you will. There are two qualities that need to be present in such syntheses: the first is the quality of novelty, which is to say that the researcher will need to have framed their synthesis in such an interpretive manner as to shine a new light or to illuminate a new perspective of the topic being investigated, and hopefully thereby to stimulate the engaged reader into devising new ways of their own of perceiving the focus of the research. The second quality is that it should resonate with an informed reader: that is to say that any reader who is genuinely knowledgeable about the subject matter being examined should be able to recognise that the synthesis relates to the topic under investigation, albeit in a new or in a novel manner, and to be able to recognise that the creative/interpretive synthesis has both grown out of an analysis of the data that the research study has presented and has contributed something of value to our understanding of this topic or discipline. If both of these qualities are present in the synthesis, then we may consider the analysis of the data to have been successfully accomplished.

Finally, although a generic requirement of all research, it is most important that we do not make claims for our research that cannot be substantiated, such as by extrapolating conclusions that are not warranted by the analysis of our data, such as claiming that I have ‘proved’ something by presenting a report of a piece of constructivist research. I genuinely believe that I have exercised the greatest caution throughout all phases of this particular piece of research, and that I have in particular followed the Ethical Guidelines for Researching Counselling and Psychotherapy, first published in July 2004 by the British Association for Counselling and Psychotherapy (BACP, 2004), this being the professional
association to whose Ethical Framework I am bound by virtue of my membership, accreditation and fellowship thereof.
Chapter Four:
The Data, its Coding and its Analysis

4.0 Overview

This chapter is devoted to an exposition of the data that I have gathered from the published literature in support of my configuration of the potentiality paradigm as constituting an engagement with three discourses: the experiential, the relational and the hermeneutic. These data are commented upon, summarised and analysed piece by piece as they are arraigned before the reader, although further summative data analysis is to be found below in subparagraphs 4.2.8, 4.3.19 and 4.4.15, as well as in paragraph 4.5, and especially in paragraph 4.6. The interpretive synthesis that is the culmination both of my data analysis and of a qualitative meta-synthesis such as this is to be found at the beginning of chapter five at paragraph 5.1. But before proceeding to a consideration of the data gathered from the academic and the professional literature in support of the three discourses into which I have configured potentiality paradigm therapy, I want first to describe the nature of this data, and how I have interrogated (analysed) and manipulated (synthesised) it.

4.1 The nature of the data

It is my contention that the material subsumed under these three discourses – the experiential, the relational and the hermeneutic – constitute accounts of epistemological claims by whose identification we can recognise the nature of the function that each discourse is performing towards the psychotherapeutic endeavour. If the term analysis denotes the breaking down of a whole into its constituent elements, and the term synthesis
denotes the reassembly of these constituent elements into a more integrated looking overarching whole, then this qualitative meta-synthesis begins with what in effect represents a functional analysis of potentiality paradigm therapy that stands in contrast to the more structural form of analysis that is customarily represented by identifying the various psychotherapeutic approaches to the psychological therapies according to the various psychotherapeutic theories that circumscribe the assumptions that they each make about human nature and functioning, and which underpin their methods. The remaining strand to the research question that is addressed by this thesis – the nature of the overarching discourse that is being articulated through the synthesis of these three epistemological discourses, or the epistemological mechanism, as I have referred to it in the title of this thesis – sees me reconstituting these three discourses into such an overarching discourse so that they may operate more like one overarching discourse rather than three discourses that are functioning independently of each other.

As for the ontological nature of the psychotherapeutic world we are inhabiting here, I have already said elsewhere (Gilmore, 2008) that how we conceive of the psychological therapies constitutes a high proportion of what we will come to know about them, and that this is indicative of a constructivist ontology, meaning that we are actively constructing the conceptual data of our psychotherapeutic universe, rather than relying upon uncovering the hard data of the positivist western scientific tradition that has been lying in wait of our discovery since time immemorial.

4.2 Data from the literature in support of the experiential discourse

4.2.0 Introduction

By my use of the term *experiential discourse*, I am intending to convey those phenomena that relate to our experiencing\(^1\) of any aspect of our lived lives. This would include the

\(^1\)Note here the deliberate use of the gerund (experiencing) rather than the more customary noun (experience), as preferred in this context by writers such as Gendlin (1997) and by others, such as Elliott, Watson, Goldman and Greenberg (2004, p. 21), as cited in subparagraph 4.2.4, below.
ways in which we perceive other people, as well as how we experience ourselves. This discourse obviously connects with the relational discourse in that we could talk of our relationship with somebody, including ourselves, as constituting how we experience them.

4.2.1 The constitution of the experiential discourse?

This is what Elliott, Greenberg, Watson, Timulak and Freire have to say with respect to their inclusion criteria for the generic term of the humanistic-experiential therapies:

This review covers approaches to psychotherapy generally referred to as humanistic or experiential. These therapies are part of the main tradition of humanistic psychology, with major subapproaches being person-centered therapy (PCT; e.g., Rogers, 1961), gestalt (e.g., Perls, Hefferline & Goodman, 1951), emotion-focused (EFT, also known as process-experiential; Greenberg, Rice & Elliott, 1993), existential (e.g., Yalom, 1980), psychodrama, focusing-oriented (Gendlin, 1996), expressive (Daldrup, Beutler, Engle, & Greenberg, 1988), and body-oriented. In addition, humanistic-experiential psychotherapies (HEPs) are often used as generic relationship control conditions by researchers from other theoretical orientations under store-brand labels such as supportive or nondirective.

(Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 495 – emphases in original text)

As all that Elliott, Greenberg, Watson, Timulak and Freire are doing here is citing a series of labels that denote brands of the various psychological therapies that these authors consider as falling under the category of humanistic or experiential therapies, what we need to do now is to make it clear why it is that these therapies are united under the experiential descriptor. So, for the purposes of the present research study, I am defining the experiential discourse that lies at the heart both of the potentiality paradigm and of the experiential therapies as a form of therapy that is designed to enhance the client’s capacity for experiencing due to their participation in their course of therapy (Watson, JC, Greenberg, LS and Lietaer, G, 1998, pp. 3–4), for it is our symbolising of our experiencing that represents a process that is central to helping us to determine what meaning(s) we may attach to the living of our lived lives, as it is to our experiencing to which we attach meaning(s) through the process of symbolisation.
4.2.2 The importance of the experiential discourse in understanding the client

Although the topic of understanding is usually considered as falling under the remit of the hermeneutic discourse rather than under the experiential discourse, these two discourses are in fact inextricably linked, as we shall come to consider in greater detail in subparagraph 4.5.3, below. Continuing for now with a contribution reflecting the views of Rollo May, we have this existential therapist’s commendation of the significance of the experiential discourse to our understanding of our clients in psychotherapy.

Rollo May, a psychoanalyst by training and practice, probably is most responsible for introducing existential therapy to the United States. Along with Irvin Yalom, one of his major contributions was the blending of existential and phenomenological viewpoints. Adopting the phenomenological view, he believed that the personal experience of an individual person was the most important vehicle to knowledge and understanding, and emphasized that a person could be understood through their own experiences more adequately than through a therapist’s theory about people. Likewise, May thought that access to a patient’s motivation for change was best obtained through an exploration of the meanings, ideals, and goals that directed their life.

(Beutler, Booker and Peerson, 1998, pp. 174-175)

As we can read in the last quotation, May was far more enthusiastic about experiential data’s capacity to enlighten us about our clients than he was about the various theories so beloved of psychotherapists. Indeed, only a couple of paragraphs later, Beutler, Booker and Peerson have the following to say about May’s views on this very topic:

May launched an insightful and provocative attack against psychotherapy theory. He noted that psychotherapists, in the interest of effecting good therapy, observe and attribute meanings to patterns or mechanisms of behavior, using language and concepts that are constructed by their theoretical orientation. He pointed out that both the experience of and resolution of anxiety was often aborted by therapists and other observers when they construed the patient’s experience in ways that forced it into line with their own conceptual frameworks.

The tendency of therapists to filter perceptions of the patient through a rigid lens of theoretical views clouded their ability to accurately perceive and relate to the patient.

(Beutler, Booker and Peerson, 1998, pp. 174-175)
If the notion that examining and relating to our clients’ own experiencing of their lived lives represents a far more effective way of understanding those lived lives than through an adherence to the practitioners’ own preferred psychological theories, then all I can say is that this insight has seemingly done precious little to change the way in which the practice of those psychological therapies is still taught to trainees and novitiate therapists today.

In many ways, our preoccupation as therapists with our pet theories constitutes therapist-centred therapy that is always potentially in danger of removing the focus from the client and their material and deflecting it on to our own favourite psychotherapeutic theories, for the danger is that it is then to the presumed rectitude of these theories to which the client’s material must be pressed into the service of illustrating and of supposedly confirming. One of the advantages of a more functional analysis of psychotherapy as opposed to a more theory-driven (and hence a far more structural) approach to analysing the psychological therapies is that we stand much more chance of keeping our clients and their material at the heart of the psychotherapeutic endeavour when viewing the psychotherapeutic process through what becomes in effect something of a meta-model rather than viewing therapy through our own preoccupation with psychological theories.

Furthermore, relating our work to such a meta-model as is being advocated in this piece of epistemological research rather than adhering slavishly to one particular theory frees up both client and practitioner to move more freely through the terrain of whatever form of psychotherapeutic landscape may seem most productive without having to worry about whether it may be prudent to traverse the boundaries of competing psychological theories. Indeed, this is an additional element of the rationale for the present research study.

Note too how May’s position, as it is reported and analysed in these last two quotations, represents what almost amounts to a union between the hermeneutic discourse and the experiential discourse, where understanding (hermeneutic discourse) is achieved through paying attention to the client’s experiencing (experiential discourse) of their lived life. This apparent union between the experiential discourse and the hermeneutic discourse is expanded upon in subparagraph 4.5.3, below.
4.2.3 So to what did we used to intend to refer by invoking the term experiencing?

Eugene Gendlin, that renowned authority on experiencing, writes of “the old model of the five senses and interpretation” (Gendlin, 1997, p. xiv) as being considered rather outmoded and somewhat passé even by the times in which he was writing (originally in 1962) the following:

Today most philosophers find only discouragement in the recognition that all statements and logical inferences are conditioned by someone’s situation, by the biases of culture and social class, usually summed up as “history and language.” Wittgenstein, Dilthey, and Heidegger have powerfully shown that our subjective experiences are not just inner reactions; they are our interactions in life and situations. They are immediate interactional meanings. This brings a vast change. It eliminates the old model of the five senses and interpretation.

(Gendlin, 1997, p. xiv)

Having explained that the former model – which was based on the notion that we would interpret any data that reached our brain through any of our five senses – will no longer suffice to account for our now increasingly developed and sophisticated understanding of human experiencing, he suggests that, rather than being culturally and socially bound as in bygone times, our subjective experiences influence our interactional meanings. Let us just note for now the notion that our subjective experiencing may be considered to have the capacity to influence the meanings that we distil from our lived lives.

4.2.4 So when are we to understand ourselves as ‘experiencing,’ then?

Let’s kick off with a dictionary definition.

Experience is “anything observed or lived through, an actual living through of an event, . . . individuals [sic] reaction to events, feelings” (Webster’s New World Dictionary, 1979, p. 645). Experience, according to Rogers (1959), is all that is going on within the organism that is potentially available to awareness. To experience means to receive the impact of sensory or physiological events happening in the moment. Experiencing according to Gendlin (1964) is the process of bodily concrete feeling. This constitutes the basic matter of psychological phenomena. Experience is thus a datum; it is what happens as we live.

(Greenberg and Van Balen, 1998, p. 30)
My own initial reaction to reading this was to note a sense of confusion as to whether or not these definitions of “experience” (Greenberg and Van Balen, 1998, p. 30) include or exclude the possibility of not initially experiencing something fully in one’s immediate conscious awareness, perhaps only later to come to experience it more fully in one’s conscious awareness. Going through them in the order of their appearance in the above cited quotation, Rogers’ notion of “all that is going on within the organisms that is potentially available to awareness” (Greenberg and Van Balen, 1998, p. 30 [emphasis added – Ed]) might be thought to suggest that something may come into our awareness at a later time, and thereby may allow the admission of something that was not fully experienced initially becoming more fully experienced later. However, the next fragment of this quotation to strike me was that “To experience means to receive the impact of sensory or physiological events happening in the moment” (Greenberg and Van Balen, 1998, p. 30 [both emphases added – Ed]). To my way of thinking, both the word “impact” (Greenberg and Van Balen, 1998, p. 30) and the words “in the moment” (Greenberg and Van Balen, 1998, p. 30) carry a sense of immediacy, as do the words “bodily concrete feeling” (Greenberg and Van Balen, 1998, p. 30). I suppose that the notion of something not registering in its full intensity at first blush, but which we may revisit or which may revisit us at some later juncture may constitute an evocation of those phenomena known to psychodynamicists as the preconscious through the process of de-repression.

Elliott, Watson, Goldman and Greenberg offer us another view of “experiencing” as they, in common with many experiential therapists, prefer to call it, thereby emphasising the ongoing nature of experiencing.

Immediate experience is the basis of human thought, feeling, and action and is thus the central concern for humanistic psychologists and therapists. Although we use both terms in this book, the gerund experiencing is preferred over the noun experience in order to reflect its active, ever-changing, “nonthinglike” nature (Gendlin, 1962). Experiencing includes perception, memory, feeling, felt meaning, action tendencies, and linguistic-conceptual thought. For humanists, experiencing is not just a means to an end but is an end in itself, to be savored and prized for what it is.

(Elliott, Watson, Goldman and Greenberg, 2004, p. 21 – emphases feature in original text)

Again, note these authors’ qualification of the term “experience” with the word “immediate.” Perhaps we should not be too surprised that followers of the Process-Experiential or the Emotion-Focused traditions in the practice of the psychological
therapies, influenced as they are by person-centred perspectives, should adhere more closely to those person-centred perspectives that preference immediate conscious experiencing rather than to the psychoanalytic or psychodynamic perspectives thereof.

But the element of this short quotation that most grabbed my attention as first I read it was the inclusion of “linguistic-conceptual thought” (Elliott, Watson, Goldman and Greenberg, 2004, p. 21). I recall wondering whether the gestaltists would take issue with this. My recollection of Gestalt practice from the 1970s is that its practitioners would take clients to task for ‘getting stuck in their heads’ by which they would mean that they were according preference to intellectualisation over experiencing.

Here are four short quotations from Gendin’s (1997) writing that lend further representative yet concise qualification of the phenomenon of experiencing, the last of which relates specifically to the psychotherapeutic endeavour.

Any word, concept, thought, event, behavior, can be viewed in reference to experiencing (the aspect of experiencing that it specifies).

(Gendlin, 1997, pp. 19-20)

Since experiencing functions in every instance of thought, we can take any concept in any theory or discourse, and we can refer directly to the experiencing that is involved in having that concept at that given point in the theory or discourse.

(Gendlin, 1997, p. 19)

(1) Experiencing is involved in every instance of behavior and thought. Thus it is not necessary to limit oneself to just a few dramatic life situations or dimensions of life. One need not concern oneself only with the crucial junctures of “existence,” “commitment,” “encounter,” and so on. Every situation, behavior, and concept, every therapeutic statement and response, every meaning we have and every responsive event that occurs – involves and shapes (“symbolizes”) experiencing.

(2) We can refer directly to experiencing – and we can devise a type of concept that can be employed along with systematic direct reference.

(Gendlin, 1997, p. 18 – emphases feature in Gendlin’s original text)

Many vital observations of client and therapist behavior indicate experiencing, and are meaningful in terms of experiencing.

(Gendlin, 1997, p. 253)
It rather sounds as though Gendlin is suggesting in these four quotations that it is hardly possible to do anything in life that does not involve experiencing in one form or another. However, there does seem to me to be one form of human experiencing that is notable if mainly by virtue of its absence from this list, and that absent member is of course emotion. Therefore, to Gendlin’s assertion that “[e]xperiencing is involved in every instance of behavior and thought” (Gendlin, 1997, p. 18 – emphasis in Gendlin’s original text), I would add that experiencing is also involved in our emotional responses too.

Ultimately, my own understanding of experiencing is that it refers to symbolised experiencing, such that experiencing that never gets to be symbolised for whatever reason doesn’t qualify as experiencing because it is through the process of symbolisation that our brain interprets our experiencing and processes it accordingly. Sadly, experiencing that never reaches symbolisation is ultimately lost to the host organism as though it had never happened, if only because we never experienced it.

4.2.5 So what is this “powerful felt dimension” to our experiencing, then?

In this next quotation, Gendlin is pointing us in the direction of a ‘felt meaning’ or a ‘felt sense’ of something, suggesting that it is this experiencing of something that qualifies what it is that we are experiencing much more than our verbalised definitions of it, which in themselves will be forced to rely on little more than abstract symbols.

We cannot even know what a concept “means” or use it meaningfully without the “feel” of its meaning. No amount of symbols, definitions, and the like can be used in the place of the felt meaning. If we do not have the felt meaning of the concept, we haven’t got the concept at all – only a verbal noise. Nor can we think without felt meaning . . . . Only a very few considerations can be held in mind in a verbalized form, yet thinking involves the simultaneous role of many considerations. We “think” them all in a felt way. “Let me see, now, there is this, and this, and that,” we may say to ourselves, meaning a whole complexity by the word “this” and by the word “that.” We know what we mean by “this” and “that” because we directly feel the meaning. This felt experiencing, not verbalizations, makes up all but a small part of what we think. Concepts are not meanings at all, except in relation to experiencing.

(Gendlin, 1997, pp. 5-6 – emphases feature in Gendlin’s original text)

Gendlin is saying something of great moment here, for he is suggesting that it is not so much what our conscious logic tells us that comes to define the meanings that we attach to
various thoughts that we might entertain about something so much as how we may feel or come to feel about it. This is what Gendlin means by the term ‘felt meaning.’

Also noteworthy here is that he says “Nor can we think without felt meaning” (Gendlin, 1997, p. 6 – both emphases feature in Gendlin’s original text). This foreshadows the stance taken by the Process-Experiential therapists and the Emotion-Focused therapists: though we may sometimes do so for analytic purposes, it is nonetheless somewhat artificial to break down our experiencing into its constituent elements – cognition, behaviour and emotions – for our brains process them all simultaneously in a more synthesised manner. It is as though these three aspects of human psychological functioning fulfil three different but highly connected needs of our brains: to think, to act and to emote about something – very often about the selfsame thing – and this we call experiencing.

So, having determined that our “felt experiencing” (Gendlin, 1997, p. 6) of something is more of a determinant of how we come to regard this experienced phenomenon than our verbalisations of it, just how are we to distil any sense of meaning from our experiencing of any phenomenon?

Here we see, either it was assumed that meaning lies in felt experiencing – and logic distorts it, or it was assumed that meaning lies in logic and feeling is a chaotic morass to be avoided. It is not so. Meaning is formed in the interaction of experiencing and something that functions as a symbol. This fact has been viewed as a troublesome chaos instead of as the basic source of order in human behavior. For, when symbolized meanings occur in interaction with experiencing, they change. And when one employs symbols to attend to a felt meaning, it changes. The effort is vain merely to “observe” feeling and then say what it means. We need to understand and systematically employ what happens in an interaction between symbols (selective attention is already a “symbolic” process) and experiencing. So long as we only exclaim: “But everything changes!” we view as merely troublesome the human functioning in which meaning and order are formed.

(Gendlin, 1997, p. 8)

For me, the most fundamental point made in this relatively short quotation is that Gendlin is asserting that we derive meaning from the interaction between experiencing and that process known as symbolisation, whereby we symbolise our experiencing in our heads.

Indeed, in this next short quotation, Gendlin (1997, p. 11) asserts that “thought is really a functional relationship between symbols and experiencing” (Gendlin, 1997, p. 11).
What, then, is this “concrete” or “preconceptual” experiencing? We cannot talk about it without the use of symbols. Even to pay attention to it is a symbolic process. Yet there are many different ways in which symbols and concrete experiencing can function together. And we require experiencing to move from one to another of these ways of using symbols. Thought as we actually have it always requires experiencing; thought is really a functional relationship between symbols and experiencing.

(Gendlin, 1997, pp. 10-11 – emphasis features in Gendlin’s original text)

This process of symbolisation is how our brains process our experiencing. Because it would be quite impracticable to run through a whole chunk of past experiencing on each occasion that we wish to call it to mind, we symbolise our experiencing in our heads such that we can readily call back to mind various chunks of past experiencing without having to relive them all in real time. Personally, I use the analogy of an icon on one’s computer desktop that serves as a shortcut, such that by clicking on it one may open a particular programme or summon up a particular webpage. As well as functioning like a shortcut, these symbols often serve also as something of an aide memoire to help us to recall the basics of our previous experiencing.

But by far the most significant function of such symbolisation is that it is through this process that we come to attach meaning to our experiencing. Indeed, it is often its meaning that we often tend first to recall rather than each and every minutiae of our past experiencing. Certainly, we are often likely first to experience how we feel about some past experiencing before going on to recall more of the other aspects of, or details about it.

It seems that at last we are becoming able to pin Gendlin down as to precisely what form of configuration he is invoking when he employs terms like phenomena, experiencing, symbols and thinking to get to the heart of the matter. If we piece together the following two quotations: “Meaning is formed in the interaction of experiencing and something that functions as a symbol” (Gendlin, 1997, p. 8), and “thought is really a functional relationship between symbols and experiencing” (Gendlin, 1997, p. 11), we can see that, according to Gendlin (1997, p. 11), thought is the mediating “functional relationship between symbols and experiencing” (Gendlin, 1997, p. 11) by which meaning is formed.

Greenberg and Van Balen add one further concept to the notion of what it means to be an experiencing-symbolising being: the notion that being an experiencing-symbolising being involves construction as much as it does discovery.
It is only by crowning an experience by symbolization that one makes experiential knowledge ultimately one’s own. One therefore continually creates as well as discovers who one is. Adequate symbolization is thus the basis of healthy self-functioning.

(Greenberg and Van Balen, 1998, p. 39)

Indeed, perhaps one could say that meaning is first created in our heads through a process whereby our brains synthesise an array of experiencing and symbolisation, and then we go on to discover just what it is that we have created.

4.2.6 Past experience lives on by feeding its meanings into our present experiencing

Once we have concluded our survey of the three principle discourses at work in potentiality paradigm therapy – the experiential, the relational and the hermeneutic – we shall be in a much more advantageous position to comment on the nature of the discourse that is being articulated by these three discourses. For now, however, let us just note how the hermeneutic discourse feeds into the experiential discourse in the following manner.

Experience is pregnant with meaning that is implicit until it is expressed. By the act of expressing, people take an explicit position in relation to something, thereby creating meaning. Once expressed, the expressed meaning in turn becomes a new stimulus for the person. It becomes available to awareness for reflection and evocation of further internal reactions.

(Greenberg, Rice and Elliott, 1993, p. 27)

Once attached to our initial experiencing, our meaning(s) then become(s) incorporated into that initial experiencing, such that it becomes virtually impossible to recall the initial experiencing without simultaneously bringing to mind those meanings that we have attached thereto. (Once again, more can be found about the relationship between these two discourses – the experiential and the hermeneutic – at subparagraph 4.5.3.)

4.2.7 Synthesised past experience lives on by feeding into our present experiencing

What Gendlin is suggesting in the following two quotations is that whilst each piece of past experiencing is perhaps no longer directly relevant to the discrete event or situation
that may presently be confronting us, we can nevertheless rely upon a process of synthesising such past experiencing into our present experiencing so as to yield a felt sense about whatever it is that may be confronting us in the present.

The Rogerian point of view . . . is that an individual who is maximally open to his experience weighs and balances all the meanings in his experience in a **subjective process**. He need not be explicitly and conceptually aware of every possible meaning in order to take every possible meaning into account. Thus, when an optimally adjusted individual speaks and acts so as to “follow his feeling” (as this subjective process is termed) he is following a subjective resultant of all the meanings of his experience, even though he has not explicitly thought them all.

(Gendlin, 1997, p. 254 – emphasis features in Gendlin’s original text)

What Gendlin is saying here is that we do not need consciously to be in a position to recall each and every significant element of learning that has informed us about some such proposition, because our brain functioning will have automatically taken our prior learning into account when we come to weigh up whatever it may be about which we are faced with a decision to make. It is as though not only each and every occurrence themselves but also our subjective learning from each of those events will have been stored in the computer that is our human brain, ready for us not necessarily directly to access them, but to make use of such learning in whatever decisions we need to make in the present or in the future. Taking up this point once again, this time from much earlier on in the same work (Gendlin, 1997), Gendlin has this to say about how our brains include not only present data in its synthesising processes, but also past data as well.

A moment’s experiencing contains implicitly so many meanings that no amount of words can exhaust it. To react in one familiar situation involves the use of so many learnings, so many past experiences and events that a whole warehouse could not store the books that would have to be written to symbolize them in writing. A live human at one moment is all these insofar as they function and make a difference, now. Therefore, personality change can occur. For the sheer logical content of what is said is only just what is said. The effect (if any) of saying it in psychotherapy occurs via the experiencing of what is said. That includes not merely this or that meaning, but broadly the whole life of the person as it occurs in the present. Thus all areas of the personality are involved (and can change) in any one moment’s experiencing even though verbally just some small meaning is thought or spoken.

Thus, by telling you an incident about my boss at work I can be experiencing (and grappling directly with my experiencing of) my self in relation to others in all circumstances, as well as my many experiences of my early family upbringing insofar as that is a part of me and functions in the preconceptual experiencing of the present. For past experience does not function in the present as the discrete events
that have happened in the past. These are past. What is present is the experiencing of now, and the past events have made it what it is. All the past and all the complex aspects of myself today can be involved in the experiencing of my telling the incident. They can be here now to be worked with. On the other hand, the logic and concepts of what I say are only about a trivial incident. We must take what I say as indicating and referring to my present experiencing, not to those limited conceptual contents.

The client in psychotherapy (really also anyone who wonders about himself and his own behavior) can find answers to his self-addressed questions only in his experiencing – only by referring directly to it, specifying aspects of it, and using symbols together with it. The attempt, made by some clients, therapists, and individuals generally, to replace the experiencing by use of explanations will neither really explain nor change anything.

If you have trouble getting to work, for example, it is futile to ask yourself, “Am I just lazy?” “Do I have a wish to fail?” “Am I turning my basic hostility inward, on myself?” “Am I just avoiding my responsibilities?” Such questions, spoken as it were in mid-air, are ineffective and, when experiencing is directly referred to, and differentiated, one always finds that the terms in these questions are much too gross and general to have any real bearing on anyone.

*Only* by referring to his experiencing can the individual even find (and later interpret) in himself that which – in our example – makes it difficult for him to get to work.

(Gendlin, 1997, pp. 34-35 – emphases feature in Gendlin’s original text)

What Gendlin is professing in these extracts is that at each juncture of our lived lives we have available to us the whole of our experiencing that has presaged these moments in our past lived life, irrespective of whether we may be consciously aware of each little minutiae of each fraction of experiencing at any given point in time, or of the symbolisation by which we recall those experiences.

But Gendlin is also asserting something else of profound importance in these last couple of

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When I initially typed this sentence, I had used the word ‘total’ instead of the word ‘whole’ on which I eventually settled here. My reason for withdrawing my use of the word ‘total’ was because I wanted to avoid invoking here any notion of a zero sum game. I clearly felt that some concept whereby I was to ‘total’ up all of my earlier experiencing would have been quite inappropriate to have used in this context. What I preferred, and still prefer, is the notion of some kind of process whereby one ‘synthesises’ one’s prior experiencing to form a felt meaning that we may use to guide our consideration and our evaluation of the situation that confronts us in the present moment. After all, the methodological framework for this piece of research is a qualitative meta-synthesis rather than a quantitative meta-analysis, and so my use of the word ‘whole’ would seem more fitting than that of the word ‘total,’ as the use of the word ‘whole’ is reflective of a process whose outcome represents a “subjective” (Gendlin, 1997, p. 254) qualitative synthesis rather than the aggregation of statistics or of totals that would have been signified by the use of the word ‘total.’
quotations (Gendlin, 1997, p. 254 and pp. 34-35). He is asserting that it is how we experience the various phenomena and the situations that we encounter in our lived lives that makes us who we are and that also affords us opportunities for change, growth and development. Of particular interest is the following paragraph which, as it is so short and succinctly expressed, I shall cite once again for the reader’s convenience.

The client in psychotherapy (really also anyone who wonders about himself and his own behaviour) can find answers to his self-addressed questions only in his experiencing – only by referring directly to it, specifying aspects of it, and using symbols together with it. The attempt, made by some clients, therapists, and individuals generally, to replace the experiencing by use of explanations will neither really explain nor change anything.

(Gendlin, 1997, p. 35)

This last sentence (“experiencing” versus “explanations”) gets right to the heart of the difference between the relative efficacies of the different kinds of currencies that are exploited by practitioners of the potentiality paradigm and of the pathology paradigm, with the practitioners of the pathology paradigm exploiting the knowledge base of psychology, of psychiatry, or of their related disciplines, in contrast to potentiality paradigm practitioners, who are content to rely upon the person’s experiencing.

Gendlin’s (1997, p. 35) illustration of this fundamental difference between these two paradigms takes the form of pitting experiencing against explanations, the latter of which, he suggests, “will neither really explain nor change anything” (Gendlin, 1997, p. 35). In effect, he is saying that explanations, however expert they may be, can never replace our own experiencing, for whilst explanations may be proffered us by others, we have to experience our lived lives for ourselves; nobody else can do this for us. And so it is for just this reason that clients of potentiality paradigm therapy need to be committed to experiencing their therapy: this is not the sort of process that can be absorbed from anybody else, or read about as if from some kind of self-help book. This form of therapy must be experienced by each client for her- or himself; simply reading accounts of other people’s therapy will not offer the kind of experiential learning that clients require.

Whilst explanations can be of some use if a psychoeducational approach to therapy is called for, relying upon the client’s own experiencing (qua experiential learning) represents and always will represent a far more potent strategy for enabling the client to achieve the movement that they seek. This is because explanations locate expertise and
hence authority with the professions and their professionals (whether they be pathology paradigm practitioners such as psychiatrists or psychologists, who often work according to what often amounts to little more than a training model) whereas the potentiality paradigm therapist’s attempt to understand their client’s experiencing locates the expertise and thereby the authority with the client. The truly important point is that the client’s attempts to understand an expert’s explanation of some phenomenon are likely to remove the focus from the client and to displace it on to some form of knowledge base or on to its theoretical constructions, whereas the therapist’s attempts to understand the client’s own experiencing of their lived life retains the focus where it belongs: on the client and their experiencing of their lived life. No abstract theory is likely to change a client’s functioning because such explanations completely circumvent the experiential processes by which the client constructs their very being, and so it is to these experiential processes that practitioners of potentiality paradigm therapies need to direct both their attention and that of their clients.

But this entire extended quotation (Gendlin, 1997, pp. 34-35) is preparing us for another adventure with our notion of experiencing and all that this implies. If the aggregation of our past experience resembles a corpus of data that has already been fed into the computer that constitutes our brain and which is always there, lying dormant, but ready to assist the organism that is you or I in making judgements about our present lives, then what does this suggest about those mechanisms whereby we arrive at such judgements.

Well, there was something of a clue in the last quotation: “A moment’s experiencing contains implicitly so many meanings that no amount of words can exhaust it” (Gendlin, 1997, p. 34). What Gendlin is suggesting here is that there is an infinite number of meanings that may arise out of a mere moment’s experiencing; but he is also suggesting something else by his deployment of the word “implicitly” here: that, in addition to meaning being something that may arise through thoughtful reflection between our experiencing and those symbols which we attach to our experiencing (as noted above in subparagraph 4.2.5), meaning is also contained implicitly in our very experiencing itself.

So, for example, whilst one may not immediately be capable of analysing each and every implication of some phenomenon as we experience it, nevertheless, before we are in a position to ascribe a response to our experiencing of this phenomenon that we may justify – as if we had shown all our working out in the margin – we may nevertheless often be in a position to be able to assert straightaway that we have had some immediate primitive form
of response to whatever proposition may have been suggested by our in-the-moment experiencing of it, such as discomfort or some form of arousal, such as curiosity or the affect of disgust, *et alia*. It is to these primitive, un-thought-through responses that Gendlin is referring when he writes of implicit (Gendlin, 1997, p. 34) meaning being subsumed within our in-the-moment experiencing of some such phenomenon. It was about just this point that he was writing when he wrote the following:

Two deficiencies of theoretical statement will be found to cause misunderstanding throughout these discussions: (1) experience is identified with conceptual contents; (2) aware feeling is not precisely understood to contain implicit meaning. Use of the term “experiencing,” and differentiations possible with that term, have been shown (1) to enable differentiation between experiencing and conceptual contents, and (2) to make possible the reference to aware feeling as implicitly meaningful.

(Gendlin, 1997, p. 253)

Further evidence that this is how Gendlin understood the relationship between experiencing and meaning to operate is given in the following quotation:

Symbols do not always “represent” the “implicit” meaning of experiencing. Sometimes they merely refer directly. Sometimes they creatively form a new manner of experiencing with new meanings. Similarly, behaviors, and personal responses can have these several modes of interaction with experiencing.

(Gendlin, 1997, pp. 41-42 – emphases feature in Gendlin’s original text)

By now, the attentive reader will have understood that Gendlin conceives of experiencing as requiring to be symbolised or conceptualised such that it may be thought about and communicated to self and to others. However, he seems to consider that our experiencing itself is by far the more significant element of this discourse, for conceptualisation without being able to recall the experiencing itself gives us but little flavour of the process, and because some meaning is in any case subsumed within our experiencing.

With respect to this last point, Gendlin asks:

[D]oes the counselor have the present experiencing as well as the conceptualizations he expresses, or only the latter? If he has experiencing as well as the conceptualization, then the counselor genuinely experiences the client.
On the other hand, the counselor’s concept may describe the client, yet from the words alone we have little indication as to the counselor’s actual present experiencing of the client.

(Gendlin, 1997, p. 258)

But Gendlin also points out that our splitting into experiencing and contents/conceptualisations/symbolisations is at least in some respects somewhat artificial:

*What the term “experiencing” refers to.* In order to use the term “experiencing” in theory, and in order to formulate other terms that will also refer to experiencing, we must make more precise what the term refers to. . . .

Some initial sense of what the term “experiencing” refers to can be communicated by calling it “subjective experiencing.” It refers to an individual’s feeling of having experience. It is a continuous stream of feelings with some few explicit contents. It is something given in the phenomenal field of every person.

We can further clarify what the term “experiencing” refers to by contrasting it with “conceptualization.” Experiencing and concepts of it can occur together, or separately. When they occur together, they are usually so bound in an immediate unity that we do not notice their difference. The experiencing is then the meaning-to-us of the concepts. The concepts conceptualize the experiencing. However, often we have strong feelings without “knowing what they are.” In such cases we have experiencing without having a conceptualization of it. In other, equally frequent cases we have a conceptualization but very little experiencing of what the conceptualization conceptualizes. For example, a person may be talking about a feeling that he had strongly yesterday, but does not feel now.

(Gendlin, 1997, p. 230 – emphasis features in Gendlin’s original text)

And so we may understand from Gendlin’s account given in this last quotation that our recognition of any meaning communicated to us through our experiencing of some phenomenon and our direct experiencing of that phenomenon itself “are usually so bound in an immediate unity that we do not notice their difference” (Gendlin, 1997, p. 230). This implies a form of synthesis between those elements of our brain functioning that contribute to our experiencing and to our understanding of that experiencing, and that to separate them out is an artificial device whose purpose is to assist us to understand how they work.

(More can be found about the liaison between these two discourses at subparagraph 4.5.3.)
4.2.8 Summative analysis of the data relating to the experiential discourse

The main impression with which I have been left after surveying the literature about the experiential discourse is that, so central is our experiencing of our lived lives to human functioning in general, it can be regarded as constituting a reliable indicator of where we are, both with ourselves and with the world around us, as well as with those who populate it. This is not to suggest that we may rely upon the absolute verisimilitude (in any objective sense, that is) of everything that we have experienced, because our experiencing always represents a subjective element of our worldview whereby different individuals will experience the same event or the same phenomenon differently, especially because our experiencing is not simply a matter of perception, but also one of meaning, which is something about which we shall have a lot more to say in paragraph 4.4, below.

But there are other issues here as well. We need to appreciate the extent to which the psychological therapies constitute a representational discipline whereby the experiencing of our clients is represented largely verbally, although paraverbal and non-verbal communication are also often available to us as therapists. Nevertheless, we need constantly to keep reminding ourselves of just how incomplete an account of their experiencing is given by clients much of the time when they are reliant upon verbal communication alone. Practitioners need continually to remain alive to the possibility that they will need to exercise considerable levels of empathic communication in order to be able to follow their clients’ various trains of experiencing, and to understand the accounts of themselves that they may at times struggle to give. Potentiality paradigm therapy is rather like the research enterprise: it is the clients’ experiencing that is the focus of the psychotherapeutic research endeavour; their words, along with such other clues as they may from time to time care to give us, are as mere data from which we need to discern and to divine as much as we can of the entirety of their experiencing. Potentiality paradigm therapy relies upon that form of understanding that accrues from the client directly experiencing therapy rather than through some form of explanation derived through some kind of proxy- or quasi-therapy, whereby our putative or would-be client were to read tomes of wisdom about the human condition.

Getting to know our clients sufficiently well to be able to appreciate their particular styles of communication will also enable us to expand somewhat the data corpus available to us in our clinical work with our clients, as will becoming familiar with how they tend to
represent their experiencing and attach meaning to it through their symbolisation of it. Indeed, it is through this process of symbolisation that we move beyond the old take on experiencing as constituting that data that reaches our brain through any of our five senses, and on to what today we call a ‘felt sense’ of experiencing and of meaning, which we derive from a synthesis of our accumulation of experiencing, past and present, and the felt meanings that result from these symbolisations and synthesising processes. Indeed, it is through these symbolising and synthesising processes – which can involve both our thinking and our emoting, as well as any action tendencies thereby evoked as well – that we create meaning in our heads before then going on to discover just what it is that we have created by the living out of our lived lives. It is in this sense, then, that our experiencing – taken as including our experiencing of its associated, nay, its attached meaning(s) – becomes our very being.

4.3 Data from the literature in support of the relational discourse

4.3.0 Introduction

By the term relational discourse, I am intending to convey anything that relates to how we may relate to any other thing. This could include how we relate to ideas or concepts, and equally how we relate to other people, including ourselves. Within the field of the psychological therapies, relatedness is often used to refer to the psychotherapeutic relationship between client(s) and their therapist(s). In this somewhat more specialised sense, what we are often talking about here is how we (as therapists) use the psychotherapeutic relationship in our practice of the psychological therapies. Many instances and illustrations of its various uses are described in the remainder of this paragraph (4.3).
4.3.1 The therapist’s or the healer’s need to “establish a genuine connection with the sufferer”

Although citing Frank and Frank’s (1991) third edition of Persuasion and Healing: A comparative study of psychotherapy, Rutan and Shay (2012, p. 263) clearly intend to attribute the saturation of the psychotherapeutic air with the importance of the psychotherapeutic relationship to (Jerome D) Frank, whose first edition of this seminal text was published in 1961, and whose second edition was first published in 1973.

Whatever theory guides the treatment, the therapist or healer must establish a genuine connection with the sufferer. First and foremost, all forms of therapy include a relationship between therapist and patient (Frank and Frank, 1991). This notion now so deeply saturates the air that therapists breathe that it seems obvious, even clichéd. But it was not obvious until Frank articulated it so clearly.

(Rutan and Shay, 2012, p. 263 – emphasis features in Rutan and Shay’s original text)

And again, from just a few pages further on in this same chapter, as follows:

The relation of patient to therapist is crucial in every type of psychotherapy.

(Rutan and Shay, 2012, p. 267)

Whilst this attribution may not exactly surprise those who had emphasised the primacy of the psychotherapeutic relationship in earlier publications, such as Rogers (1951, 1957, 1959, 1961) – not to mention those of Freud – most would accord Frank (1961, 1973; Frank and Frank, 1991) the credit for the thesis that the psychotherapeutic relationship could be used rhetorically to instil hope in the client:

Rhetorical procedures are particularly effective in arousing hope, combating alienation, and stirring emotions.

(Frank and Frank, 1991, p. 70)

Furthermore, it was Frank’s (1973) thesis that the client needs this hope to be instilled in them in order to overcome the demoralisation that constitutes the real reason why clients consult psychological therapists in the first place.
The second edition of *Persuasion and Healing* (Frank, 1973) defended the radical assertion that people seek psychotherapy largely because they feel demoralized, not because they have a mental illness.

(Griffith and DSouza, 2012, pp. 158)

This constitutes a highly significant statement, for it stakes a claim that the psychological therapies innately and inherently subscribe to the potentiality paradigm, which essentially operates according to a growth model, and leaves to clinical psychology and psychiatry the practice of treating pathology that is embraced by the pathology paradigm.

4.3.2 What type of relationship? One characterised by humanity and immediacy

Writing under the subheading “Presence and authenticity” this is what Elliott, Watson, Goldman and Greenberg have to say by way of a response to this question:

People function best and are best helped through authentic, person-to-person relationships. In such relationships, each person is psychologically present to the other and recognizes the other as human in the same way that he or she is – that is, as a source of experiencing and action. The fundamental ground of human growth and development including change in therapy is found in relationships that are characterized by empathy, prizing, and genuineness.

(Elliott, Watson, Goldman and Greenberg, 2004, p. 22)

It is the word “present” that sticks in my mind from the above quotation, although Rogers (1958) had used to use the word ‘immediacy’ to refer to this concept as early as in 1958. This is what Farber has to say about what he refers to as “presentness.”

The I of I-It has no present, only past – and by projection or prediction, the future. But “the present arises in virtue of the fact that the Thou becomes present” [*I and Thou*, pp. 3-4]. Of all the qualities of the I-Thou relation, presentness – the suspension of chronological time, the falling away of time past and time future – is the quality we all seek to invoke, in the absence of mutuality and directness, as a symbol of the I-Thou or as a first step toward relation.

(Farber, 1967, p. 583 – emphases feature in Farber’s original text)

In effect, what Farber is doing here is pointing out that the origin of the meaning of the expression ‘being present’ in a relationship with somebody involves being thoroughly
committed both to living in the present time with them, and to making themselves maximally available to them, thereby shutting out all extraneous distractions – much like a therapist would be expected to do in the service of her or his client.

Von Weizacker describes a meeting at which Martin Buber had invited questions from the audience. One audience member, who had become quite concerned about the way in which his and his colleagues’ warnings of the potentially dire consequences of nuclear proliferation had seemed to have been falling on seemingly deaf ears, asked him what he thought might have been missing from such cautionary appeals.

I described this entire situation to Buber and then said to him: “The failure of all these appeals is not to be explained only by the fact that the world is unwilling to listen. Blame must also be assigned to a certain lack in all these appeals. Can you tell me what is missing in them?” He started a bit as I put the question to him in this manner but his surprise seemed to express agreement. He replied, “Yes, something is missing, but what is it?” He thought a while and then added, “What is probably lacking is involvement (engagement).”

(von Weizacker, 1967, pp. 603-604 – emphasis features in von Weizacker’s original text)

It must take some rare gift of insight to be able to proffer some sort of response so spontaneously to such a profound question, especially when the responder had no prior familiarity either with the work of the audience member and his colleagues, nor of the actual appeals that had hitherto been made. What I imagine may have been happening here is that Buber must have been basing his response on what familiarity he had with how the world tends to ignore messages or warnings that many would consider that it needed to hear and to heed. In any event, Buber’s response – that the appeals may have been lacking a sense of having involved the world in this and its related issues, or of having failed somehow to engage it in the debate – would seem to reflect the distinction that he articulates by his use of the terms I – It and I-Thou, where the former is understood to represent a typically disengaged form of relatedness, and the latter a qualitatively different form of response where involvement and engagement characterise the connection or the relationship between the two parties. It is this latter form of relationship to which Mearns and Cooper (2005) are referring when they write of the term “working at relational depth,” and it is both this style and this substance of relatedness that is relied upon by those psychological therapists working to the principles embodied in the potentiality paradigm.
Finally, I should like to quote a short passage from Gendlin, as he puts the following thoughts in everyday terms that I should imagine would resonate with many of us.

Often a psychotherapist (or any listener who wants to be helpful) will feel that he must “do something,” “add something,” bring in some new content or insight, so that he will be helpful and make a difference.

Yet, there is already all the difference between how one thinks and feels alone and how one thinks and feels with another person. The conceptual content may (for a time) be the same as the individual can think and feel by himself; but, the manner of experiencing will be totally different.

(Gendlin, 1964, p. 126; 1970b, p. 152 – emphases that are not contained within parenthesis feature in both of Gendlin’s original texts)

Gendlin then continues by citing illustrations of those listeners who interrupt with concerns of their own and who simply fail to sense the need in the other to explore more expansively without being judged or criticised, and those listeners who sense what is required by the other person and who are happy to afford them the psychological space that they need in order to continue their exploration of the topic and their thoughts and feelings about it. The mere presence of another person alters the dynamic, and their responses have the potential to expand (or indeed to crush!) any ensuing dialogue.

4.3.3 The primacy of the psychotherapeutic relationship

Let us continue our examination of the relational discourse by examining the standing of the psychotherapeutic relationship compared to that of psychotherapeutic theory. This is what Paley and Lawton have to say on this subject, although I would suggest that it has also been fairly representative of the now long-prevailing climate of opinion amongst the majority of practitioners of the psychological therapies.

Current research can offer only tentative conclusions about human functioning and the therapeutic process. Therapy research needs to be more clinically relevant and use ‘real life’ patients, therapists and interventions. Only the use of more sophisticated research methodologies in the future can settle the debate over empirically supported treatments versus relationships, or as is probably more likely, what combination of both may be required. For now, the bulk of evidence would support the primacy of the therapeutic relationship within therapy above specific techniques or specific models of therapy. From a relational perspective, therapy involves the therapist being spontaneous in a way that cannot be acquired through repeated practice or turned on for specific problems; it is the mutual engagement of
two individuals within an intense, interpersonal endeavour. This is essentially a human-to-human contact which can be far removed from notions of ‘cure’, ‘diagnosis’, or ‘professional and patient’. This may present challenges to our professional biases and values, but is overwhelmingly what the scientific evidence suggests. The relational basis of psychotherapy needs to be accounted for and to form the basis for truly evidence-based practice of NHS therapy.

(Paley and Lawton, 2001, p. 15)

So it appears that many regard the therapeutic relationship as constituting the single most important factor in the outcome of psychological therapy, and certainly more significant than whichever theoretical approach such a practitioner may adopt. But is there any research evidence in support of this assertion about the primacy of the therapeutic relationship? Well, yes, actually – it appears that there is.

4.3.4 Research evidence in support of the primacy of the therapeutic relationship

Writing about working at relational depth in therapy, Mearns and Cooper cite evidence that supports the notion of the primacy of the psychotherapeutic relationship.

In 2002, the American Psychological Association (APA) set up a task force to review all the available data on the link between therapeutic outcomes and the therapeutic relationship. The principle finding of the task force was that ‘the therapy relationship . . . makes substantial and consistent contributions to psychotherapy outcome independent of the specific type of treatment’ (Steering Committee, 2002: 441); and it recommended that practitioners should ‘make the creation and cultivation of a therapy relationship . . . a primary aim in the treatment of patients’ (p. 442).

The research reviewed by the APA Task Force was extremely rigorous.

(Mearns and Cooper, 2005, p. 2)

What is so significant about this assertion is that this finding is expressed “independent of the specific type of treatment” (Mearns and Cooper, 2005, p. 2), suggesting again that the quality of the psychotherapeutic relationship is substantially and consistently of greater significance than the theoretical allegiance that underpins the practitioners’ practice of the many psychological therapies that are in circulation today. Indeed, this finding of the APA Task Force has now entered into what one might call the ‘folk lore’ of the psychotherapeutic canon to such an extent that it is now considered to be a piece of
common knowledge that needs no further research evidence in support of its pre-eminence. Almost wherever one goes in the world of the psychological therapies, one might expect to hear the following refrain uttered in unison by therapists of all persuasions: ‘It’s the relationship, stupid!’ It would be a brave person – and one who would need to be remarkably sure of her or his evidence – who would challenge this assertion these days!

4.3.5 Three different ways in which the relational discourse may operate

Fritz Perls once spoke thus of the therapeutic encounter as constituting a “safe emergency.”

In the safe emergency of the therapeutic situation – I repeat: in the safe emergency of the therapeutic situation . . .

(Fritz Perls speaking in his introductory remarks to Part Two of Shostrom, 1966)

All of which leads us to believe that clients might need some form of coaxing in order to commit themselves to a process which calls on them to confront their fears, and what is more, to do so in the presence of another person whom they have never met before. This form of support that renders the psychotherapeutic encounter sufficiently psychologically ‘safe’ to permit client engagement with a sufficient degree of trust and commitment constitutes the first of the ways in which the therapeutic relationship may be put to the service of the psychotherapeutic encounter.

There are in fact three pivotal ways in which the role of the therapeutic relationship can be considered in those of the psychological therapies that are underpinned by the potentiality paradigm: first, the therapeutic relationship may be considered important because it somehow allows the therapeutic situation to appear to be psychologically safe, attractive or otherwise profitable for the client (Frank and Frank, 1991); second, it may be considered the vehicle that delivers the experience of therapy that is so central to the experiential therapies (Watson, Greenberg and Lietaer, 1998); and third, it may be considered in itself to embody the experience that enables the client to experience themselves more positively as a result of their participation in those approaches to the practice of psychological therapies that are subsumed under the potentiality paradigm (Bordin, 1979; Bordin, 1983, p. 36). I shall now proceed to consider in turn each of these uses to which the psychotherapeutic relationship may be put in the practice of potentiality paradigm therapy.
4.3.6  The relational discourse as facilitator and enabler of psychological therapy

“The older view of rapport as a relationship factor which is needed in order for the client or patient to be willing to accept treatment” (Bordin, 1979; Bordin, 1983, p. 36) is what Bordin views as the original use of the relational discourse in psychological therapy, as evinced by his remarks from one of his early papers on the therapeutic alliance.

Thus, the building of a working alliance and its repair is not viewed as establishing a relationship in order to facilitate the person’s acceptance of treatment. This building and repair process is the treatment. This perspective contrasts sharply with the older view of rapport as a relationship factor which is needed in order for the client or patient to be willing to accept treatment.

(Bordin, 1983, p. 36 – emphasis features in Bordin’s original text)

For the avoidance of any doubt, it should be stated that there is nothing wrong with using a sound therapeutic relationship based on mutual respect and the trust that this engenders as a facilitator and enabler of psychological therapy, or as ‘a container for the anxieties of the client’ that may have been generated by the prospect of self-reflection, as the psychodynamicists might put it: merely that this manifestation of the relational discourse does not feature the therapeutic relationship in quite such a central role as in the other uses to which the therapeutic relationship may be put. In pathology paradigm therapy for example, one might suggest that its psychoeducational discourse is facilitated by a positive relationship between trainer and trainee, just as one might make the same claim of a teacher and her or his relationship with her or his pupils in a school classroom; after all, both represent a training function at their core.

Geller also has something to say about the importance of encouraging a positive relationship between client and therapist.

[All of the authors expressed some variant of the hypothesis that a positive therapeutic relationship is a facilitator of hoped for and favourable outcomes. This theme reappears in most of the authors’ lessons learned about the practice of psychotherapy and parallels perfectly the cumulative research on the value of the psychotherapy relationship.

(Geller, 2011, p. 761)
Frank and Frank (1991) make some slightly more substantial claims for the relational discourse when, in their seminal book *Persuasion and Healing: A comparative study of psychotherapy* (Frank and Frank, 1991) they make the point that one of the basic early tasks of the psychological therapist is to engage the patient’s hope and belief that they stand a good chance of attaining the goals that had led them into psychotherapy in the first place – and furthermore, that rhetoric has a substantial part to play in arousing this hope.

Rhetorical procedures are particularly effective in arousing hope, combating alienation, and stirring emotions.

(Frank and Frank, 1991, p. 70)

Frank and Frank (1991, p. 70) are clearly of the opinion that the skills embodied in the discipline of rhetoric are highly desirable devices to facilitate client engagement in successful psychotherapy.

Griffith and DSouza reinforce this message initially of Jerome Frank’s (1961, 1973) and latterly of both Jerome D Frank and of Julia B Frank (1991) by suggesting that it may not be the particular condition from which people may be suffering that leads them into some form of psychological therapy, but rather their demoralised response to their condition.

The second edition of *Persuasion and Healing* (Frank, 1973) defended the radical assertion that people seek psychotherapy largely because they feel demoralized, not because they have a mental illness. “Demoralization” referred to the distress felt by people aware of their failure to meet their own or others’ expectations, while seeing themselves as powerless to change the situation or themselves . . . . In linking demoralization to the common features of psychotherapy described in the first edition (1961), Frank fostered a quiet revolution. Teaching therapists how to inspire hope, mastery, trust, and expectation for change, rather than specialized techniques of particular schools, became the core of training.

Recognizing demoralization rather than mental illness as the main grounds for psychotherapy also widens the scope of who should be offered such care. Demoralization is a common form of “normal suffering” for people who have chronic medical illnesses, victims of disasters, unemployed workers, or immigrants in an unfamiliar culture. All may benefit from systematic efforts to restore hope and mastery in the face of overwhelming circumstances.

In the decades since *Persuasion and Healing* first appeared, substantial progress has been made in clinical theory and psychotherapeutic technique. The third edition (Frank and Frank, 1991) suggested that psychotherapists might develop their skills by cultivating qualities identified in the study of rhetoric. Rhetorical principles suggest that therapists could build on the *ethos* attached to their cultural and personal status to enlist a patient’s trust. As a form of rhetoric, psychotherapy
arouses moderate levels of emotion through culturally resonant language, imagery, or prescribed acts. Such rhetorical methods empower therapists to offer patients convincing hope that they may counter feelings of helplessness by challenging either themselves or their circumstances.

(Griffith and DSouza, 2012, pp. 158-159 – emphasis features in the authors’ original text)

In other words, what Griffith and DSouza are here crediting Frank (1973) with is his insight that, given that we often cannot change a person’s medical condition or their particularly disadvantageous position in life, surely it would repay the effort more if we were to focus on those things that our patients can change, such as the way(s) in which they respond to their various condition(s) or their respective life situation(s).

Griffith and DSouza’s expression “Frank fostered a quiet revolution” (Griffith and DSouza, 2012, p. 158) constitutes a fitting tribute to Jerome Frank’s (1973) contribution to the development of the psychological therapies, and one which was all the more significant because it spoke to those who practice many different forms of the psychological therapies: he was in point of fact addressing himself to the practice of the psychological therapies in general rather than to those practitioners of particular schools that advocated particular approaches to the practice of the psychological therapies.

Kuehlwein suggests that another potential benefit of creating a psychologically safe relationship with the client is that it allows for what he calls a certain “loosening of constructs” as he puts it, thus:

[Modern analysts often encourage the client to actively articulate certain problematic constructions, which the analyst does not judge. The more these constructions are allowed to emerge and differentiate without being challenged, he suggests, the more likely the client is to try out differing ways of making meaning of his or her experiences. It is the safety of the therapeutic environment that promotes the loosening of constructs (as Neimeyer might say).

(Kuehlwein, 1996, pp. 498-499)

In this quotation, Kuehlwein is suggesting that it is when the therapist allows the articulation of “certain problematic constructions” without any sense of judgement from the therapist that constructs are loosened by the client, which Kuehlwein goes on to suggest (1996, pp. 498-400) facilitates experimentation on the part of the client in new ways of distilling meaning from her or his experiencing.
Elliott, Greenberg, Watson, Timulak and Freire go a little further in their claims for the efficacy of the therapeutic relationship, citing awareness, insight and empowerment as benefits in addition to the fostering of client safety and the capacity to tolerate emotional pain.

Studies of helpful and hindering events . . . show the importance of both fostering client safety in therapy and also its potential fragility. They also show that therapist skills at facilitating relational, empathic, and experiential processing can help the client to bear emotional pain, bring new awareness and insight, and help bring about a new sense of empowerment. These in-session events may thus be memorable experiences that can lead to a lasting impact. In these studies clients typically experienced the quality of relationship as a mutual encounter that had an enduring impact. For some it improved the therapeutic relationship and for others it was a moment of personal change. In general, the therapist’s skilful clarification, guidance, compassionate presence, interpersonal affirmation, and awareness-promoting communication of empathic understanding contributed to helpful impacts, but sometimes private inner work by the client played an important role as well.

(Elliott, Greenberg, Watson, Timulak and Freire, 2013, pp. 513-514)

4.3.7 The relational discourse as the vehicle that delivers the experiential discourse

Basically, any form of potentiality paradigm therapy where the therapist invites clients to participate in structured exercises during the course of their therapy sessions is using the psychotherapeutic relationship to deliver the experiential discourse of psychological therapy. Both Gestalt therapists and transactional analysis (TA) therapists employ such exercises as one ingredient of the therapy that they practise – often referring to such exercises as ‘experiments’ – but practitioners of other forms of therapy employ to participatory exercises as well.

Paley and Lawton seem to suggest that the relational discourse may even be considered to be paramount, for “no matter which interventions are used, they still have to be delivered within the therapeutic relationship” (Paley and Lawton, 2001, p. 15).

Such pan-theoretical frameworks offer suggestions as to how the interplays between relationship and specific interventions manifest themselves within diverse theoretic models. They also offer therapists the challenge that much greater flexibility and understanding is needed to accommodate the intricate components of the therapeutic process than currently exists. Additionally, no matter which interventions are used, they still have to be delivered within the therapeutic
relationship. This poses challenges for both researchers and practitioners. Therapist effects are a major source of variation within the findings of psychotherapy research studies, and research studies are probably measuring the effectiveness of therapists as much as they are therapies. Therefore, therapists cannot become complacent about the quality of their therapeutic competency. Additionally, researchers need to acknowledge their limitations. Studies that attempt to come up with ‘ultimate truths’ about the therapeutic process (i.e. which intervention works best) can sometimes ignore, on the one hand, the reality that therapy is not an exact science and, on the other, the uniqueness of an individual, their phenomenological reality and experience of the therapeutic process. Although theoretical understanding about the dynamics and processes of the therapeutic relationship can enhance the quality and effectiveness of the therapeutic alliance, theoretical understanding like any therapeutic technique or intervention (however flexibly implemented) is not in itself the relationship.

(Paley and Lawton, 2001, p. 15)

Paley and Lawton are saying something here of great importance about research into the practice, and in particular about the efficacy of the psychological therapies. In trying simply to evaluate the efficacy of psychological therapy, one must appreciate that one is also evaluating the manner in which different practitioners deliver it. In fact, one might even suggest – as I think Paley and Lawton are doing in the above quotation – that it is likely to be the combination of very many factors that is being evaluated in such research studies – such as the type of therapeutic intervention itself, the way in which a particular therapist delivers these interventions, and the manner in which individual clients are perceiving the nature of the therapeutic enterprise and how they may work with it; and it takes little imagination to understand that separating these elements of psychological therapy and evaluating their respective roles and their influences is something that is easier to suggest than it is to accomplish. For example, how would one propose to separate the therapy that is being delivered from the way in which it is being delivered? One could attempt so to do in the case of some of the more manualised forms of therapy by having them delivered strictly in accordance with the manual but in each case being delivered by a different practitioner, but even this doesn’t take into account the fact that different clients in psychological therapy are likely to differ considerably in how they perceive the process of the therapy with which they are hopefully engaging. Research into such a complex and sophisticated process as psychological therapy is seldom a straightforward business, and the design of such research studies is inevitably crucial in determining the overall internal validity/credibility/trustworthiness of the research itself and hence of the value of its findings.
4.3.8 The relational discourse as constituting the experiential component of therapy

We know, but currently find it hard to investigate or explain, why the client’s change and improvement depend so largely upon the interpersonal relationship with the therapist. This is what really changes him, for alone he can think about the same things, yet he remains as he is. We can account for this only if we notice (as we easily can in our own experience and in observations) how different is the experiencing of an individual in a relationship with another, than it is when he is alone, and also, how there are differences in his manner of experiencing in different relationships. I may say and think the same given content under these different circumstances, but my experiencing along with this content will be widely different. My sense of you, the listener, affects my experiencing as I speak, and your response partly determines my experiencing a moment later. What occurs to me, and how I live as we speak and interact, is vitally affected by every word and motion you make, and by every facial expression and attitude you show.

(Gendlin, 1997, p. 38)

Gendlin is articulating something of great moment here, for what he is asserting is that the psychotherapeutic relationship isn’t merely the facilitator that enables the client to feel sufficiently safe in order to be able to tolerate the anxiety generated by self-reflection (as suggested at subparagraph 4.3.6); nor is Gendlin here asserting that the client’s “interpersonal relationship with the therapist” (Gendlin, 1997, p. 38) is merely the vehicle by which the experience that constitutes the client’s therapy is delivered (as suggested at paragraph 4.3.7). What Gendlin is in fact asserting here is that it is the actual “interpersonal relationship with the therapist” (Gendlin, 1997, p. 38) that constitutes that very experience itself, and which constitutes the psychotherapeutic currency that many believe to be responsible for making the difference that enables the client to change, or that accounts for “the client’s change and improvement” as Gendlin (1997, p. 38) puts it above.

Bordin makes a similar point too, whilst comparing it with other traditions:

Thus, the building of a working alliance and its repair is not viewed as establishing a relationship in order to facilitate the person’s acceptance of treatment. This building and repair process is the treatment. This perspective contrasts sharply with the older view of rapport as a relationship factor which is needed in order for the client or patient to be willing to accept treatment. Even the more sophisticated psychoanalytic notion of the working alliance has not quite penetrated to this level. On the other hand, the psychoanalytic emphasis on interpretation of transference resistance does come very close to this formulation. Similarly, behavioral contracting procedures in behavior therapy touch some of the same issues.

(Bordin, 1983, p. 36 – emphasis features in Bordin’s original text)
Bordin is making the point here that the therapeutic alliance is an umbrella term that has relevance across virtually the whole panoply of the psychotherapeutic endeavour.

4.3.9 The relational discourse as a source of information about the client’s past experience and current expectations

Another way in which the psychotherapeutic relationship may be used in the practice of potentiality paradigm therapy is as a source of information about the client’s previous life experience and current expectations, as illustrated here by Power and Brewin.

There is now considerable agreement among different schools of psychotherapy on the importance of constructing adaptive meanings rather than eliminating logical errors, on the need sometimes to address existential issues, on the frequent problems created by some kinds of defensive processes, on the value of the therapeutic relationship as a source of information about the client’s past experience and current expectations, and on the existence of tacit meanings that may have a causal impact on client’s behaviour without their awareness. Despite the continued divergence of opinion on such matters as therapeutic technique and the origin of maladaptive emotions, this represents a considerable step forward.

(Power and Brewin, 1997c, p. 204)

Power and Brewin’s use of the expression “tacit meanings that may have a causal impact on client’s behaviour without their awareness” (Power and Brewin, 1997c, p. 204) reminds us of the concept of emotion schemes as articulated in Emotion-Focused Therapy (EFT) (Elliott, Watson, Goldman and Greenberg, 2004, pp. 25-28). It is as though these emotion schemes are like pre-programmed inclinations for responding in emotional, cognitive and behavioural ways to certain situations or triggers. We can often engage these pre-programmed ways of responding at an out-of-awareness level, which means that they certainly impact on our behaviour – both functionally and dysfunctionally – but often without us actually being able to understand or to plot the various pathways by which they exert their influence, which of course is what the psychodynamicists would assert is what gives them their power in our lived lives.
4.3.10 Experiential therapy’s way of distinguishing between the roles of the relational and the experiential discourses

Here, Watson, Greenberg and Lietaer are suggesting that the therapeutic relationship, if sufficiently “empathic and confirming” (Watson, Greenberg and Lietaer, 1998, p. 4) is to be considered “a crucial curative factor in its own right as well as facilitative of the other main task of this approach – that of deepening clients’ experiencing in therapy” (Watson, Greenberg and Lietaer, 1998, p. 4). Presumably, the rationale for wanting to deepen the client’s experiencing in therapy in spite of the fact that these authors consider the therapeutic relationship to be the “crucial curative factor in its own right” (Watson, Greenberg and Lietaer, 1998, p. 4) is because relationships have to be experienced and not merely studied, meaning that clients still have to experience the therapeutic relationship in order to benefit there from.

In the practice of experiential therapy a genuine empathic and confirming relationship is seen as a crucial curative factor in its own right as well as facilitative of the other main task of this approach – that of deepening clients’ experiencing in therapy. We distinguish between the therapeutic relationship and the experiencing tasks to anchor and differentiate among the different major approaches to experiential therapy.

(Watson, Greenberg and Lietaer, 1998, p. 4)

In the next quotation, Elliott, Greenberg, Watson, Timulak and Freire are writing about their impression of the chief relational characteristics of what they, in common with many of their colleagues, refer to as the humanistic-experiential therapies (HEPs):

Although these approaches have varied somewhat in technique and conception over the course of their historical development, in their contemporary expressions they nevertheless share several distinctive theoretical assumptions. Most important among these is the centrality of a genuinely empathic andprizing therapeutic relationship. In the HEPs, the therapeutic relationship is seen as potentially curative. Each person’s subjective experience is of central importance, and in an effort to grasp this experience, the therapist attempts to enter empathically into the client’s world in a way that goes beyond usual relationships or the subject-object dichotomy. Being allowed to share another person’s world is viewed as a privilege, and all HEPs reject the idea that the relationship between the client and the therapist can be reduced to an unconscious repetition of previous attachments. Rather, they generally share the view that an authentic but boundaried relationship with the therapist provides the client with a new, emotionally validating experience.

(Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 495 – emphases in original text)
This last phrase: “the therapist provides the client with a new, emotionally validating experience” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 495), reminds me of Alexander and French’s expression: “corrective emotional experience” (Alexander and French, 1946), whereby they suggest that the therapist’s role in psychoanalytic psychotherapy is to provide the client with an emotional experience that will, they hope, serve as a corrective, presumably to some parental blunder made in the early years of the client’s upbringing. Whilst Elliott, Greenberg, Watson, Timulak and Freire (2013, p. 495) stop short of this implicit claim of being able to ‘correct’ earlier wounding, they are clearly proposing to use “a genuinely empathic and prizing therapeutic relationship” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 495 – emphases feature in authors’ original text) “to enter empathically into the client’s world in a way that goes beyond usual relationships or the subject-object dichotomy” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 495).

Of course, this last reference – especially within the context of a relational discourse – to “the subject-object dichotomy” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 495) is reminiscent of Martin Buber’s (2010) I-Thou / I-It dichotomy.

4.3.11 The relational discourse as constituting the exploration, the expression and the examination of the client’s issues

In the following quotation, Ernesto Spinelli (2002, p. 111) suggests that the therapeutic relationship constitutes a valuable tool for undertaking some of the essential tasks of psychological therapy: in particular, expressing, exploring and examining the client’s material. Existential therapy certainly elides quite conveniently with the other experiential therapies, including the Person-Centred Approach (PCA), as practiced by people like Mick Cooper (2003, 2005, 2012), for example.

Perhaps more explicitly than any other current model, existential psychotherapy bestows an undisputed centrality upon the relationship between psychotherapist and client. Existential psychotherapists have long argued that it is through this relationship itself that the client’s issues are disclosed or “brought forth” for examination. In other words, the therapeutic encounter is seen to be the “microcosm” which both explores and expresses the client’s currently-lived experience of the possibilities and limitations of interrelational being in the world.

(Spinelli, 2002, p. 111)
I think it only fair to observe, if only in passing, that both the HEPs and the relational forms of psychological therapy in general, and the PCA in particular, might wish at least to assert parity with existential therapy’s claim to bestow an “undisputed centrality” (Spinelli, 2002, p. 111) upon the role of the psychotherapeutic relationship.

4.3.12 “I am “really myself” only when I am with you.”

In the following brief quotation, Gendlin is writing about the way in which, particularly in the earlier stages of therapy, the therapist helps the client to carry their own feelings forward so that they may reconstitute their experiencing for long enough to be able to acquire the capacity to carry them forward in their own self-process.

Personality change is the difference made by your responses in carrying forward my concrete experiencing. To be myself I need your responses, to the extent to which my own responses fail to carry my feelings forward. At first, in these respects, I am “really myself” only when I am with you.

(Gendlin, 1964, p. 136; 1970b, p. 161 – all emphases feature in both of Gendlin’s texts)

This phrase “I am “really myself” only when I am with you” (Gendlin, 1964, p. 136; 1970b, p. 161 – emphases in both of Gendlin’s original texts) illustrates just how significant the therapeutic relationship can be to clients, particularly in the early stages of potentiality paradigm therapy. The aim must be, however, to enable the client to grow sufficiently to be able to acquire or to regain the capacity for carrying their own experiencing forward long enough to be able to synthesise it into their own self-process without becoming dependent upon the therapist’s continued company or presence in this respect.

4.3.13 Congruence as a facilitator of experience and of meaning derived there from

In the following quotation, Greenberg and Geller are suggesting that incongruence is one form of indicator of a lack of the capacity to derive coherence of meaning.

In being congruent, I form the moments of my experience, as much as I purely discover them. This is a creative process, and when I’m being incongruent it is this process that is blocked. In asserting this, I am not saying there is not something there, but, until I put words to it to create coherent meaning, I am stuck. This
process of becoming congruent by coherence is more like the ‘seeing’ of a rabbit in a cloud formation than seeing a rabbit behind a tree. In seeing a rabbit in the clouds I configure what I see from what is there. So too do I configure myself in each moment from the elements of my experience. One form of incongruence, therefore, is not being able to find the words, symbols or referents to an experience, so as not to be able to make sense of and experience meaning.

(Greenberg and Geller, 2001, p. 136 – emphases in Greenberg and Geller’s original text)

What we have in this last quotation is Greenberg and Geller trying to express a connection between coherence of meaning and congruence, such that coherence of meaning amounts to a form of congruence, and its absence, to a form of incongruence. It is as though these authors are suggesting that, without the therapist’s need to hear the client’s account, the client may never find the words to lend their account expression, and that without that verbal form of expression, meaning(s) may never be recognised by the client.

What I personally find even more intriguing within the context of the present research study is Greenberg and Geller’s (2001, p. 136) use of the term to “experience meaning,” illustrating yet again just how closely these two discourses – those of experience and of hermeneutics – are inextricably bound up with each other, as if forming a kind of infinite progress, or as if constituting some psychological form of perpetual motion. (We will revisit the interconnectedness of the experiential and the hermeneutic discourses at paragraph 4.5.3, below.)

4.3.14 The risk of abandoning the safety created by the non-judgemental therapeutic relationship in favour of skills training

In this next quotation, Elaine Catterall tells a cautionary tale of what may go awry when trying to combine the safety of the non-judgemental psychotherapeutic relationship with some other form of relationship, such as a training relationship when attempting some form of skills training.

The greatest challenge for me when I explore the theme of parenting with clients is when their parenting styles and beliefs differ greatly from mine. At times Josie would talk very harshly and negatively about her children’s behaviour and describe responses that showed little empathy for them. At such times I know I found it difficult to experience her unconditionally, withdrawing from her frame of reference into imagining what that experience might be like for her children. When I retreated like this, back into my own frame (and my empathy and acceptance for
her were lost), I was aware of wanting to become directive by trying to get Josie to imagine the experience from the children’s point of view. Whilst this may have been helpful at times, it might also have been unhelpful and counter-therapeutic if I had taken it to another level where an exploratory challenge becomes authoritative advice-giving and where a perceived loss of empathy from me could have left Josie feeling negatively judged as a mother. The fact that this work is set within a multidisciplinary setting is enormously helpful in dealing with such conflicting issues because I knew that Josie had requested, and was receiving, help with her skills in managing the children’s challenging behaviour so I did not need to dwell on this important, but separate, issue of parenting skills. Whilst Josie had a somewhat harsh, no-nonsense attitude towards managing the children, she also had a wonderfully soft and imaginatively playful side which the children also benefited from, so if our work together had got bogged down in how she could ‘improve’ her parenting skills, it may have overshadowed a celebration of what she was doing so well already.

(Catterall, 2007, p. 65)

The moral of this cautionary tale would seem to be not to underestimate how fragile the non-judgemental nature of the psychotherapeutic relationship can be: how easily its hard-won safety may be lost, and how hours of patient work may be undone by trying to mix the pathology paradigm of skills training with the potentiality paradigm of psychological therapy. Perhaps a practice dilemma of this nature may be less easy to reconcile where, rather than the “multidisciplinary setting” evidently enjoyed by Caterall (2007, p. 65) and her client, the practitioner is working single-handedly, possibly in private practice, but in any case largely unaware of what other assistance may be available to the client. The moral of this perspective is just how important it can be to familiarise oneself with those circumstances in which our clients have to lead their lived lives.

4.3.15 Technique as the enemy of relatedness

Writing under the heading of “Letting Go of techniques,” Mearns and Cooper have the following to say about an over-reliance on technique at the expense of the immediacy and the depth of the therapeutic encounter:

Counselling and psychotherapy trainees are often keen to have some technique upon which to hang their practice, but such a way of working can make it more difficult to meet clients at a level of relational depth. This is for a number of reasons. First, if we try to implement a technique, our attention is likely to be on what we are doing to our client and its outcome, rather than on the particular human being present to us. In other words, our relationship with the client is no longer immediate, but mediated by certain plans and actions. Second, if we relate to our
clients through techniques and therapeutic strategies, we are less likely to be open to them as the unique human beings that they are, but will be looking for particular responses and outcomes from them across particular dimensions. And third, the more we are relating to our clients in a technique-based way, the more we lose our own naturalness, spontaneity and uniqueness and start to relate in formulaic and rehearsed ways. This, again, reduces the possibility of an immediate and direct human encounter.

(Mearns and Cooper, 2005, pp. 117-118 – emphases, including that that is expressed by irregularity of punctuation, feature in Mearns and Cooper’s original text)

Whilst I can readily lend my support to these sentiments, this is a point to be made that, at least in part, relies on what one means by technique, for, as these authors go on to say in their next paragraph, “even ‘person-centred’ ways of working can become techniques if implemented in formulaic ways” (Mearns and Cooper, 2005, p. 118). Techniques represent a commodity, and as such, they can have no sense of agency about them, in which case they are value-neutral. Therefore, any value attaching to, in this instance, technique or techniques can only derive from the agency of the person who is either using them or proposing to use them. As with all commodities, their value – whether used for good or for ill – depends upon the attitude of the user, which is sometimes expressed as the relationship that we have with them, a form of expression that is particularly apposite when discussing a discourse that is all about relatedness. So, in the instance cited above by Mearns and Cooper (2005, pp. 117-118), maybe it is more a case of avoiding working formulaically than in eschewing altogether having recourse to technique in the practice of the psychological therapies.

4.3.16 Empathy or empathic understanding

Of all the concepts that are considered basic to the psychological therapies, empathy – or “the convention of empathic listening” as Spence (1982, p. 112) puts it – is probably the one about which most psychological therapists will have heard the most over the years. Empathy can have at least two important effects: first, it enables practitioners to develop more of a finely tuned understanding of their clients, and in particular of what it may feel like to inhabit their inner personal world; and second, when perceived by clients, this empathy enables these clients to place more trust in the therapeutic relationship because it seems to them that their practitioner is making a real effort to understand them, quite
possibly in a way that few others will have ever done before in their lives. Timulak and Lietaer put it thus:

[T]he client’s experience of feeling good in the presence of the therapist [is] due to mutual attunement, and because of being respected and valued.

(Timulak and Lietaer, 2001, p. 66)

As well as facilitating greater levels of trust and hence of truthful self-disclosure on the part of clients, this second effect of empathy is facilitative of the more interactive, dialogical way of working with its attendant emphasis on process to which Watson, Greenberg and Lietaer refer in the following quotation:

We also trace the development and distinguish between the more intrapsychic and more interpersonal perspectives to practice to capture the evolution of experiential therapy from its original focus on the client as the primary source of change to its current interpersonal focus that includes both the growth forces within the individual as well as the confirming presence of the therapist as contributing to the change process.

(Watson, Greenberg and Lietaer, 1998, p. 4)

In this last quotation, Watson, Greenberg and Lietaer are referring to an evolution whereby some forms of the psychological therapies are moving towards a more dialogical vein of practice – a development that is further illustrated in the following subparagraph (4.3.17).

4.3.17 Recent developments in the relational aspects of the psychological therapies

Following on from Watson, Greenberg and Lietaer’s emphasis on the “current interpersonal focus” (Watson, Greenberg and Lietaer, 1998, p. 4) immediately above (at subparagraph 4.3.16), many fields of therapy are now seeing new, more dialogical adaptations to their approaches, as people like Anderson and Goolishian (1992) and Mearns and Cooper (2005, pp. 12-15) have documented.

Given the developments outlined above, it should come as no surprise that recent years have witnessed a growth in relational and intersubjective approaches to counselling and psychotherapy.

(Mearns and Cooper, 2005, pp. 12)
Some of this movement towards more dialogical ways of working may be attributed to the rise of the social constructionist movement, and in particular to its increasing influence over the psychotherapeutic professions, as documented by Fruggeri (1992).

With respect to the move away from the traditional person-centred core conditions of unconditional positive regard, empathy and congruence towards more dialogical configurations of person-centred therapy (PCT) mentioned by Mearns and Cooper (2005, p. 14), another way of seeing this is that it has always been the dialogical nature of person-centred therapy that has constituted such a central form of psychotherapeutic currency in PCT, but that it has been PCT’s focus on those traditional core conditions of unconditional positive regard, empathy and congruence that has facilitated the development of this more dialogical way of working in terms of the practice of PCT.

Let us not, however, make the mistake of casting this turn to more dialogical ways of working as representing an exclusively recent initiative. Gendlin was writing about such a “period of transition” as far back as in the 1960s, when he wrote the following:

The present explorations in psychotherapy reflect a period of transition. The new essential dimensions, shared very broadly by some therapists in all orientations, are the relationship process between two humans and the therapeutic feeling process. Both of these dimensions are experiential in character. For this reason, I am calling the new therapy “experiential therapy.” In every orientation, today, we find discussion for and against the new emphasis, in contrast to the technique forms on which we once concentrated so heavily.

(Gendlin, 1966, pp. 211-212; 1970a, p. 73 – emphasis in both of Gendlin’s texts)

In the following quotation, although writing specifically about existentialism on this occasion, Gendlin reinforces this message about a turn towards more dialogical ways of working once again just a few pages further on from the previous quotation.

Previous theories looked upon the interpersonal relationship second; they considered the individual first. The individual was explained (his behavior, personality, feelings, and so forth). Then, when two individuals met, they “communicated,” or “interacted.” Such interaction was explained in terms of basically individual entities. Behavior was explained out of individual motives, drives, patterns, or tendencies. Outside “stimuli” set off patterns or forces in the individual, and these determined his behavior. The individual was regarded as a self-contained box, and his internal machinery determined his feelings and acts.

(Gendlin, 1966. p. 224; 1970a, p. 80)
The message of these last two quotations is clear: that half a century ago, psychotherapeutically speaking, we were considered as individuals first, and only second as relational beings who have both the capacity to influence those around us and the potential to be open to being influenced by those around us.

Focussing now on clients’ perceptions of working at relational depth, Knox also writes about a more dialogical way of relating between clients and their practitioners in the following terms:

Some participants talked of a bi-directional flow to and from their therapist, and most spoke of a mutual understanding that included an awareness of each other’s thoughts and feelings without words. The lack of a power differential was often emphasised, with most describing a feeling of equality and mutuality. In terms of ‘connection’, most participants talked in terms of an ‘encounter’ or ‘intense meeting’, emphasising the emotional nature of the contact, and around half described it as positive or complete.

(Knox, 2008, p. 186)

To return now to Gendlin for a moment, he suggests in the following quotation that those elements of therapy “that make for personality change” are likely to be brought about by “the behavioral differences in client and therapist speech and action,” and that these differences “will be differences in manner of process, not content” (Gendlin, 1997, pp. 39-40 – emphasis features in Gendlin’s original text).

Now, if we can so describe the sort of therapeutic situation and the functions of experiencing that make for personality change, then clearly we can hope to look for and define the behavioral differences by which we notice it, and the behavioral differences in client and therapist speech and action that bring it about. But these will be differences in manner of process, not content. They will be behavioral differences selected by considering how experiencing functions, and the resulting differences in the manner of behavior, interaction, and so forth. They will not be the repressed or aware personality contents with which in the past we have been attempting to organize human phenomena.

(Gendlin, 1997, pp. 39-40 – emphases feature in Gendlin’s original text)

So, rather than the old – or perhaps we could say ‘classical’ intrapsychic approach to psychological therapy, Gendlin is promoting here more dialogical ways of working, as indicated by his above cited references to “process” and “interaction” (Gendlin, 1997, p. 39).
In the next quotation, McLeod accounts for this trend in the following terms:

There is a growing edge of theory, practice and research in counselling and psychotherapy that aims to understand therapy as a special type of *conversation*, and then to harness this understanding in the development of new ways of offering therapeutic relationships. There are several interlocking strands within this emerging approach, drawing upon contemporary thinking within the social sciences on the analysis of discourse, narrative and conversation, and [*sic*] incorporation into therapy [*sic*] a postmodern ‘way of seeing’ persons that owes a great deal to the writings of philosophers such as Kenneth Gergen and Michel Foucault. Useful introductory reading around some of the possible implications for therapy of taking language and conversation seriously can be found in McNamee and Gergen (1992), Sexton and Griffin (1997) and Neimeyer and Raskin (2000).

(McLeod, 2001, p. 192 – emphasis features in McLeod’s original text)

Here, McLeod is arguing for a way of seeing the psychological therapies as comprising forms of “discourse, narrative and conversation” (McLeod, 2001, p. 192) that is trying to move psychotherapy away from the notion of one person trying to help another in favour of a more dialogical two-person encounter, whereby it is the dialogue that flows between the two of them that then becomes the main focus of attention, thereby co-creating the therapeutic relationship into a safe space for healing where growth may also occur.

Writing about process-experiential therapy (PET) and emotional-focused therapy (EFT) – themselves more recent developments of the experiential therapies – Elliott *et al* also refer to the “client-centered relational processes of active empathy, prizing/warmth (including humor), and therapist presence/genuineness” as “classical” with its attendant implications of constituting both an original way of working as well as a somewhat outmoded way, too, especially when compared with Bordin’s later concept of the therapeutic or “working alliance” (Bordin, 1979, 1983).

In the case presented here, most importantly, a strongly positive therapeutic relationship appears to be key, whether understood in terms of the classical client-centered relational processes of active empathy, prizing/warmth (including humor), and therapist presence/genuineness or in terms of working alliance (bond and task/goal agreement).

(Elliott *et al*, 2009, p. 556)
In the next quotation, Elliott, Greenberg, Watson, Timulak and Freire describe the more recent developments in the Humanistic-Experiential Therapies (HEPs) more broadly as follows:

Recent developments in the HEPs include a revival of research on person-centered therapy (PCT) and continued study of focusing-oriented and emotion-focused approaches. Like gestalt therapy, these newer approaches use experiments in directed awareness to help focus and concentrate attention on unformed experience and to intensify its vividness. For example, focusing-oriented therapy emphasizes the creation of new meaning by focusing awareness on bodily feelings, while EFT integrates person-centered and gestalt therapy traditions, emphasizing both the relationship and the process of reflection on aroused emotions to create new meaning. In practice, these and other process-guiding contemporary approaches strive to maintain a creative tension between the person-centered emphasis on creating a genuinely empathic and prizing therapeutic relationship, and a more active, task-focused process-facilitating style of engagement that promotes deeper experiencing and consequent meaning creation. Although coming from a different tradition, “third generation” cognitive-behavioral therapy (CBT), such as mindfulness-based cognitive therapy, acceptance and commitment therapy, and compassion-focused therapy have expanded to have much in common with HEPs.  

(Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 496 – emphasis in original text)

The psychotherapeutic exercises that Elliott, Greenberg, Watson, Timulak and Freire are describing in this last quotation actually amount to assisting clients to conduct research into how they create meaning – by attaching meaning to their experiencing – through the use of Gendlin’s (2003) focussing “techniques” as they are referred to on the back cover of this volume (Gendlin, 2003). This illustration confirms for me just how analogous the practice of the psychological therapies can be to the practice of research.

Returning to our consideration of the recent turn towards more dialogical forms of therapy, Heron and Reason, writing about co-operative enquiry, also give us a theoretical account of the inevitability for this recent trend, as follows:

[C]ritical subjectivity extends to critical intersubjectivity. Because our personal knowing is always set within a context of both linguist-cultural and experiential shared meaning, having a critical consciousness about our knowing necessarily includes shared experience, dialogue, feedback, and exchange with others, and this leads us to the methodology of cooperative inquiry.

(Heron and Reason, 1997, p. 283)
But perhaps the most significant element of the quotations cited in this subparagraph is the following passage:

In practice, these and other process-guiding contemporary approaches strive to maintain a creative tension between the person-centered emphasis on creating a genuinely empathic and prizing therapeutic relationship, and a more active, task-focused process-facilitating style of engagement that promotes deeper experiencing and consequent meaning creation.

(Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 496 – emphasis in original text)

This last passage asserts that the “more active, task-focused process-facilitating style of engagement” that is fostered by “the person-centered emphasis on creating a genuinely empathic and prizing therapeutic relationship” “promotes deeper experiencing and consequent meaning creation” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 496). Note here the connection yet again between “experiencing” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 496) and “meaning creation” (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 496). Along with experiencing goes the creation of meaning, “as naturally as night follows day” as Shakespeare (Polonius: “as the night the day” in Hamlet, Act I, Scene iii) once remarked; and the deeper the experiencing, the more profound the meaning that will be created or distilled there from. It is as though what is being claimed in this passage (Elliott, Greenberg, Watson, Timulak and Freire, 2013, p. 496) is that the deepest form of experiencing is achieved within the parameters of relationships. Indeed, this theme runs right throughout this subparagraph (4.3.17) as constituting something of a leitmotif in terms of its relational message for the continuing development of the psychological therapies.

And yet there is still one remaining acknowledgement that needs to be made about this contemporaneous dialogical shift in the approaches to the practice of the psychological therapies, and interestingly enough, not only does it predate any of the preceding quotations cited in this subparagraph, it references the work of Scheff (1966) from the mid-1960s just in case any of us should think that this more dialogical turn is founded on any new or contemporary way(s) of conceptualising about the aetiology of mental illness.

Mental illness is not an innate property of the individual but the product of interactions between the person and the social environment.

(Frank and Frank, 1991, p. 278; also cited in Alarcon and Frank, 2012, p. 93)
What Frank and Frank are trying to renegotiate here is the way in which mentally ill people had previously been considered as being responsible for their own mental health issues, without any acknowledgement that society will also have had a part to play in bringing about this state of affairs. The reconceptualisation being suggested here by Frank and Frank is that, whilst some people may indeed be born with a predisposition to respond to environmental triggers by becoming what we know as ‘mentally ill’ – or by displaying certain forms of behaviour that it suits society to label as bizarre, and hence to interpret as constituting sufficient grounds for a diagnosis of mental illness in terms of satisfying the diagnostic criteria contained either within DSM V (American Psychiatric Association, 2013) or else within ICD-10 (World Health Organization, 1992) – the ‘breakdown’ is just as much on the part of society that has made manifest its unwillingness to relate to, or to be in dialogue with such people, thereby finally condemning them to lead the life of a mentally ill person, although that same society would doubtless still prefer to suggest that it was the mentally ill individual’s lack of capacity to relate to society that has earned them the dubious privilege of this mental health diagnosis and the label and the concomitant stigma (Goffman, 1990) that this diagnosis and label subsequently attract. After all, it is surely more convenient to scapegoat an individual, particularly if s/he may be labelled as ‘weak,’ than it is to acknowledge that it is society that may be at fault for having marginalised her or him.

4.3.18 Relational and hermeneutic crossover

Finally, here are a couple of quotations that could equally well qualify for inclusion under the hermeneutic discourse as they do under the relational discourse, and so I have included them in this position as a means of leading us from the relational discourse into the hermeneutic one, thereby illustrating how the two may be viewed as linked. Indeed, this linkage itself becomes a significant finding of this piece of research, as explained and documented below at subparagraph 4.5.1.

In person-centered therapy, congruence has always been seen as being a part of a triad of therapeutic attitudes along with empathy and unconditional positive regard. In dialogical Gestalt therapy, the emphasis on therapist’s genuineness or authenticity is based on Buber’s I-Thou relationship in which a genuine meeting of client and therapist involves, among other things, the therapist’s presence and non-exploitiveness. The Rogerian attitudes of a willingness to understand the client and the prizing of a client’s experience, and Gestalt notions of presence and non-exploitiveness, all entail intentions that are necessary for congruence to be
therapeutic. To be facilitatively congruent, therapists thus need to be committed to understanding and respecting their clients. They need to operate both with a genuine desire not to have power over their clients and with a belief in the therapeutic importance of accepting their clients’ experience as valid. Finally they need to be fully present and in contact with their clients as well as themselves. These intentions both precede being facilitatively congruent and are themselves important aspects of therapeutic congruence.

(Greenberg and Geller, 2001, p. 132)

What Greenberg and Geller refer to here as “a willingness to understand the client” (Greenberg and Geller, 2001, p. 132) really amounts to a prioritisation of the therapist’s need to understand the client over and above any need to show off or to try to influence the client by promulgating or insinuating their own views into the psychotherapeutic dialogue.

In the next quotation, Saari is writing about the nature of meaning and how in some senses it necessarily has to embrace a relational element in order that any meaning can be agreed upon as having been successfully shared between two or more people, at which point it enters the lexicon of meaning-making.

Stern and others, however, have also viewed meaning as created in the interaction between at least two people. “Meaning results from interpersonal negotiations involving what can be agreed upon as shared. And such mutually negotiated meanings (the relation of thought to word) grow, change, develop and are struggled over by two people and thus ultimately owned by us” (Stern, 1985, p. 170). The assumption that meaning is owned by more than one person requires a revision of our comprehension of the fundamental nature of communication. In previous conceptualizations, the myth of the isolated mind (Stolorow & Atwood, 1992) has usually been perpetuated in part by the accompanying use of a transmission model of communication, expressing the accepted belief that interpersonal communication involved a message fully formulated in advance by the sender and transmitted intact to the receiver. Yet the idea that communication is the intact transmission of a preformulated message is highly questionable. The simple childhood game of “gossip,” for example, illustrates the extent to which a single statement regularly becomes distorted when transmitted secretly and sequentially, from one person to another, through a number of individuals.

The Russian psychologist Bakhtin has pointed out that since all communication, even a monologue, has an audience, the content of all communication minimally involves contributions from two persons. There are at least three reasons for his argument:

1. Even simple statements can be interpreted in more than one way by the listener, given that a potential multiplicity of meanings can be attributed to any one statement.
The influence of context on meaning causes any statement or text to be interpreted according to its context, and the contexts of any two communicative partners will invariably be different. Thus, each will interpret the content from the individualized perspective of his or her experience prior to the communication.

It follows, from the fact that a multiplicity of meanings can be attributed to any one statement and from the contextual influences of interpretation and response on meaning, that the topic of communication is essentially negotiated. Each communicative partner will make adjustments in the content of the message sent in order to conform to the perceived interest and understanding of the other. Bakhtin also notes that communicative partners interact so as to agree not only on what is to be said but also on what is not to be said.

**Identity as Emerging and Modified Through Dialogue**

Personal identity can therefore be seen as a meaning system constituted with other people through dialogical processes.

(Saari, 1996, pp. 146-147 – emphases feature in Saari’s original text)

And just think how much of a psychotherapist’s work is bound up with client identity!

But it strikes me that the central tenet contained within this subparagraph (4.3.18) is that meaning that is not shared is not really understood, as it will not have been successfully negotiated and hence neither shared nor agreed upon by those parties who are party to the dialogue. Even if a solitary unaccompanied person is merely thinking through an argument with themselves, in order to settle upon a satisfactory meaning, they will first have had to have entered into a dialogue with themselves and to have agreed upon that dialogue’s resultant meaning(s). I have little doubt that this constitutes one instance of why people may sometimes be overheard talking to themselves: because they are literally rehearsing a form of dialogue with themselves in order to determine if an argument stands up to scrutiny, even if, at least for the time being, it is to be just their own self-scrutiny.

**4.3.19 Summative analysis of the data relating to the relational discourse**

There has been a truly extensive amount written about the role of the therapeutic relationship in the practice of the psychological therapies, and I shall not even attempt to summarise most of it here; rather, I shall focus on those aspects of the therapeutic relationship that are germane to this particular research study.
Self-evidently, the most significant contributions to our consideration of the relational discourse are the three main uses to which the therapeutic relationship may be said to be put in the practice of potentiality paradigm therapy. The first use is to help to create a safe psychological space that the client may enter into and inhabit during the course of their therapy. This safety is designed to enable the client to tolerate the anxieties that represent a natural corollary of opening up to talk about some very personal material with somebody who, up until very recently, had been a total stranger to them. It matters less how their resistance is overcome: whether by virtue of the therapist delivering the three Rogerian ‘core conditions’ – traditionally cited as unconditional positive regard, empathy and congruence – or by a focus on achieving the three main foci of Bordin’s (1979, 1983) concept, often referred to as either ‘the working alliance’ or as ‘the therapeutic alliance’ – usually expressed in terms of bonds, goals and tasks – or by the rhetorically persuasive relationship advocated by Frank (1961, 1973) and Frank and Frank (1991), whereby the client’s emotions and their capacity for overcoming their sense of demoralisation are aroused. All that really matters is that the client’s trust in the therapeutic relationship, and hence in the practitioner, is established as soon as possible so that the work of therapy may proceed.

The second way in which the psychotherapeutic relationship may be used is to deliver the experiential component of potentiality paradigm therapy to the client. This focus on delivery presumes that something other than the therapeutic relationship itself constitutes the currency that constitutes the ‘active ingredient,’ to coin a term borrowed from the discipline of pharmacy. This could take the form of some kind of therapeutic exercises, such as are often referred to as ‘experiments’ by gestaltists and by transactional analysts, although the more cognitively-derived approaches to therapy have made quite extensive use of what are often referred to as ‘homework exercises,’ whereby clients are given structured tasks to complete in between therapy sessions, during the course of which they are typically asked to practise relying upon a new way of conceptualising the risk-taking or shame-attacking homework assignment that will hopefully enable them to complete the problematic task with less anxiety or other debilitative reaction(s).

The third use of the psychotherapeutic relationship is where it is this very therapeutic relationship itself that constitutes the main experiential component of the work. A typical rationale underpinning such a piece of work could be that if the therapist can convince the client that they can accept and even admire the client, warts and all, then hopefully this
more positive evaluation of them may persuade the client her- or himself to accept themselves as either acceptable or lovable, or whatever else may represent the achievement of the challenging issue that will have brought them into therapy. Bordin (1983, p. 36) makes the additional point that any breakdown or transitory rupture of the therapeutic relationship offers an opportunity for a repair of this dislocated relationship, which should help to instil in the client confidence that mistakes or misunderstandings in relationships do happen from time to time, but that they can be recovered and need not therefore constitute a once-and-for-all death sentence to their relationships.

Whilst a lot more may be said about the psychotherapeutic relationship – and indeed often has been throughout the main body of this paragraph (4.3) – there is perhaps one further point that is worth making here about the special role accorded to the psychotherapeutic relationship when it constitutes the main experiential component of the psychological therapies. In my own experience of working with the psychological therapies, instances where this therapeutic relationship itself constitutes the experiential discourse are usually more likely to be characteristic of potentiality paradigm therapy than of pathology paradigm therapy. There are of course exceptions to this observation. One set of exceptions is accounted for by the obvious ‘truth’ that many psychological therapists practice more than one form of therapy: they may, for example, practise potentiality paradigm therapy with some clients, and pathology paradigm therapy with other clients. Furthermore, it is perfectly likely that some practitioners of the psychological therapies have actually evolved a form of practice whereby both kinds of therapy are integrated and deployed variously according to sometimes shifting client needs. Whilst this may muddy the theoretical waters somewhat, it is my contention that creativity and the skilful adaptation of different approaches to working psychotherapeutically with clients has always been the hallmark of the advanced practitioner of the psychological therapies. Theory should never be allowed to usurp the prerogative of the practitioner exercising her or his clinical judgement in the service of that which the therapeutic dyad has agreed constitutes the best interests of the client.
4.4 Data from the literature in support of the hermeneutic discourse

4.4.0 Introduction

By the term the hermeneutic discourse, I could be intending to convey anything that has any relation with interpretation: whether how we as therapists may interpret our clients’ material, or how they themselves may be interpreting their own experiencing of their lived lives. Whilst these instances of hermeneutics may still remain valid within this piece of research, at least to some extent, what I am much more likely to be referring to within the context of this piece of research, however, are instances that relate more to meaning and to our understanding of meaning, including to the therapist’s understanding of the various meanings that are embedded in their clients’ material, as well as to the various meanings that their clients may be ascribing either to their own experiencing or to their therapists’ utterances during the course of their engagement in the practice of the psychological therapies.

Hermeneutics, or the study of meaning and meaning-making, is a pivotally important sub-discipline of the psychological therapies, and one to which whole books have been devoted (Power and Brewin, 1997a; Rosen and Kuehlwein, 1996). Potentiality paradigm therapy is usually presumed to operate from a constructivist ontology, if only because the practice of the psychological therapies is all about helping individual clients to discern a sense of meaning from their experiencing of their lived lives, and because this type of meaning-making takes place inside the brains of the individuals who make up our clientele. Therefore, such meaning is constructed (or made, in the case of meaning-making) by those of us who participate – whether as clients or as practitioners – in those of the psychological therapies whose epistemologies are subsumed under the aegis of the potentiality paradigm.

Alarcon and Williams assert that Frank (1961, 1973) and Frank and Frank (1991) “defined . . . hermeneutics as “the study of understanding and of the correct interpretation of what has been understood” ” (Alarcon and Williams, 2012, p. 94). Whilst I agree with the centrality of the role of hermeneutics that they ascribe to Frank’s (1961, 1973) and Frank and Frank’s (1991) take on the practice of psychotherapy, I should nevertheless prefer to put the focus on meaning and its understanding rather than on interpretation. My other constructivist quibble is with the positivist notion that there is a “correct” interpretation
that is not open to being contested in some way if only we could identify it; as there are many ways to understand something, no one understanding can necessarily be considered as constituting the one and only correct understanding (see subparagraphs 4.4.9, 4.4.10 and 4.4.13, below). Indeed, Julia B Frank emphasises the importance of meaning to the practice of the psychological therapies by citing the following quote, which she ascribes as being from Frank and Frank (1991, p. 92):

The assertion that psychotherapy operates in the realm of meanings raises questions as to which intellectual disciplines are best suited to examining its processes.

(Frank, 2012, p. 67)

Edward Erwin (1997, p. 132), writing about psychoanalysis and the psychodynamic therapies, has the following to say about what her terms “The Hermeneutic Model:”

The idea that psychoanalysis either is or should be a hermeneutic science can be traced back to the work of the psychiatrist-philosopher Karl Jaspers. There are a variety of hermeneutic positions, but one holds that Freudian theory is primarily about meanings rather than causes. Some who take this position treat the analyst’s interpretations as analogous to the reading of a text. Consequently, it is argued, it is an error to judge them by standards that are employed in judging causal hypotheses of the natural sciences. Just as in reading a text, ultimately insight and intuition can and must be appealed to in judging Freudian hypotheses.

(Erwin, 1997, p. 132)

Although psychoanalysis lies beyond the remit of the present research study, it is refreshing to hear a philosopher like Erwin acknowledging that the cause of how somebody came to be as they are psychologically speaking is of less significance than the meaning(s) that it has for them and for their functioning. This is because if what we mean by our use of the term cause in this instance is more about the acquisition of mental disturbance rather than about its perpetuation or maintenance (Dryden, 1984), then the latter category is of infinitely more importance than the former. This is because our neuroses (to borrow the psychoanalysts’ terminology for a moment) were often functional when they were initially acquired, in as much as they often served a much-needed form of defence at the time; they only became neuroses when they were perpetuated or maintained long after there was any real need for them. Psychological therapists who play the game of trying to work out why certain neurotic behaviour first arose could well be missing the more useful point of trying to work out what meanings these neuroses held for their clients once they became perpetuated beyond their usefulness and hence truly became neuroses.
Another sense in which hermeneutics can play an important role in the practice of the psychological therapies is in helping to adapt them to intercultural settings. Alarcon and Williams (2012, p. 95) state that “[t]he cultural content of rhetoric and hermeneutics is indisputable” (Alarcon and Williams, 2012, p. 95), meaning that the assiduous practitioner will need to take matters of different cultural meanings into account when working with clients from cultural backgrounds with which the practitioner may be relatively unfamiliar (see subparagraph 4.4.12, below). Whilst Rosen (1996, p. 26) says that “Hermeneutics is the art of interpretation and understanding” (Rosen, 1996, p. 26), my preference lies once again with the emphasis falling on the therapist’s responsibility to understand what the client is trying to express, and to help the client to discern meanings that suit their needs, rather than on the therapist’s right to interpret the clients’ experiences in their own pet way.

4.4.1 A cautionary and self-explanatory tale about how “measurement generally substitutes for meaning in psychology”

The quantitative aspect of psychology is a concrete way of carrying out its other criterion of being empirical. Numbers provide the neutral context of meaning that allows psychology to abstract a phenomenon from its given context of meaning. Although this is not the only way that psychology achieves this abstraction, it is still true that measurement generally substitutes for meaning in psychology.

(Cusinato, 2012, pp. 333-334 – emphasis features in Cusinato’s original text)

But can meaning ever be “neutral,” or mustn’t it always be considered context-specific or contextually bound? The way to be empirical about meaning is surely to recognise the quality of whatever meaning any given experience has for any given client. And to those who would claim that such is not possible, I would assert that psychological therapists are doing just this on a daily basis in their clinical work with their clients. It is true that we probably aren’t well used to measuring it in any objective way – such as by weight, unless the material hangs particularly heavily upon the client’s soul – but we have been measuring and evaluating how meaning hangs around our clients’ shoulders like a shroud since time immemorial, when the therapists of the day were then priests or teachers, because this is how human beings actually measure such material: subjectively, and without any apology for so doing. In many respects, the inclusion of a hermeneutic discourse could be viewed not so much as a further requirement of therapists, but rather as simply a recognition that most effective therapists will have already been attending to matters of meaning and
understanding in their clinical work, although perhaps some may not have been as
consciously aware of this element of their practise as they may have been, and still others
may not have been used to referring to it in terms of hermeneutics.

4.4.2 “The shift from positivism to interpretive strategies and social
constructionist epistemology”

The hermeneutic arena has played a highly significant role in the establishment of the
constructivist research paradigm. By the time that we had arrived in the 1990s, after much
questioning during the 1970s and 1980s, there finally took place a gradual acceptance that
positivist research wasn’t going to tell us everything about everything, and possibly that it
had nothing to tell us about some things – an idea that would have been considered
unimaginable in the positivist era of the 1950s! In their book *The Explanation of Social
Behaviour*, Harré and Secord (1972) express their dissatisfaction with the previous
(positivist) regime, which they describe as “a mechanistic model of man, a Humean
conception of cause that places stress on external stimuli, and a related methodology based
on the logical and epistemological theories of logical positivism” (Harré and Secord, 1972,
p. 29). Harré and Secord have the following to say about the centrality of meaning when
evaluating the social behaviour of human beings:

> It is complex and deliberate actions, unified through their contributions to the
meaning of the total act, that constitute the true subject matter of human social
behaviour.

(Harré and Secord, 1972, p. 40)

Writing a couple of decades later, Goldberger has this to say looking back on how this
paradigm shift (after Kuhn, 1962, 1970) had been brought about.

> It seems clear that much recent developmental and clinical theory, including my
colleagues’ and mine, is part of *new paradigm psychology* and reflects the shift
from positivism to interpretive strategies and social constructionist epistemology.
The growing emphasis within psychology on the value of narrative analysis,
hermeneutics, and qualitative methodology in the study of human behavior is not
unlike what my colleagues and I call “connected knowing” – the entering into the
narrative text of the other.

(Goldberger, 1996, p. 172 – emphasis features in Goldberger’s original text)
Partly as a way of illustrating how this paradigm shift influences the way(s) in which we view our psychological being, our psychological feelings, our experiencing and the meaning(s) that we attach to our experiencing through symbolisation, the following quotation from Gendlin reflects this paradigm shift from positivism to constructivism:

When we conceptualize or express how we are, what we feel, what our feelings imply, we are not digging up things which were down under there in just the same shapes as they now have, when we express them. Rather, to “dig up,” to “express,” these are ongoing life processes. They make meaning, rather than simply finding meaning already there.

(Gendlin, 1966, p. 232; 1970a, p. 85)

In other words, when Gendlin writes “[t]hey make meaning, rather than simply finding meaning already there” (Gendlin, 1966, p. 232; 1970a, p. 85), he is reiterating one of the most basic distinctions between constructivism and positivism: that we construct or create our own truths as well as the meaning(s) that we attach to our experiencing, and that these constructions are our own responsibility.

Indeed, getting to know psychology from the perspective of a “social constructionist epistemology” (Goldberger, 1996, p. 172) must promote in one the effect of it appearing to be an altogether different discipline when compared to a positivist take on psychology. Let’s flesh this difference out a little more by having recourse to the following illustration, this time provided by Rosen:

Hermeneutics is the art of interpretation and understanding. Its origins lie in the disputes around the interpretation of the Bible that arose during the Reformation. In recent times, much attention has been devoted to the interpretation of the Constitution of the United States and to the interpretation of historical events. Literary criticism, also, is permeated with various approaches to establishing a philosophical basis for the interpretation of literature. The traditional position on interpretation can be found in the work of Hirsch (1967), who argues for searching out the intended meaning of the author in order to understand objectively the meaning of the literary piece the author has produced. In Hirsch’s view, the meaning is determinate and fixed, waiting to be found by the reader who works hard at discovering it. As Hirsch somewhat paradoxically states, “Objectivity in textual interpretation requires explicit reference to the speaker’s subjectivity” (p. 237). At the other end of this spectrum of literary criticism, we have the radical view of Fowles (1965) . . . , which places emphasis upon the reader’s views and likens interpretation of a work of literature to a Rorschach test. From this perspective, meaning is completely subjective and indeterminate, residing in the interpreter.

(Rosen, 1996, pp. 26-27)
Only a couple of pages later in this same work, Rosen makes the following points about the objective and the subjective in psychological hermeneutics.

Contemporary psychoanalysis has taken up the question whether achieving objective truth in interpretation is necessary or even possible. If theoretical supremacy is regarded as characteristic of psychoanalysis as a general psychology and a theory of psychopathology, then regardless of what material arises from the analysand, that material will always be assimilated by the analyst to fit the preexisting objective truth that the theory posits. Arlow (1989) and Brenner (1982) are two psychoanalysts who exemplify the position that the theory constitutes valid and objective truth and who regard other theories as insufficient and false in explaining human motivation and behavior. In contrast to this position of theoretical supremacy, the hermeneutic endeavor seeks to forge meaning and understanding out of the practical activities and contextualized lives of individuals, without benefit of preestablished theoretical assumptions.

The question of truth and objectivity in psychoanalysis concerns not only the truth value of the theory out of which the analyst operates but also whether the analyst can expect to uncover historical truths from the patient’s free associations and remembrances of things [sic] past (as Proust [nearly – Ed] put it). The view that one can expect to uncover such truths is rooted in Freud’s archeological metaphor that suggested the analyst is on an expedition to dig up fragments of the patient’s actual life that lie buried in the unconscious. Yet Spence (1982), in a radical departure from this view, maintains that “the associations of a patient have no one-to-one correspondence with his memories and dreams, much less his unconscious thoughts” (p. 28). Rather than emphasize historical truth, Spence (1982) adopts the premise that “narrative truth has a special significance in its own right and that making contact with the actual past may be of far less significance than creating a coherent and consistent account of a particular set of events” (p. 28). The idea here is not that historical truth does not exist but that to the extent that it emerges, it has been selected out of many other factual events from the patient’s past and ascribed particular meanings that will vary with the circumstances that brought it to mind. Further, it must be constructed into a narrative truth: a good story that is plausible, coherent, and compelling. In Spence’s account, the construction of a good story out of the material that issues from the patient becomes as crucial a “truth” for the patient as historical accuracy and translates into a vital component of the cure in psychoanalysis.

(Rosen, 1996, pp. 28-29)

Rosen is here pointing us to the notion that what may be particularly healing is a process whereby each individual determines their own way of understanding the events of their own history and present, as this would seem far more likely to bring about a sense of wholeness than the mere pursuit of historical or journalistic accuracy. Indeed, Spence’s (1982) focus on narrative truth over historical truth is very much in accord with Jerome Frank’s (1961, 1973) and Frank and Frank’s (1991) focus on the rhetoric of hope whose task is to arouse the client’s emotions and at the same time to inspire or to re-instil or to
reinstate a sense of hope in those clients who may have become demoralised about their chances of ever regaining that which they have lost: namely their equilibrium and their equanimity in living their lived lives. Frank’s (1961, 1973) and Frank and Frank’s (1991) thesis is that clients need persuading to regard the task(s) that confront(s) them in therapy as doable, and that he is perfectly happy for therapists to grant themselves the licence of rhetoric in order to persuade them that their task lies within their grasp. Frank (1961, 1973) and Frank and Frank (1991) were less concerned with whether their rhetoric was necessarily true (in the sense that Spence (1982) was less concerned with historical accuracy than he was with narrative truth) so long as they found their therapists’ accounts sufficiently plausible to persuade them to believe in the therapeutic dyad’s capacity to bring about the healing of the client’s demoralised ardour.

In the last quotation, Rosen is citing Spence (1982) as having suggested that the more significant thing in terms of the psychological healing that he was seeking to bring about in his patients is that between them, patient and analyst were able to produce a narrative that somehow accounted for the client’s response to whatever circumstances had befallen her or him in their living out of their lived lives. This narrative account may or may not accord with a more journalistic record of what actually happened in the client’s life, and of course it is sometimes difficult to be in a position to assert that we know what may have happened, particularly in those earlier stages of our lives when we were infants or small children, especially if those family members who may have been privy to such secrets have since died. But Spence’s (1982) main point is that therapists are neither seeking nor claiming to be journalists, or what a court of law would regard as a ‘reliable historian’ over such matters, preferring instead to focus on what seems to be important to their clients, which is usually to achieve some form of narrative account that explains their psychological responses to whatever situation may be confronting them when they seek therapy for themselves. The sort of narrative accounts that Spence (1982) is talking about are those that enable clients to make sense out of their experience of having lived out their lives in the face of their life situations. In this sense, we may be talking about a form of understanding as to why or how they may have come to have responded as they did, and how else they may respond in the present and in the future. What did these experiences mean to them whilst they were living through them, and how can these meanings help them to get their lives back on track again once their demoralisation has been overcome or ‘healed?’
4.4.3 The various meanings of the term meaning

Here to begin with are just a few ideas surrounding the various meanings that can be attached to the concept of meaning.

Meaning can be defined in numerous ways, including purpose, intent, order, sense, interpretation, signification and denotation. Certainly, considerable work has been devoted to understanding ‘meaning’ in the field of linguistics. Based on two decades of work with victims, however, there appear to be two primary understandings of meaning that help inform survivors’ crises and coping post-trauma: meaning as comprehensibility and meaning as significance. The first involves questions regarding whether something ‘makes sense’; in other words, whether it fits with a system of accepted rules or theories. The second involves questions regarding whether something is of value or worth.

(Janoff-Bulman and Frantz, 1997, p. 91)

Straightaway we can see just how many different meanings may be understood by our use of the term meaning itself, and why context is so important when considering meaning. If we may assume that one of the main tasks of psychotherapy is to help people to discern a sense of meaning from their experiencing of living their lived lives, then in this sense, we are using the term meaning in the sense of being able to understand how clients’ experiencing may be understood to fit into the narratives of their lived lives: in other words, what meaning does their experiencing have for them. As for “whether something is of value or worth” (Janoff-Bulman and Frantz, 1997, p. 91), well, our emotional responses are likely to be best-placed to advise us on that score, although these meanings can be modified by our cognitive processes where a more rational evaluation may be sought.

4.4.4 One use of interpretation is to allot a narrative home for an anomalous event

In the following quotation, Spence is explaining that one of our tasks as psychological therapists is to render the extraordinary into a more comprehensible form, which is often done by what he refers to as “finding a narrative home for an anomalous happening” (Spence, 1982, p. 137). This is done by what he, being a psychoanalyst, calls “a formal interpretation,” whereby he tries to integrate what he calls “an anomalous happening” or event into the rest of one’s life, or bringing it home.
When we make a formal interpretation, we are finding a narrative home for an anomalous happening. We are using language to clothe this event in respectability and take away some of its strangeness and mystery, and by fitting the language into the patient’s life story, we are giving it a narrative home. The linguistic and narrative aspects of an interpretation may well have priority over its historical truth, and we are making the somewhat heretical claim that an interpretation is effective because it gives the awkward happening a kind of linguistic and narrative closure, not because it can account for it in a purely causal sense. An interpretation satisfies because we are able to contain an unfinished piece of reality in a meaningful sentence; that is part of what we mean by finding its narrative home.

(Spence, 1982, p. 137)

Note that Spence is suggesting in this last quotation that an interpretation’s capacity to satisfy is not based upon its capacity to attribute causality to “the awkward happening” (Spence, 1982, p. 137), but rather because it brings a sense of “linguistic and narrative closure” (Spence, 1982, p. 137) to this awkward or inconvenient occurrence. In other words, as psychological therapists, our job is to help our clients to find an understanding that makes sense of this particular phenomenon to this particular person at this particular moment in time, and in the context of this particular set of circumstances.

Spence continues his advocacy for narrative truth over and above the need for historical accuracy or truth even more clearly in the following passage:

If we followed what Freud says in his writings, we would find ourselves looking for historical truth. This emphasis comes out most clearly in his many references to archaeology as the guiding metaphor, and in his persistent belief in the curative effects of the “kernel of truth” – historical truth being clearly intended. . . .

On the other hand, if we look at what Freud does, at how he writes, how he interprets, and how he assembles his explanations, we see the strong influence of the narrative tradition and we learn from him the clinical importance of narrative truth. Interpretations are persuasive . . . not because of their evidential value but because of their rhetorical appeal; conviction emerges because the fit is good, not because we have necessarily made contact with the past.

(Spence, 1982, p. 32)

Note Spence’s reference in this last quotation to the powers of persuasion and to “rhetorical appeal” (Spence, 1982, p. 137), as also advocated and documented by Frank (1961 and 1973) and by Frank and Frank (1991).
4.4.5 The dialogical nature of understanding

As if revisiting our earlier examination (considered above at subparagraph 4.3.18) of how meaning could sometimes be said to require a consensus between a minimum of two people, here once again we have Frank and Frank (1991, pp. 70-71) stipulating that hermeneutics must of necessity imply a minimum of two people by virtue of the shared nature of the understanding that they understand to be constituted by the term hermeneutics.

Pursuing the analogy further, the therapist does not construct a purely personal interpretation of a patient’s history. Rather, healer and patient attempt to develop a mutual understanding of the significance of the experiences the patient reports. As an authority on hermeneutics writes, “If understanding always means coming to an understanding, then it always involves two different participants. . . . The criterion of textual understanding is not recovery of the author’s meaning but discovery of a common meaning, one that is shared with the interpreter. Such a meaning never depends exclusively on the author any more than it does on the interpreter” (Weinsheimer 1988, p. 178). Shared meanings are inevitably indeterminate, given the many factors brought to the encounter by both parties and their possible combinations. In medicine as well as psychiatry, diagnosis and treatment have been described as forms of mutual interpretation between healer and patient. Kleinman (1980) characterizes diagnosis as a process of negotiation between patient and physician to come to an agreement on the cognitive ordering of the patient’s illness by labeling, classifying, and explaining. Other medical theorists emphasize the way the physician listens for the assumptions and principles by which the patient creates the reality in which he or she lives and for the conceptual structure that supports the patient’s perception of his or her problems.

This account emphasizes an essentially dialogical understanding over “a purely personal interpretation of a patient’s history” (Frank and Frank, 1991, p. 70).

However, Gergen’s emphasis on a relational form of understanding could equally be said to represent a dialogical form of understanding, as follows:

Understanding is not contained within me, or within you, but is that which we generate together in our form of relatedness.

(Gergen, 1990, p. 47)
4.4.6 Just what is meant by the term “the hermeneutic approach to meaning” when used within the context of the psychological therapies?

Brewin and Power’s answer to this question is as follows:

[I]nterpretation, when it emphasizes the joint contribution of the client and the therapist, and their specific historical and cultural context, is known as the hermeneutic approach to meaning.

(Brewin and Power, 1997, p. 2)

Consequently, what we have here yet again is the suggestion that a dialogue between a minimum of two people – client and therapist – is required to take place within “their specific historical and cultural context” (Brewin and Power, 1997, p. 2) before assuming that any shared meaning has been established in the practice of potentiality paradigm therapy. This, these authors suggest, is what is meant by “the hermeneutic approach to meaning” (Brewin and Power, 1997, p. 2), although such a phenomenon could equally be classified as “[t]he dialogical nature of understanding” as suggested in the heading of the previous subparagraph (4.4.5, above).

4.4.7 Meaning derived through a dynamic interactive process with various sources

This subparagraph (4.4.7) is expanding our consideration of “the hermeneutic approach to meaning” (as documented above at subparagraph 4.4.6) and “[t]he dialogical nature of understanding” (as documented at subparagraph 4.4.5, also above) to include “a dynamic interactive process with various sources,” as suggested in this subparagraph’s (4.4.7) heading.

So let us begin this subparagraph’s consideration of the literature with a definition of meaning given by Alarcon, Frank and Williams.

Meaning is the attribution of significance to facts, actions and reactions, emotions, and behaviours.

(Alarcon, Frank and Williams, 2012, p. 284)
Whilst this ‘definition’ will not suffice for our purposes, for it offers us no insight into how meaning is derived, Alarcon, Frank and Williams (2012) make the point that the cultural setting will also have a significant impact on the creation of meaning.

Judging by the number of times that he repeats this assertion, Gendlin is absolutely convinced of his belief about the way in which “[m]eanings are formed” (Gendlin, 1997, p. 1).

Meanings are formed and had through an interaction between experiencing and symbols or things.

(Gendlin, 1997, p. 1)

And just a few pages later on in the same work:

Meaning is formed in the interaction of experiencing and something that functions symbolically.

(Gendlin, 1997, p. 5 – emphasis features in Gendlin’s original text)

And yet once more, just a few pages further on:

Meaning is formed in the interaction of experiencing and something that functions as a symbol.

(Gendlin, 1997, p. 8)

Greenberg, Rice and Elliott take the description of how meaning is derived from experience a little further in the following account:

Experience is pregnant with meaning that is implicit until it is expressed. By the act of expressing, people take an explicit position in relation to something, thereby creating meaning. Once expressed, the expressed meaning in turn becomes a new stimulus for the person. It becomes available to awareness for reflection and evocation of further internal reactions.

(Greenberg, Rice and Elliott, 1993, p. 27)

Note how in this last quotation, Greenberg, Rice and Elliott (1993, p. 27) are suggesting that meaning is only to be regarded as “implicit until it is expressed” (Greenberg, Rice and
Elliott, 1993, p. 27). They go on to state that meaning only becomes explicit when it is expressed, “thereby creating meaning” (Greenberg, Rice and Elliott, 1993, p. 27). If we are to understand these authors’ stipulation that meaning needs to be expressed to another person, then they too are suggesting that meaning requires to be shared in order for it to qualify as constituting meaning. However, we should note that these authors are suggesting that “[o]nce expressed, the expressed meaning in turn becomes a new stimulus for the person. It becomes available to awareness for reflection and evocation of further internal reactions” (Greenberg, Rice and Elliott, 1993, p. 27), which suggests that meaning is something that can be shared and reflected upon internally.

In the following quotation, Greenberg and Van Balen suggest that human beings derive a sense of meaning through a dynamic process which interacts with both “internal and external sources,” as well as with “innate sensory motor, emotional schematic memory and conceptual level processing” (Greenberg and Van Balen, 1998, pp. 42-43).

Integrating and developing experiential theory in line with modern views on emotion, constructive cognition, and the operation of dynamic systems, a dialectical constructivist model of experiential therapy has recently been proposed. In this view a person is seen as a symbolizing, meaning-creating being who acts as a dynamic system constantly synthesizing information from many levels of processing and from both internal and external sources into a conscious experience. Three major levels of processing – innate sensory motor, emotional schematic memory, and conceptual level processing – are identified. In addition people are seen as organizing experience into emotion-based schemes that then play a central role in functioning and the creation of meaning.

The term “scheme” is used rather than “schema” following Pascual-Leone (1987) and Piaget (1969) to emphasize the scheme as action-oriented experience producing structure rather than cognitive representational experience.

There is some imagery contained in the above quotation that is destined to become something of a familiar theme by the time that we arrive at the conclusions of this research study. In particular, the view of a human being “as a symbolizing, meaning-creating being who acts as a dynamic system constantly synthesizing information from many levels” (Greenberg and Val Balen, 1998, p. 42) creates both the sense of dialogical engagement that we have already come across when we examined the dialogical nature of understanding in subparagraph 4.4.5 (above), as well as the sense of integration and synthesis that is waiting for us at subparagraph 4.6.1 (below).
Next we can read how Greenberg and Pascual-Leone describe the way in which the experiential and the hermeneutic discourses manage to elide into one another in order to help create the conscious personal meaning “that leads to the stable construction of new views of self and reality in therapy and in life” (Greenberg and Pascual-Leone, 2001, p. 175).

Construction of conscious personal meaning in therapy involves three vital moments. First, the synthesis of a feeling or a felt sense . . . ; second, a moment of attending to this bodily felt sense, consciously symbolizing it to form a subjective reality . . . ; and third, a moment of reflection in which explanations of the symbolized experience are generated to produce a coherent narrative and/or conceptualized self identity . . . . It is the combination of these three processes of synthesizing feeling, attending and symbolizing, and reflecting explaining, that leads to the stable construction of new views of self and reality in therapy and in life.

(Greenberg and Pascual-Leone, 2001, pp. 174-175)

The conscientious reader will not need me to draw their attention to the term “synthesis” that again finds itself brought to bear in this last quotation. As well as the notion of reflection, we also have the notion of symbolisation making an appearance here as well, which often constitutes a clue to a discourse about the experiential therapies. It is these three processes – synthesising, symbolising and reflection – that are so central to the creation of “conscious personal meaning” (Greenberg and Pascual-Leone, 2001, p. 174) and that are also so characteristic of the Process-Experiential and the Emotion-Focused approaches taken to the practice and to the analytic understanding of the psychological therapies.

4.4.8 How our emotions contribute to our creation of meaning

If our emotional responses serve to help keep us in tune with our values (Tomkins, 1981), then it becomes evident that emotions are inextricably linked with our meaning-making processes, as first, Gilbert (1997, p. 33), and then Greenberg and Pascual-Leone (1997, p. 171) outline in the following two quotations.

Psychological meaning, in contrast to philosophical or textual meaning, probably depends on two essential things: consciousness and feelings. In the absence of either, it is difficult to conceptualise an entity creating ‘meaning’. Tomkins (1981) suggested that emotions make things matter to us. Without them, he argued,
nothing may matter – with them anything can. In his theory it is emotions and our capacity 'to feel' that give rise to meanings. However, emotions evolved to nudge, entice and compel the seeking of certain goals. Most human goals, beyond those to sustain life, are social. Meaning and emotion are locked together in a multitude of social relationships, e.g. those of love, friendship, jealousy, social status, shame, revenge, grief, etc. The emotional experiences we consider to be the most personally meaningful are usually social.

(Gilbert, 1997, p. 33)

At the outset of this quotation, Gilbert is differentiating “[p]sychological meaning” from “philosophical or textual meaning” by asserting that “psychological meaning” “probably depends on two essential things: consciousness and feelings” in common with Greenberg and Pascual-Leone (2001, p. 166, below). Finally, Gilbert (1997, p. 33) reminds us that our most profound meanings are very often socially constructed, as suggested by Gergen (1994, 1999 and 2001).

And now for Greenberg and Pascual-Leone’s contribution to this thread.

Affects and emotion serve as organizing forces in human functioning and play a key role in the development of personal meaning. Emotion in conjunction with the allocation of mental attentional energy guides conscious cognition and makes individuals active determiners of their conduct rather than passive reactors to stimuli. One of the primary goals of an emotionally focused, experiential therapy is the evocation of various emotional states in a variety of different in-therapy contexts. This is done to help clients become aware of the adaptive tendencies emanating from their own emotional states. This helps to restructure their emotional experience, to challenge negative self-views and to create new meaning by understanding the impact of events on them, and the significance to them of events and of people. Informed by their emotional responses, people can analyse and reflect on their experience to solve the vital problems of living.

(Greenberg and Pascual-Leone, 1997, p. 171)

One of the central planks of Greenberg and Pascual-Leone’s tenets about the way(s) in which we derive meaning from our experiencing of our lived lives is that “individuals [are] active determiners of their conduct rather than passive reactors to stimuli” (Greenberg and Pascual-Leone, 1997, p. 171). This assertion firmly clinches the meaning-making processes of human beings as falling within the remit of the social constructionist paradigm (Edwards and Potter, 1992; Gergen, 1999; Hepworth, 1999; McNamee and Gergen, 1992; Parker, 1998; Rorty, 1999; Shotter, 1993; and Simons and Billig, 1994).
But the mechanism by which we actively determine our conduct is through cognitive reflection on whatever it is that may have been, or that may be about to happen to us, and Greenberg and Pascual-Leone are suggesting in this last quotation that it is our emotions which, “in conjunction with the allocation of mental attentional energy guides (our) conscious cognition and makes individuals active determiners of their conduct rather than passive reactors to stimuli” (Greenberg and Pascual-Leone, 1997, p. 171). In other words, what Greenberg and Pascual-Leone are suggesting here is that it is our emotions that grab the attention of our consciousness, and which thereby are leading us down the path of conscious cognitive reflection on whatever events may be befalling us.

Although in a later work, these same authors reassert their belief that it is our consciousness which selects “the source of information to which” (Greenberg and Pascual-Leone, 2001, p. 166) we need to attend, they also go on to suggest that there are several other factors that can also influence this process, one of the most important of which being our emotional experiencing. They conclude the opening paragraph of the quotation that follows by suggesting that the various sources that they cite as potentially having the capacity to influence our creation of meaning are finally synthesised to create meaning.

In our view, consciousness is a major arbiter of meaning by way of selecting the source of information to which to attend and the interpretation to be favoured. Consciousness involves components of will and choice. These are partly conscious processes by means of which people bring their mental attention under the influence of internal, executive-like processes. But consciousness is influenced by a number of additional factors. Among the most important are immediate emotional experience, the salience of external stimuli, the views and attitudes of others toward self, and the past responses of the self in similar situations. Consciousness is over determined by all of these factors and more. It is, however, the arena for a final synthesis of different sources of sensory, kinaesthetic, emotional, conative, and conceptual information about the self and the world.

Driven by affect, people are active constructors of meaning. Affect is neuropsychologically independent of cognition, and informs the individual, through visceral sensations and action tendencies, of its unconscious evaluative responses with regard to body, self, and world. Emotion gives people feedback about what is important and meaningful, what is good or bad for them. It, thus, is a meaning system that informs people of the significance of events to their well-being. Personal meaning results from the self-organization and self-explication of one’s own emotional experience. People are constantly representing themselves to themselves and to others in images, actions, and narratives, and they continuously construct views of themselves in consciousness.

(Greenberg and Pascual-Leone, 2001, p. 166)
In the second paragraph of this last quotation, Greenberg and Pascual-Leone paint a picture of the continually forming and reforming manner in which we “continuously construct views of [our]selves in consciousness” (Greenberg and Pascual-Leone, 2001, p. 166), and of how we use these processes to represent ourselves both to ourselves and to others “in images, actions, and narratives” (Greenberg and Pascual-Leone, 2001, p. 166).

It is interesting to note that, at the beginning of the second sentence of the second paragraph in this last quotation, these authors suggest that “[a]ffect is neuropsychologically independent of cognition” (Greenberg and Pascual-Leone, 2001, p. 166 [my emphasis – Ed]) because, as cognitive-behavioural therapists will be quick to tell us, cognitions are often used as an entrée to working with clients’ affect or emotions. It will therefore be particularly worth comparing this remark with another one made just a few years earlier by Greenberg and Paivio.

In this book we will show how therapists can think about and intervene with emotion in differential ways. First, they need to recognize the relationship between emotion and cognition. Emotion is intimately connected with meaning, and no emotional change takes place without producing cognitive change. This view informs the therapeutic process in clear ways.

(Greenberg and Paivio, 1997, p. 1)

How can Greenberg and Paivio assert in 1997 that emotion and cognition are clearly related, and yet by 2001 – barely four years later – appear to have changed their position to one whereby they believe that “[a]ffect is neuropsychologically independent of cognition” (Greenberg and Pascual-Leone, 2001, p. 166). I appreciate that, of these three authors, Les Greenberg is the only one claiming an element of authorship of both of these passages, but nevertheless, at first blush, these two passages still seem to constitute something of an extraordinary volte face on something that constitutes such a fundamental premise!

Maybe the ‘Rosetta stone’ that represents the key to deciphering the runes of these last two seemingly conflictual positions with respect to the vexed notion of the roles of affect and emotion is the following tripartite passage which is from Greenberg and Paivio.

1. Affect refers to an unconscious biological response to stimulation. It involves automatic, physiological, motivational, and neural processes involved in the evolutionary adaptive behavioral response system. Affects do not involve reflective evaluation. They just happen, whereas both emotions and feelings are conscious products of these unconscious affective processes.
2. *Feeling* involves awareness of the basic sensations of affect. This involves bodily felt experience such as “feeling shaky” or “feeling tense.” The more complex bodily felt feelings that involve felt meaning, such as feeling “down” or humiliated, feeling that something is not right, or feeling that one doesn’t care, we call *complex feelings*. These involve relating affect to one’s view of oneself.

3. Consciously experienced human *emotions* are experiences that arise when action tendencies and feeling states are joined with evoking situations and self. Emotions are thus experiences that involve the integration of many levels of processing. They include the experience of discrete emotions such as fear, anger, and sadness, which have specific action tendencies and facial expressions, as well as the more complex emotions such as jealousy and pride, which are more related to a complex story or script. Emotions give personal meaning to our experience.

(Greenberg and Paivio, 1997, pp. 7-8)

It is evident from this earlier account of Greenberg and Paivio’s (1997, pp. 7-8) that we only begin to discern meaning from, or attach meaning to, our experiencing of our lived lives once we integrate the unconscious biological responses of our affect with those feeling states that constitute our awareness of the basic sensations of our affect to form consciously experienced emotions which we can then relate to our respective life situations in order to distil a sense of meaning there from.

Now that we can appreciate what Greenberg and Pascual-Leone mean when they assert that “[a]ffect is neuropsychologically independent of cognition” (Greenberg and Pascual-Leone, 2001, p. 166), we can perhaps also appreciate what distinguishes Process-Experiential Therapy (PET) and Emotion Focused Therapy (EFT) from the more cognitively-derived approaches such as Rational-Emotive Behaviour Therapy (REBT) and Cognitive Therapy (CT) and Cognitive-Behavioural Therapy (CBT): whilst the latter approaches to the practice of the psychological therapies (REBT, CT and CBT) follow the basic principle that our emotional and behavioural responses are determined primarily by our cognitions, the former approaches (PET and EFT) replaces the primacy of our cognitions with the primacy of how we configure what these authors (Greenberg and Paivio, 1997; Greenberg, 2002; Elliott, Watson, Goldman and Greenberg, 2004) call our emotion schemes (comprising as they do syntheses of affect, feelings, emotion and cognition) as constituting the most likely determinants of how we respond to the various situations in which we find ourselves in our lived lives.

Let us now return to Greenberg and Pascual-Leone for our next contribution to this strand, in which these authors try to locate our emotional responses within more of a
psychological frame of reference through having recourse to endeavours such as bioevolutionary research. This constitutes a useful reminder that a comprehensive knowledge base is subsumed under the science of psychology and that, although many practitioners of the psychological therapies have a tendency not to want to become involved in this aspect of the academic study of psychology, it will forever be important that the models that we construct do not fly in the face of what psychology has to teach us, especially when so much of this teaching is supported by positivist research.

Research in the bioevolutionary domain suggests that there are a number of innate, primary, biologically adaptive emotions, each with a characteristic action tendency and facial expression. Different action tendencies correspond to different emotions. For example, fear is associated with the mobilization for flight, while anger involves the urge to attack, repel or break free. Examples of primary emotions include sadness, fear, joy, disgust and anger. With their attendant action tendencies, primary emotions are thus ‘hard-wired’ expressive-motor responses that mobilize the individual for adaptive action, and convey pertinent information to others. Primary emotions focus attention, interrupt other behavioral and cognitive activities, and prepare the organism for the execution of adaptive action. Other, more complex emotions, like pride and jealousy, are less obviously associated with concrete or particular action tendencies, or with facial expressions. Instead, these emotions are defined more by a given context or script but are still based on appraisals of the relevance of a situation to a need / goal / concern, are motivational in nature and inform us of the significance of events to us.

Emotion is thus a primary meaning system. Emotions are like barometers of meaning providing affective feedback on states of body and mind. Primary emotions can be viewed as biologically based adaptive relational action tendencies resulting from the appraisal of a situation in terms of a concern or need. Emotions give us information about what concerns us, and evaluate the significance of events to our wellbeing. The generation of much emotional experience is driven initially by automatic processes that produce primary responses following simple perceptual appraisals. Automatic processes are followed immediately by more complex activity in which sensory, memorial and ideational information is integrated, yielding a felt sense of our self and of the world. This higher-level synthesis of a variety of levels of processing has been referred to as an ‘emotion scheme’, and has been identified as a principle target of intervention and therapeutic change.

(Greenberg and Pascual-Leone, 1997, pp. 158-159)

We can straightaway detect that these authors are writing more from a research psychologist’s perspective, especially with references in the first of the above two paragraphs to *interruption* and *execution*, reminding us as they do of Juan Pascual-Leone’s Theory of Constructivist Operators (TCO) (Pascual-Leone and Goodman, 1979; Pascual-Leone, 1987, pp. 531-570), about which we shall have more to say at subparagraph 4.6.2.1, below.
The thesis of this quotation is to distinguish between different types of emotions, and to stress the primary meaning system that is founded on our primary emotions, such as “sadness, fear, joy, disgust and anger” (Greenberg and Pascual-Leone, 1997, p. 158), as these have the capacity to override some of our “other behavioral and cognitive activities” (Greenberg and Pascual-Leone, 1997, p. 158). These primary emotions are biologically based (hard-wired) and are considered to be adaptive, which means that they are telling us things that we need to know in order to “mobilize the individual for adaptive action, and convey pertinent information to others” (Greenberg and Pascual-Leone, 1997, p. 158) and to “prepare the organism for the execution of adaptive action” (Greenberg and Pascual-Leone, 1997, pp. 158-159).

These primary emotions are contrasted to “[o]ther, more complex emotions, like pride and jealousy” and are more context-specific, being “defined more by a given context or script” (Greenberg and Pascual-Leone, 1997, p. 159). These authors assert that primary emotions are triggered automatically, following which more complex activity takes place inside our brains “in which sensory, memorial and ideational information is integrated, yielding a felt sense of our self and of the world. This higher-level synthesis of a variety of levels of processing has been referred to as an ‘emotion scheme’, and has been identified as a principle target of intervention and therapeutic change (Greenberg, Rice & Elliott, 1993; Greenberg & Paivio, in press)” (Greenberg and Pascual-Leone, 1997, p. 159).

If we take note of what Greenberg and Pascual-Leone refer to as “This higher-level synthesis” (Greenberg and Pascual-Leone, 1997, p. 159), we can now go on to examine what these authors also refer to as “A dialectical constructivist view” (Greenberg and Pascual-Leone, 2001, p. 183).

A dialectical constructivist view offers two major avenues of change. One is in helping people change the way in which they order their experience in language, and, via this conceptualization, change their way of living. This involves producing change in the conceptualization or explanation of experience. Generating symbols to explain experience, and engaging in reflection, promotes the construction of new narratives. The second avenue of change is to promote novelty in the generation of emotional experience itself. Here by altering tacit dynamic syntheses through attentional allocation, interruption, and activation of different emotion schemes, new experience is synthesized in the field of internal complexity. This creates the possibility of producing change in emotional experience itself. This is then symbolized and used to change the narrative. This later avenue introduces the possibility of a new change process. Changing emotion with emotion. Here transformation occurs by accessing new emotional possibilities that were not previously accessible in order to change more dominant maladaptive
emotional responses. Thus, anger may be accessed to empower and transform fear or shame. Sadness or compassion may be accessed to soften anger. Here affect syntheses \[sic\] or blends, change \[sic\] experience, and this changed experience is then symbolized in awareness.

(Greenberg and Pascual-Leone, 2001, p. 183)

In this poorly written passage, Greenberg and Pascual-Leone outline how “[a] dialectical constructivist view offers two major avenues of change” (Greenberg and Pascual-Leone, 2001, p. 183): first, by constructing new narratives from the reflection promoted by the “change in the conceptualisation or explanation of experience” (Greenberg and Pascual-Leone, 2001, p. 183), and second, by generating emotional experience by using new emotion schemes and by synthesising new experience. This novel experiencing “is then symbolized and used to change the narrative” (Greenberg and Pascual-Leone, 2001, p. 183).

You may remember that we touched upon the role of the process known as symbolisation in subparagraph 4.2.5, above, whereby meaning may be attached to our experiencing. This is the central focus of the first of Greenberg and Pascual-Leone’s “two major avenues of change” (Greenberg and Pascual-Leone, 2001, p. 183) as cited in the immediately above cited quotation of theirs. Through changing the manner in which we symbolise our experiencing, we may also change the way(s) in which we look at those things that are the focus of our experiencing; and if we change how we look at or reconceptualise such things, then we are likely to change how we explain those phenomena and the place that they inhabit in those narratives through which we explain how we have lived, are living and propose to continue living our lived lives.

The reason why Greenberg and Pascual-Leone write about “helping people change the way in which they order their experience in language” (Greenberg and Pascual-Leone, 2001, p. 183) is because human beings in the so-called developed western world typically conceptualise the events of their lived lives through having recourse to language: that is, whichever language may constitute their native tongue, or else the language in which they are currently thinking if they should happen to be living in a different country and hence thinking in a different language at the time; but of course it doesn’t have to be this way. Greenberg and Pascual-Leone have written about the way(s) in which “[p]eople are constantly representing themselves to themselves and to others in images, actions, and narratives” (Greenberg and Pascual-Leone, 2001, p. 166), and in the quotation that is
presently under consideration, the authors write about how “[g]enerating symbols to explain experience, and engaging in reflection, promotes the construction of new narratives” (Greenberg and Pascual-Leone, 2001, p. 183). Narratives are very important as one means whereby “[p]eople are constantly representing themselves to themselves and to others” (Greenberg and Pascual-Leone, 2001, p. 166), and they play a significant role in how we derive and understand a sense of meaning from our lived lives.

The second of Greenberg and Pascual-Leone’s “two major avenues of change” (Greenberg and Pascual-Leone, 2001, p. 183) is arrived at through changing the way in which we synthesise our experiencing, and hence the felt meanings that accompany it, by dint of engaging with new emotion schemes. New experiencing is synthesised which brings about changes in the emotions that are experienced. This new material is then synthesised and, when symbolised, is used to bring about changes in the experiencer’s narrative(s). This leads to the possibility of changing their dominant maladaptive emotions with other emotions. As Greenberg and Pascual-Leone write, “Thus, anger may be accessed to empower and transform fear or shame. Sadness or compassion may be accessed to soften anger” (Greenberg and Pascual-Leone, 2001, p. 183).

Greenberg and Pascual-Leone’s reference to “attentional allocation, interruption, and activation of different emotion schemes” (Greenberg and Pascual-Leone, 2001, p.183) really constitutes references to the constructivist operators that feature in Juan Pascual-Leone’s Theory of Constructivist Operators (TCO) (Pascual-Leone and Goodman, 1979; Pascual-Leone, 1987, pp. 531-570), and from which dialectical constructivism derives. Dialectical constructivism is a hugely important element of the practice of potentiality paradigm therapy, and we shall have more to say about its significance later on, both in this chapter (at subparagraph 4.6.2.2, below) and in the following one (at subparagraph 5.1.2.1, below).
4.4.9 Multiple symbolisations and hence multiple meanings of “any datum of experiencing”

I am to wonder here whether the following insight of Gendlin’s into one aspect of the way in which symbolisation can work constitutes an infinite regress or perpetual motion.

I want to emphasize one vital characteristic of experiencing: any datum of experiencing – any aspect of it, no matter how finely specified – can be symbolized and interpreted further and further, so that it can guide us to many, many more symbolizations. We can endlessly “differentiate” it further. We can synthesize endless numbers of meanings in it.

Given a sentence or situation, an observation or behavior, a person or a moment’s speech by a person, or anything, we can focus on our experiencing of it, and we can say what it means in a sentence, in a paragraph, or in a book. It does not have only one meaning but, depending upon the symbols we apply, the behaviours and events that occur, it can be differentiated and symbolized in the formation of very many meanings.

(Gendlin, 1997, p. 16 – emphasis features in Gendlin’s original text)

This quotation serves as an apposite reminder that there are often multiple meanings that can be discerned from just one piece of experiencing. Indeed, how a piece of experiencing is viewed is likely to generate “very many meanings” (Gendlin, 1997, p. 16). This is what Gendlin is referring to with his use of the term ‘symbolisation.’ How we see something is our way of symbolising a particular piece of experiencing, and this symbolisation is also likely to be key in determining how we discern meaning from this particular piece of experiencing. It is important to note that it is not the piece of experiencing per se that determines the meaning, but the manner in which we symbolise or represent the piece of experiencing within the context of our lived lives that Gendlin and others refer to as symbolisation.

4.4.10 The ambiguity of meaning, and hence the potential fallibility of interpretations

In the next quotation, Spence points out the vulnerability of a position that assumes what he refers to as “a kind of naive realism” (Spence, 1982, p. 25) with respect to the way in which the therapist’s interpretations are regarded almost as factually correct rather than as a form of reading which may or may not merit the claim to constitute any form of privileged discourse.
The model of the patient as unbiased reporter and the analyst as unbiased listener suggests a kind of naive realism that is hard to imagine, harder to practice, and runs counter to everything we have learned about the way we come to understand the world. The model persists because it heightens the special virtues of the analytic situation and tempts us to believe that under the special conditions that prevail, the patient does indeed have privileged access to the past and the analyst, by virtue of his special training, is in fact a rather special reporter of a kind that makes almost no mistakes. The mischief is further compounded by the underlying narrative tradition. If we assume that the analyst, at least part of the time, is listening with what he assumes is evenly hovering attention, then it follows that the “story” he “hears” will be understood as being a good approximation of the story told by the patient. The more he believes that he is following Freud’s model, the more he will believe in his “hearing” of the material; the more he believes in the model, the less he will look for alternative constructions of the same material. But because he is probably listening with a bias toward coherence and continuity, what he “hears” comes to resemble a finished narrative, further reinforcing his belief that no other alternatives need be considered. Although the implications of the narrative tradition are clearly at odds with the implications of Freud’s more explicit models, in practice the two can be combined in a way that gives the uncritical analyst the best of both worlds: he or she hears a satisfactory story and assumes that this is the only story there is to hear.

One clue that this kind of confusion is fairly endemic comes from the fact that the psychoanalytic literature makes no provision for alternative explanations of the same data. A case report is presented as a record of the facts, not as an interpretation of some of the data; this convention is a natural consequence of the assumption that the analyst functions as a largely unbiased reporter. (For a rare exception, see Schafer, 1980, and his suggestion that perhaps “there are no objective, autonomous, or pure psychoanalytic data which, as Freud was fond of saying, compel one to draw certain conclusions” [p. 30].) A case report, by virtue of the assumption that no selection is being exercised by either patient or analyst, is understood to represent a near-undistorted record of a clinical event. If there is no distortion, then there is no need to preserve the original data, and for this reason, case reports have tended to replace the data in the analytic literature.

I can still recall how Spence’s observation that “the psychoanalytic literature makes no provision for alternative explanations of the same data” (Spence, 1982, p. 26) created quite a powerful effect on this researcher when first he came across it. What Spence is referring to here is the time-honoured practice of the day when the analyst publishes her or his account of a case without the client having recourse to as much as a member-check! In effect, this used to result in a wholly univocal account – the psychoanalyst’s – of the work; there was never any question as to any potential fallacy of the psychoanalytic interpretation. Now that I reflect upon Spence’s point, it is obviously correct, both historically as well as narratively! And yet, why after all this time am I still so surprised to have learned of this state of affairs?
As if to correct this lamentable state of affairs, in the next quotation, we have Spence, armed with all the commonsense at his disposal, urging caution, lest we be so grandiose in our presumptions about our interpretations that we fail to appreciate that our own interpretation is not necessarily any more ‘correct’ or *apropos* than anybody else’s!

The importance of ambiguity in the analytic *process* has never been properly addressed by the analytic *method*. Once we assume that meanings are multiple, we can hardly assume that the one *we* discover is necessarily the most significant. To discover meaning is different from discovering a lost fragment. The ambiguity of the utterance or the symptom still remains after we have put an interpretation on it; if we can claim, with Searle, that there is an unlimited number of contexts that could be supplied for any utterance, we can see that interpretation is endless. Freud would agree with respect to dream fragments or symptomatic acts, but he was unwilling to extend the claim to cover the analyst’s understanding. This was somehow exempt – more than that, it was essentially transparent and unambiguous, accessible to anyone with normative competence.

(Spence, 1982, pp. 267-268 – all three emphases feature in Spence’s original text)

So in these last two quotations (Spence, 1982, pp. 25-26, and pp. 267-268) we have Spence challenging what he makes sound almost like some form of papal infallibility on the part of the grandiose psychoanalyst, for of course, Spence was, both by training and by practice, a psychoanalyst.

Coming up next we have Rosen who, writing about Paul Watzlawick, is arguing for the same level of humility as that advocated by Spence in the preceding quotation, and for precisely the same reason.

Paul Watzlawick (1984) has played a major role in bringing to prominence such significant radical constructivists as von Glaserfeld (1984) and even includes himself in this category . . . . Nevertheless, in my own understanding of his work, he has taken a more moderate position on constructivism. He refers freely to enabling the client to reframe situations while in the therapeutic context, thereby seeming to give credence to the objectivity of the client’s problematic situation in its raw form while highlighting the client’s capacity for shifting his or her subjective perspective on any particular situation or event. Watzlawick (1990) explicitly refers to objects as having properties and characterizes these properties as constituting “reality of the first order.” This first-order reality is the “universe of ‘facts’ which can be established objectively in as much as the repetition of the same experiment yields the same result independently of by whom, when, and where the experiment is being carried out” (p. 243). (That is hardly a description of ontological idealism as attributed to radical constructivists.) Watzlawick contends that a serious limitation in this conception is that reality of the first order contains no basis for imparting meaning to its facts. The construction of meaning and the attribution of value does [*sic*] not reside in the external world of objects and facts but in the mental activity of the knowing subject. From this mental activity arises
the reality of the second order. One reframing, or alternative perspective, in second-order reality is neither more right nor wrong than another. The essential criterion for assessment is again the pragmatic one that takes into account which fiction produces the desired practical results.

(Rosen, 1996, pp. 9-10)

Rosen’s conclusion to the above quotation – “which fiction produces the desired practical results” – sounds, at least to this researcher, to have strong echoes both of Spence’s concept of narrative truth (Spence, 1982) and of Frank (1961, 1973) and Frank and Frank’s (1991) concept of rhetorical persuasion.

And finally, Packer and Addison warn us that objectivity of interpretations represents little more than wishful thinking.

We have suggested that a good interpretation, one that gives an account we can call true, is one that answers the concern that motivated our inquiry in the first place. At the same time, we have seen there is no interpretive method that would lead to a universally acceptable account, one that would be accepted by all sides. And there is no technique, no interpretation-free algorithm or procedure with which we can evaluate an interpretation. As Rosen (1987, p. 143) puts it: “There are no canons by which one can usefully restrict legitimate from illegitimate readings.”

(Packer and Addison, 1989b, p. 290)

And so, a reading is always a reading; nothing more, but neither is it anything less – and so needs no permission to exist so long as in doing so it doesn’t claim any form of privileged discourse.

4.4.11 “Solutions to problems are found through the act of inquiry; they are not made for clients through the process of interpretation by the therapist.”

The hermeneutic discourse in potentiality paradigm therapy does not represent a carte blanche for therapists to interpret their clients’ material in any way that they may see fit, even if they were to purport to be doing so for their clients’ own good!

Clients often acquire a sense of control during their exploration of problematic reactions, as they come to realize that they have already formulated propositions about reality from their prior experience and have developed patterns of responding in the face of specific environmental cues and stimuli. As the architects of these
propositions and patterns, clients realize that they can continue to endorse them or can revise them in the light of present experience, needs, goals, and values. In this approach, client rules are not viewed as either irrational or dysfunctional; rather, they are regarded as explaining puzzling behavior and aspects of experience. Clients of their own accord and initiative evaluate the current appropriateness of a given rule. The process of acquiring control is augmented further in experiential therapy to the extent that clients are seen as the experts on their own experience and as capable of determining the significance of things for themselves. Solutions to problems are found through the act of inquiry; they are not made for clients through the process of interpretation by the therapist.

(Watson and Greenberg, 1996, p. 271)

Rather, it is the co-created sense of inquiry co-constructed by client and practitioner out of which new senses of meaning are likely to originate, as Watson and Greenberg (1996, p. 271) so appositely put it, and in which clients very much need to be active participants.

4.4.12 The construction of adaptive meanings

Continuing in the spirit of Spence’s (1982) and Kuehlwein’s (1996, pp. 499-500) emphasis on meaning as representing a sense of narrative fit, we now have Power and Brewin advocating a similar emphasis on constructing what they term “adaptive meanings” (Power and Brewin, 1997c, p. 204) as constituting “a considerable step forward.”

There is now considerable agreement among different schools of psychotherapy on the importance of constructing adaptive meanings rather than eliminating logical errors, on the need sometimes to address existential issues, on the frequent problems created by some kinds of defensive processes, on the value of the therapeutic relationship as a source of information about the client’s past experience and current expectations, and on the existence of tacit meanings that may have a causal impact on client’s behaviour without their awareness. Despite the continued divergence of opinion on such matters as therapeutic technique and the origin of maladaptive emotions, this represents a considerable step forward.

(Power and Brewin, 1997c, p. 204)

Furthermore, just in case we had assumed that we were concerned only with meaning as a conscious phenomenon, Power and Brewin’s remark about “tacit meanings that may have a causal impact on client’s behaviour without their awareness” (Power and Brewin, 1997c, p. 204) serves to make the point that it is not solely with conscious meanings with which we are concerned here, but also about what Power and Brewin refer to as “tacit meanings”
(Power and Brewin, 1997c, p. 204), of whose impact we may become aware or even familiar with at some juncture, as yet set sometime in the future.

The notion of adaptive meanings also serves to alert us to the issues that are likely to be at play when working with people from alternative cultural settings.

4.4.13 No ultimate truths, no ultimate meanings: just what makes narrative sense

Rather than historical truth, we have already learned from Spence (1982) (in subparagraphs 4.4.2 and 4.4.4, above) that what matters often to clients is a sense of narrative truth that forms a good sense of fit with their life situation and their experiencing of it. Here we have Kuehlwein making a similar point.

Meaning-making is both risky and rewarding – one reason, Carlsen maintains, why therapy is not always comfortable. I am reminded of O’Hanlon and Wilk’s point that “one of the most important tasks in psychotherapy is the introduction of doubt” (1987, p. 32). This is very likely not what clients themselves have in mind as a therapeutic goal when they present for therapy, but it seems appropriate to me in that clients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts. One truth proffered by constructivists is that there are no ultimate truths. We as therapists, therefore, cannot reveal what “is” to our clients, no matter how much they seek to elicit this from us. Indeed, we can assist them to discover and create what is most meaningful for them. Therapy with a constructivist orientation involves the acknowledgement that this is a world with no easy answers. McNamee, in fact, notes that psychotherapy from a meaning-making perspective helps the client and therapist better accept the indeterminacy of our constructed realities.

(Kuehlwein, 1996, pp. 499-500 – emphasis features in Kuehlwein’s original text)

I find Kuehlwein’s remark that, in effect, clients are clients because of “inadequacies of their meaning-making ability in certain contexts” a striking acknowledgement of the central role played the hermeneutic discourse in the practice and in the understanding of potentiality paradigm therapy.

Next, picking up on the last point made in the previous subparagraph (4.4.12, above), we have Alarcon, Frank and Williams giving us an illustration of how culture can allow for wildly differing interpretations of behaviour which, if looked at dispassionately from their context, could be viewed very differently indeed.
The cultural meaning of an act, feeling, or belief determines whether or not it expresses pathology. Those who kill in fits of rage or for gain are criminals; soldiers who kill in battle are fulfilling their duty. Psychotherapy, in Frank’s language, aims at “the transformation of [distorted] meanings” (Frank and Frank, 1991, p. 59, emphasis added). To be successful, this transformation must occur in a cultural context that supports it.

(Alarcon, Frank and Williams, 2012, p. 284 – emphasis features in authors’ original text)

Furthermore, we may need to extend quite considerably our conception of the term cultural in this context, for culture influences the way(s) in which narratives are understood in such contexts as in Alarcon, Frank and Williams’ illustration below.

Anorexia nervosa and related eating disorders most clearly exemplify Western cultural syndromes. While self-starvation and gluttony have been identified in many cultures throughout history, the meaning that patients and others attribute to disordered eating has varied dramatically over time. Earlier anorectic women struggled to attain holiness or moral purity. Today’s starving girls are often motivated by the desire to conform to a culturally sanctioned image of the ideal female body, born out of media-induced descriptions, the show-business industry, and iconic celebrities – a truly cultural etiopathogenic chain. Culturally determined aspects of the physical environment, especially the abundance of “hyperselected” foods of different kinds, also contribute to contemporary eating disorders. Although the biological effects of starvation are identical in a devout, aspiring saint or a restricting dieter, effective treatment for either one must address the cultural elements, as expressed in the meaning that the patient and others attribute to her behavior. A culturally informed approach to contemporary anorexia nervosa involves, or should involve, the arbiters of mass media, exercise consultants, beauticians, dietitians, and nutritionists as well as medical personnel and scientifically trained therapists. Enlisting such agents to foster change would be completely consistent with Frank’s view that treatment may depend on, but not recognize, many cultural interpreters. Such figures are the Western equivalent of native healers and their entourage.

(Alarcon, Frank and Williams, 2012, pp. 290-291)

The remaining point of interest here, of course, is who defines what amounts to such a distortion. I should imagine that the answer to this would likely be the culture in which the behaviour is imbedded, even though it would be the individual responsible for the behaviour who would be held responsible for the actual distortion itself. After all, why hold society to account when you can scapegoat an individual much more easily?
4.4.14 The necessity of a meaning-changing mechanism in the psychological therapies

We have already learned in the previous subparagraph (4.4.13, above) that Kuehlwein notes in very concise and matter-of-fact terms that one reason why clients are clients is because of the following observation:

[C]lients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts.

(Kuehlwein, 1996, pp. 499-500)

Given that Kuehlwein (1996, pp. 499-500) has expressed himself in terms that are more evocative of the pathology paradigm than of the potentiality paradigm, it is interesting to note that the hermeneutic discourse is a truly foundational element of the psychological therapies irrespective of from whichever paradigm one may be practising. This cross-paradigmatic appeal of the hermeneutic discourse also represents the view of Power and Brewin who, in the next quotation, confirm the sine qua non of this key element of the psychological therapies.

One of the key factors that has been established as necessary for therapies to be effective is that there should be a good therapeutic relationship between the therapist and the client. We ourselves are strong advocates of this common factor as an essential one before therapy can be effective. However, we believe that the therapeutic relationship, while being a necessary factor in effective therapy, is not a sufficient one. We argue that a good therapeutic relationship provides the context in which effective therapy occurs, but does not provide the mechanism through which change or transformation happens. In this book we have asked each of the contributors to consider the possibility that one such key mechanism involves meaning. That is, we consider the possibility that therapeutic change, in any form of therapy, requires a transformation of meaning to occur. This change can and should occur at a number of levels for improvement to be maintained, whether in behaviour therapy, cognitive therapy, or psychoanalytic therapy.

(Power and Brewin, 1997b, p. xi – emphases feature in Power and Brewin’s original text)

What Power and Brewin are suggesting here is something that is not always articulated as a central tenet of effective psychological therapy, and yet it is clearly quite fundamental to the approach that is being advocated here by Power and Brewin. Many therapists – notably those adherents of the Person-Centred Approach (Rogers, 1957; also cited in Mearns and Cooper, 2005, p. 35) to the practice of the psychological therapies – have
suggested that a good working alliance is not merely necessary, but also sufficient for successful therapy to take place.

What Power and Brewin are suggesting in this last quotation, however, is that, no matter how good the relationship between a therapist and her or his client may be, it is by no means sufficient for successful psychotherapy to take place if it does not contain at least some form of mechanism that allows for the transformation of meaning. Without such a mechanism in place, the psychotherapeutic relationship between client and practitioner will not, in and of itself, be sufficient to enable “a transformation of meaning to occur” (Power and Brewin, 1997b, p. xi). In the absence of such a mechanism to facilitate such “a transformation of meaning” (Power and Brewin, 1997b, p. xi), one may be able to use an alternative descriptor by which to refer to whatever process may be taking place – such as perhaps supporting or maybe befriending, even – but psychotherapy, no!

4.4.15 Summative analysis of the data relating to the hermeneutic discourse

This discourse is about meaning and understanding rather than interpretation. In subparagraph 4.4.13, above, we saw how Kuehlwein takes the view that there are “no ultimate truths” (Kuehlwein, 1996, p. 500) – no ultimate meanings – just what makes narrative sense and hence what is meaningful for the individual. We learned (in subparagraph 4.4.4, above) how Spence (1982, p. 137) has also written about the significance of narratives to human beings, and to how they derive a sense of meaning from their lived lives. Once we have found a way of understanding the meaning of certain events in our lives, especially what Spence calls “anomalous happenings” (Spence, 1982, p. 137) that seem to us at first cloaked in “strangeness and mystery” (Spence, 1982, p. 137), we are eventually able to cloak such an event in “respectability” (Spence, 1982, p. 137) through having recourse to framing such an event in a narrative and thereby “giving it a narrative home” (Spence, 1982, p. 137).

We have also learned in subparagraph 4.4.8 (above) how it is not just the symbolisation of our experiencing that plays a part in the meaning(s) that we attach to our experiencing; our emotions also contribute hugely towards the creation of meaning in our lived lives. Our emotions serve to keep us in touch with our values: with those things that are really important to us, and why they are so important to us.
Throughout this paragraph (4.4), we have seen how meanings constitute a multiplicity of possibilities through multiple symbolisations in subparagraph 4.4.9, above, leading to “the formation of very many meanings” (Gendlin, 1997, p. 16) “for any datum of experiencing” (Gendlin, 1997, p. 16). We have also commented upon the inherently ambiguous nature of meanings at subparagraph 4.4.10, above, and seen in subparagraph 4.4.7 (above) how meaning is derived through a dynamic interactive process between at least: “[t]hree major levels of processing – innate sensory motor, emotional schematic memory, and conceptual level processing” (Greenberg and Van Balen, 1998, p. 42). In subparagraph 4.4.8, above, we have seen how “[p]eople are constantly representing themselves to themselves and to others in images, actions, and narratives” (Greenberg and Pascual-Leone, 2001, p. 166), and how consciousness represents “the arena for a final synthesis of different sources of sensory, kinaesthetic, emotional, conative, and conceptual information about the self and the world” (Greenberg and Pascual-Leone, 2001, p. 166). Finally, we have also flagged up in subparagraph 4.4.8 (above) how the complex processing of our experiencing, and the manner in which we attach meaning thereto by symbolisation, is handled by the human brain through the processes of integration and synthesis that are subsumed under the epistemology of dialectical constructivism (Greenberg and Pascual-Leone, 2001, p. 183), although we shall come on to a fuller consideration of these observations in the following paragraph, 4.5, immediately below.

Thus, it can be seen from this paragraph (4.4) just how complex the process of attaching meaning is to human experiencing, and yet how critical an epistemological discourse this represents to the practice of potentiality paradigm therapy in particular, and to the practice of the psychological therapies more generally, “whether in behaviour therapy, cognitive therapy, or psychoanalytic therapy” (Power and Brewin, 1997b, p. xi).

But perhaps this paragraph’s most fundamental contribution to our understanding of the significance of the hermeneutic discourse in the practice of potentiality paradigm therapy is made in subparagraph 4.4.13, above, and emanates from the following observation of Kuehlwein’s:

[C]lients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts

(Kuehlwein, 1996, pp. 499-500)
From this observation, we can readily see how therapy that does not feature any mechanism that facilitates clients’ ability to review and to change the meaning(s) that they attach to their experiencing of their lived lives, and to those events in their lived lives, is in danger of becoming to be considered an empty ritual. Some may protest that this constitutes an unduly harsh criticism, but we shall examine this and related matters in the next discursive chapter (5, below). Obviously, clients may feel supported by a therapist who accepts what they are saying and who appears to give the impression that s/he has understood how life feels from their perspective. But for meaningful change to take place, meaning itself needs to change, and the most likely way for this to happen is if we can help our clients to review the way(s) in which they have attached meaning to their lived lives in the first place through the symbolisation of their experiencing.

The importance of meaning to the psychological therapies is also emphasised by Power and Brewin in subparagraph 4.4.14, above, who express the need for the capacity to assist clients to review and, if necessary or desirable, to change the meanings that they attach to their experiencing in the following terms:

We argue that a good therapeutic relationship provides the context in which effective therapy occurs, but does not provide the mechanism through which change or transformation happens. In this book we have asked each of the contributors to consider the possibility that one such key mechanism involves meaning. That is, we consider the possibility that therapeutic change, in any form of therapy, requires a transformation of meaning to occur.

(Power and Brewin, 1997b, p. xi – emphasis features in Power and Brewin’s original text)

I would qualify what they say just to the following extent: that sometimes a change in meaning may not be absolutely necessary, in which case, all that may be required is to assist the client to review the meanings that they have attached to their experiencing and then to leave well alone and their meanings unchanged. However, if in a mood to be unduly ‘picky,’ I might nevertheless claim that even simply to review such matters and to leave meanings unchanged could also be viewed as comprising change, as the decision to leave meanings unchanged after having reviewed them still constitutes a change from the previous state of affairs when no change had been advocated without having had an opportunity to review the situation.
Finally, the following quotation of Power and Brewin’s further reinforces the desirability for various approaches to the practice of the psychological therapies to feature a mechanism that enables and facilitates clients to review and, if necessary or desirable, to change the meanings that they have attached to their experiencing of the lived lives.

[W]e consider the possibility that therapeutic change, in any form of therapy, requires a transformation of meaning to occur. This change can and should occur at a number of levels for improvement to be maintained, whether in behaviour therapy, cognitive therapy, or psychoanalytic therapy.

(Power and Brewin, 1997b, p. xi)

Their remarks that “[T]his change can and should occur at a number of levels” (Power and Brewin, 1997b, p. xi) serves merely to add further emphasis just how complex the operation of the hermeneutic discourse can be. It is perhaps the part of the quotation from Greenberg and Pascual-Leone that appears in subparagraph 4.4.8, above, however, that most emphasises this complexity when they write that it is “a . . . synthesis of different sources of sensory, kinaesthetic, emotional, conative, and conceptual information about the self and the world” (Greenberg and Pascual-Leone, 2001, p. 166) that is at play here. We shall have more to say about this complexity below in paragraphs 4.5 and 4.6.

4.5 Synthesis of discourses into meaningful, meaning-making whole

4.5.0 Summary of findings so far

So, potentiality paradigm therapy essentially comprises an engagement with three discourses: it constitutes an engagement with an experiential discourse, delivered by a (usually speech-based) relational discourse, and which is best understood when analysed from the perspective of a hermeneutic discourse. But do these three discourses articulate harmoniously with one another, or do they vie for eminence over one another? This is the subject of this paragraph’s investigation.
4.5.1 *E Pluribus Unum*

So do these three discourses continue to exert their respective influences one by one, or do they collaborate to act as one? Here is what Mearns and Cooper have to say about how discourses may work together whilst writing about working at relational depth:

From a person-centred perspective a relationally deep meeting in therapy is one in which all six of Rogers’ ‘necessary and sufficient conditions’ for therapeutic personality development are present, with the ‘core conditions’ (3, 4 and 5 below) in high degree. These six conditions are:

1. Two persons are in psychological contact;
2. The first, whom we shall term the client, is in a state of incongruence, being vulnerable or anxious;
3. The second person, whom we shall term the therapist, is congruent or integrated in the relationship;
4. The therapist experiences unconditional positive regard for the client;
5. The therapist experiences an empathic understanding of the client’s internal frame of reference and endeavours to communicate this experience to the client;
6. The communication to the client of the therapist’s empathic understanding and unconditional positive regard is to a minimal degree achieved. (1957: 96)

Rogers (1973) was later to expand the sixth condition also to emphasise that the communication of the therapist’s congruence should be received to a minimal degree, a dimension that is critical to the offering of a therapeutic meeting at relational depth.

Put succinctly, then, we would suggest that a therapist’s experience of relational depth can be described as follows:

A feeling of profound contact and engagement with a client, in which one simultaneously experiences high and consistent levels of empathy and acceptance towards that Other, and relates to them in a highly transparent way. In this relationship, the client is experienced as acknowledging one’s empathy, acceptance and congruence – either implicitly or explicitly – and is experienced as fully congruent in that moment.

In response to the demands of the science of his time, Rogers had to break up his holistic concept of the therapeutic relationship into more operationally definable sub-variables. For therapeutic personality change to occur, however, he did require all of the therapeutic conditions to be present. This shows that Rogers did not believe that the absence of one condition could be compensated for by the presence of others in high degree. However, he did allow for some partiality in relation to the degree to which each condition was present: ‘If all six conditions are present, then the greater the degree to which conditions 2-6 exist, the more marked will be the constructive personality change in the client’ (1957:100). In other words, while all the conditions had to be present to some degree, he did accept that, for example,
the therapist’s empathy, unconditional positive regard or congruence might vary in
degrees and that the outcome would consequently vary.

Our assertion, however, is that the full power of the therapeutic relationship – as
manifested in relational depth – is best regarded as a gestalt comprising the core
conditions in high degree and in mutually enhancing interaction. This is a view
shared by many other leading figures within the person-centred field (e.g. Lietaer,
2002; Merry, 2004; Wyatt, 2001), and is supported by empirical evidence which
suggests that a high degree of correlation is often found among the three ‘core’
conditions of empathy, unconditional positive regard, and congruence (see Bohart
et al., 2002). In other words, while many person-centred therapists have been
trained to conceptualise these three conditions as discrete variables, in reality it
may be more appropriate to think of them as facets of a single variable: relational
depth. More specifically, as Bohart and colleagues suggest, we might think of
empathy, congruence and unconditional positive regard as analogous to the hue,
brightness and saturation of colour. ‘While in principle any given color can be
dissected into these three qualities, the impact of that particular color depends on all
three’ (2002: 102). In this sense we are not deviating from Rogers’ grounding but
we are trying to re-emphasise its integrative power. In the following sections, then,
while we will talk about different components of the relationally deep encounter, it
is important to bear in mind that we are not talking about separate or additive
components but facets of a single whole. That is, we are not saying that ‘relational
depth = empathy + involvement etc.’ but that ‘relational depth’ = an ‘empathic-
involved-etc. way of being’.

(Mearns and Cooper, 2005, pp. 35-37 – both emphases feature in the authors’ original text)

In this extended quotation, Mearns and Cooper (2005, pp. 35-37) observe that, in the
practice of what is still occasionally referred to as Rogerian therapy, Rogers’ six necessary
and supposedly sufficient conditions act as one overarching discourse that is made up of
six elements, or as “facets of a single whole,” as they say (Mearns and Cooper, 2005, p.
37). The three epistemological discourses documented in this piece of research articulate
the potentiality paradigm with respect to the practice of the psychological therapies in
much the same way as Rogers’ six necessary and sufficient conditions (Rogers, 1957, p.
96): as a single overarching discourse whose efficacy lies in the unity of its unitary
articulation, hence the dictum “E Pluribus Unum” at this subparagraph’s inception. A
similar cohesiveness could be claimed for the more customary discourses of behaviour,
cognition and emotion which, although usually considered independently in most
psychotherapeutic systems, cohere into a unified whole for the purposes of this
configuration of potentiality paradigm therapy, under whose auspices they are considered
dimply as constituting our experiencing.

To return now to our last quotation, in their statement, “In response to the demands of the
science of his time,” Mearns and Cooper (2005, p. 36) are pointing out that in breaking
down and enumerating these ingredients as though they were separate items Rogers was merely following the conventions of the modernist era in which he was investigating and writing about psychological therapy. Similarly, we are all to some extent products of the times in which we live and work, and it is only proper that we should remember this fact when evaluating the work of those who have gone before us. This form of evaluating the meaning and the significance of others’ work constitutes an example of an engagement with the hermeneutic discourse, for such meaning and significance will be context-bound, incorporating, as it will, a sense of time- or era-specificity.

Indeed, my own way of imagining these three psychotherapeutic discourses – the experiential, the relational and the hermeneutic – is as three strands of rope coiled around one another so as to form a thicker, stronger rope. Just as this thicker, stronger rope would have more resilience, so too would psychological therapy when embodied with these three discourses functioning well together as constituting something of an amalgam have more potency to allow its clients to achieve further growth. But, perhaps we should heed van Manen’s caution about the potential mistake of breaking our psychological functioning down into their constituent components:

[I]t is a mistake to distinguish too strongly between feelings and understandings, ideas and emotions.

(van Manen, 1997, p. 367)

The way in which our mental apparatus seems on many occasions to transact these transactions in the merest fraction of a second seems to reinforce van Manen’s position, albeit for a different reason: namely, that it is hard to recognise separate functions when they are articulated as one, especially when any meaning that we may attach to our experiencing is likely to be incorporated into that experiencing in such a manner as to camouflage the reality that there are two discrete functions at work here. (Although, if these functions articulate with one another, can they truly be considered discrete?) And yet this is precisely what we are going to have to do if we are going to understand maximally the true nature of the functions that our mental apparatus regularly transacts on our behalf. After all, it is not unreasonable to expect us as psychological therapists, who propose to work with other people’s experiencing of their lived lives, to understand how this phenomenon works for ourselves.
4.5.2 So just how does this amalgamation work, then?

Given that these three discourses work as one experiencing-relating-meaning-creating-and-understanding over-arching discourse, then, just how does this overarching discourse work? Well, dialectically, it would seem, whilst fashioning our sense of self into a state of perpetually becoming – preferring process over stasis – according to Greenberg and Van Balen.

People in this view are thus dynamic systems attempting to maintain the coherence of their organizing processes by continuous synthesis and restructuring. The person grows toward greater and greater complexity and coherence by constantly assimilating her or his own experience, integrating incongruities and polarities. Growth is inherently dialectical. This view does not privilege an internal process of feeling over the meaning-creating processes of symbolization and reflection, nor does it privilege internal experience over contact with others. Rather, it seeks a dialectical synthesis of all elements, emotion and cognition, internal and external, biological and social, as the crucial act in the creation of meaning. It is thus itself a synthesis of phenomenological, constructivist, and relational/field theory views.

(Greenberg and Van Balen, 1998, pp. 51-52)

The overall thrust of Greenberg and Van Balen’s writing in this last quotation is to claim that this experiencing-relating-meaning-creating-and-understanding over-arching discourse works through a constantly reflexive, never-ending series of processes in which we are continually assimilating, integrating and synthesising our experiencing, and using the meanings that we synthesise from the symbolisation of our experiencing to create meaning, which in turn is used to create fresh experiencing. These discourses are in continual dialogue with one another as our brain continually updates itself with all the latest data available to it, which data in turn becomes symbolised into further meaning-creating experiences. It is in this manner that we come to experience meaning, because the two – experiencing and meaning – eventually become indivisible.

Greenberg and Van Balen also furnish us with the next illustration of this more dialectical approach to understanding the psychological therapies.

Therapy is the co-constructive dialogue in which both the therapist and client struggle to discern and confirm the client’s health-promoting tendencies and possibilities, thereby adding to their strength in the synthesis. Growth thus truly emerges from the “in between,” from the two working together in a collaborative alliance toward the client’s survival and enhancement, and to the confirmation of life. The therapist’s ability to see and focus on possibilities in the client’s
experience and help construct the implications of experience is an important element in promoting the client’s directional tendency.

Experience is rich with not yet articulated implications. New meanings always can be created from a person’s field of internal complexity. Thus becoming oneself is really the unfolding of the implications of internal experience. This involves discovering some of the constituents and organizing them into coherent wholes in a growth-promoting interaction with another. The growth tendency is thus seen as being guided (1) from within, by an emotion system that operates by evaluating situations in relation to one’s well-being, and (2) from without, by the other, who sees, focuses on, and confirms the tendency to grow. The multiple internal and external elements are dialectically synthesized into a holistic response. Thus growth occurs in an interpersonal field. The growth tendency is a biological tendency that develops and is strengthened by being focused on, symbolized, and confirmed in dialogue.

(Greenberg and Van Balen, 1998, pp. 47-48 – emphases feature in authors’ original text)

What Greenberg and Van Balen are suggesting in this last quotation is that, just as they have pointed out how these three psychotherapeutic discourses work in concert with each other in the previous quotation from a few pages later on in the same work (Greenberg and Van Balen, 1998, pp. 51-53), here (Greenberg and Van Balen, 1998, pp. 47-48) they are suggesting that, just as they have suggested that these three psychotherapeutic discourses work in concert with each other (Greenberg and Van Balen, 1998, pp. 51-53), so too are they suggesting that client and therapist model a similar sort of dialogical process as they work together in therapy, thereby making therapy genuinely reflective of life more broadly.

Yet again we may note the use of terms like “co-constructive dialogue,” “synthesis” and “collaborative alliance,” suggestive as they are of the more interactive dialogical nature which the therapeutic relationship has embraced in more recent years. Noteworthy also is the manner in which the terms “[e]xperience” and “meaning” are used not exactly interchangeably, but in a manner that is suggestive of the way in which meaning derives more directly from experience than through any discrete hermeneutic procedure. And so, given the focus on a more dialogical therapeutic relationship, we may in this quotation envisage these three discourses – the experiential, the relational and the hermeneutic – interweaving in and out of each other as the psychological therapies get to work.

Of course, it is worth noting that one reason why these three discourses work interactively in the practice of the psychological therapies is because this is also how they operate in our lives more generally. We seldom stop to query why it is that we attribute such-and-such a meaning to any given experience; rather, we simply accept that this is how we operate, and
we seldom have any need to question why life unfolds in such a manner. It may be whilst in therapy that an individual senses for the first time the need to examine more closely how these processes will have been at work in them throughout all of their lived adult lives.

Similarly, Mearns and Cooper also point out that relationship is the potent force that it is in the practice of the psychological therapies because that centrality of relational importance is also a facet of how relationships work in our lives more generally; because we are social beings, relationships are central to our lived lives.

This centrality of relationship is not simply because ‘relationship is a good vehicle for communication’, it is because relationship is fundamental to the existence of the human being – we are governed and defined by relationship.

(Mearns and Cooper, 2005, p. 160)

4.5.3 How do experiencing and meaning articulate a discursive discourse?

Of all the three discourses under consideration in this piece of research – the experiential, the relational and the hermeneutic – it is probably fair to suggest that it is the experiential and the hermeneutic discourses that are the most closely intertwined of the three, as the following quotation serves to illustrate:

A fundamental task of therapy is the symbolizing of subjective emotional experience, to understand it and unfold its implicit action tendencies. Change in psychotherapy results from symbolization in awareness of truly novel dynamic syntheses occurring in an internal field of activation. This often involves a process of activating and restructuring affect/emotion schemes. Emergence of new meaning is facilitated by vivid evocation in therapy of emotionally laden experience, which brings emotions into contact with reflective processes. Dialectical syntheses of emotion and reflection are important in therapeutic change. Promoting clients’ access to their emotions in therapy serves a number of important functions. First, it provides the therapist and the client with information about the meaning of events, and also about the client’s needs, desires, beliefs and values. Second, access to emotions serves to organize experience, because emotions help to set priorities about what requires immediate attention and what actions shall be performed. Third, access to emotions tells clients when there is something wrong, and this awareness of existential/experiential problems motivates problem solving. Finally, expression of unexpressed or stifled emotional responses helps access dysfunctional beliefs and can mobilize unexpressed needs and goals that address the future.

(Greenberg and Pascual-Leone, 2001, p. 179)
It can be readily appreciated from this last quotation that our experiencing and our symbolising and our creating and understanding of meaning are inextricably bound up with one another. In fact, no sooner has one completed this than this in turn prompts a renewed take up in our experiencing, *et alia*, which in turn suggests some new meaning, which in turn engenders new experiencing. It is as if, once the blue touch-paper has been lit, one has set off one’s experiential-hermeneutic processes into what almost amounts to something akin to perpetual motion, perhaps only to be arrested when one’s organism eventually falls asleep, although who is to say that these processes cannot continue to be processed whilst we are asleep? Some however, cognisant of Greenberg and Pascual-Leone’s phrase “symbolization in awareness” (Greenberg and Pascual-Leone, 2001, p. 179), might prefer to consider that experiencing can only take place within the parameters of our conscious awareness – even though many of us claim to have some experiencing of our dreams – and it is certainly true that we are still experiencing when we are recalling past experiences; if our symbolisation of them remains constant, however, then we are likely to distil a similar sense of meaning from them, particularly if we are thereby triggering the same emotion schemes (Elliott, Watson, Goldman and Greenberg, 2004, pp. 25-28).

Here is what Watson and Greenberg have to say about how we synthesise the data from our rational and our experiential discourses:

> Our primary objective in our approach to experiential therapy is the dialectical synthesis of reason and emotion. Experiential techniques help people to apprehend, symbolize, and integrate information from both their rational and experiential systems – two important parallel modes of processing information. The relevance of a dialectical constructivist perspective for experiential therapy has been advocated by Greenberg, Rice, and Elliott (1993). As they state: “In a dialectical constructivist view, therapeutic exploration and change . . . are primarily generated by a dialectical process of synthesising, or actively exploring contradictions between, concept and experience and by constructing new meaning through a process of differentiation and integration of experience. A dialectical constructivist view does justice both to the reality of immediate subjective emotionally based experience and to the active constructive cognitive processes by which people create meaning from immediate experience” (p. 56).

(Watson and Greenberg, 1996, p. 253)

Note the appearance of the words “synthesis,” “synthesising” “integrate” and “integration” in this last quotation to express the dialectic turn taken by our understanding of the ways in which potentiality paradigm therapy operates these days. Note also the emphasis on the
expression “dialectical synthesis” which appears no less than three times in the following extract from later on in the same work from which the previous quotation was taken.

The application of a dialectical constructivist perspective to experiential therapy emphasizes the dialectical synthesis of reason and emotion. The construction of new meaning may be further broken down into a dialectical synthesis between emotional experience and its symbolic representation in language and the dialectical interaction of symbolized inner experience and reflexive examination. In therapy, experiential therapists work to augment the three client processes of emotional arousal, symbolic representation, and reflexive examination, in order to facilitate resolution of the specific affective-cognitive problems that are causing client distress. As they symbolize their experience, clients are in a position to gain fuller access to their inner experience, heightened by increased emotional arousal. Increased arousal enables them to distill the essence of their experience and symbolize it accurately to create new meaning. In the process, they may become aware that their descriptions of events color the way they see the world and learn that language is constitutive of experience. Thus, they may learn that through the act of symbolizing experience they can alter its impact and feel differently about it.

The symbolization of experience enables clients to apprehend the significance of events for themselves and to identify the personal styles they have developed in response to their constructions of experience. Subsequently, they are in a better position to reflect on their discoveries in a dialectical synthesis that enables them to formulate alternative ways of acting and responding in specific situations. These alternatives can then be similarly examined, and their implications and consequences assessed. In so doing, clients achieve greater freedom to choose those courses of action that are most likely to help them realize themselves as fully as possible in the future.

(Watson and Greenberg, 1996, pp. 271-272)

4.5.4 The dialectical constructivism that underpins Process-Experiential Therapy

Once again, we can discern from the following quotation just how much of a synthesis is required for the experiential and the hermeneutic discourses to function effectively:

All therapies are based on philosophical assumptions, particularly assumptions about how people come to know things (“epistemology”). The technical term for the epistemology on which process-experiential therapy is based is dialectical constructivism. In this respect, PE [Process-Experiential – Ed] therapy is most strongly influenced by Jean Piaget (e.g., 1969), specifically as interpreted and developed through the writings of his student Juan Pascual-Leone (1980, 1991). In describing the development of the self, Pascual-Leone (1991; see also Greenberg & Pascual-Leone, 1995, 1997, 2001) clarified the dialectical nature of self-development.
Basically, dialectical constructivism holds that in coming to know a thing, both the state of one’s knowledge and the thing itself are changed: What one calls a “fact” is actually a joint construction of the “things themselves” and one’s knowing process. The word “dialectical” derives from the Greek word for the art of discussion or debate. Such an interaction requires both separation of opposing sides and meaningful contact or exchange between different sides. In a dialectical view, it is the interaction and synthesis of different levels of processing and different emotion schemes that explain human functioning. For example, different emotion schemes, such as ones roughly describable as “vague disappointment” and “warm closeness,” synthesize to organize an immediate experiencing that is something like “reaching out for comfort.” Reflection on this set of vague feelings leads to a symbolized experience that is then articulated as, “I need a hug.” This verbal symbolization both represents and at the same time helps make the experience what it is. It is by reflecting on experiencing that we make sense of what we feel. It is through a dialectical process of explaining our experience that we create meaning. Rather than simply processing information in a logical manner like a computer, we create new meaning by a dialectical process of acting on and synthesizing components of experience.

This position differs from what might be called “naive” or “radical” constructivism, the postmodernist or relativist view that reality is irrelevant and only “versions” or interpretations of the world are of interest. In contrast, dialectical constructivists argue that there are reality constraints (emotion processes being one) that limit our constructions. Thus, not all constructions fit the data equally well, although it does seem likely that several different accounts (or versions) might end up being plausible or valid. Thus, dialectical constructivism is one of the contemporary philosophies of science that attempt to steer a course between relativism (“anything goes”) and realism (“nothing but the facts”).

(Elliott, Watson, Goldman and Greenberg, 2004, pp. 36-37 – emphasis in original text)

This last remark [about “steer[ing] a course between relativism . . . and realism” (Elliott, Watson, Goldman and Greenberg, 2004, p. 37)] accords with Juan Pascual-Leone’s description of dialectical constructivism as representing “a middle way between rationalism and empiricism” (Pascual-Leone, 2015, p. 15).

However, the main point to distil from an analysis of this last quotation comes about through a close reading of its middle paragraph, in which Elliott, Watson, Goldman and Greenberg (2004, pp. 36-37) make the point that, although the beginning of a dialectic process would likely start off with the two sides of a debate or argument separated so that one may readily appreciate their respective positions, there would nevertheless need to follow a process whereby these two sides were brought together into what the authors call “meaningful contact or exchange between different sides” (Elliott, Watson, Goldman and Greenberg, 2004, p. 36). The implication that is being made apparent here is that these
various discourses can not only communicate with one another, but also that they are able to listen to each other, and that they do so in a manner that enables them to influence or to modify either one another or else the overview taken by the host organism. It is to these aspects of human brain functioning that we refer when we speak of dialectical constructivism, and we shall have more to say about this important subject in subparagraph 4.6.2, below.

### 4.6 Analysis of the data on the operation of the three discourses

#### 4.6.0 Introduction

I propose to use this paragraph to recapitulate the main themes that my analysis of the data subsumed within the last paragraph (paragraph 4.5, above) has identified – integration and synthesis, along with dialectical constructivism and a brief foray into the Theory of Constructivist Operators (TCO), from which dialectical constructivism derives – as these, along with the three epistemological discourses covered earlier in this chapter (in paragraphs 4.2 to 4.4, above, to be precise), are likely to feature prominently in the next discursive fifth chapter, below.

#### 4.6.1 Integration and synthesis

Even if one were not wholly familiar with the nature of this work, one would, I maintain, still only have to read these quotations for their dominant themes to make themselves known to the reader: these are the themes of integration and of synthesis, as well as the topic of dialectical constructivism, which is the way in which these discourses communicate both with themselves and with their host organism.

The first of these two dominant themes – that of integration and synthesis – serve to confirm my impression, first shared at subparagraph 4.5.1, that these three discourses seem like three constituent strands of a rope which, when wrapped around each other, form a
considerably tougher and thicker rope that is capable of withstanding considerably greater loads and of offering enhanced levels of resilience. But are we talking here of integration or of synthesis? Indeed, what is the difference between the two?

Sometimes authors use language quite precisely according to accepted conventions of meaning, especially where highly specialised terms are used in privileged forms of discourse. At other times, whilst they may observe all the various protocols that relate to their own specialism, they may nevertheless be quite sloppy in their use of language outside of these contexts. And sometimes it can be quite hard to know which is which!

Given this state of affairs, sometimes it is up to the researcher to devise her or his own way of using language which, so long as s/he makes explicit the way(s) in which they are using language, constitutes a perfectly acceptable way out of this thorny little impasse. My proposal is to use the term integration where two or more ideas are combined, but combined in such a manner as still to allow the attentive enquirer to distinguish where each influence may be present. By way of contrast, I propose to use the term synthesis where the merging of ideas and influences are so well blended together such that they create a new structure in which the original strands are no longer readily discernible, except perhaps through the most perceptive of scholarly analysis by those familiar with that discipline.

If one were to draw a parallel between integration and synthesis with the terms eclectic and integrative, one could perhaps follow my line of reasoning here. If by eclecticism we are to understand that various approaches to the practice of the psychological therapies were to be used almost on an ad hoc basis with little systematic attempt at integrating these disparate approaches into an individualised coherent approach to working with people, then we would in all probability have something less integrated even than the meaning that I am claiming to denote by my use of the term integration herein. However, an integrative approach to the practice of the psychological therapies comprises various influences that the practitioner has over the years blended together to form an organised and coherent approach to working with people. It is generally understood that such integrative approaches to psychological therapy are likely to be unique to each individual practitioner, and so escape any resemblance to formulaic or manualised approaches to the practice of the psychological therapies.
The point that I am seeking to make here is that, just as an *integrative* approach to therapy is a good deal more blended than an *eclectic* approach, even in an *integrative* approach some resemblance to the origins of one’s constituent approaches to therapy are still likely to be discernible, especially to the tutored eye or the seasoned ear. Well, my use of the term *synthesis* denotes something even more blended than I intend to signify by my use of the term *integrative* here when applied to the practice of the psychological therapies, and we can, I think, demonstrate how this works, courtesy of the human brain.

When we have had a particular unit of experiencing, the next step is for our brain to symbolise this experiencing by creating some meaning which it promptly attaches to this original unit of experiencing. However, if this was all that our human brain did, this would constitute an example of what I am signifying by my use of the term *integration*. But this is not all that our human brain does with the attachment of this meaning; it attaches the meaning to the original unit of experiencing in such a manner that this meaning immediately becomes reinvested in that original unit of experiencing such that the meaning becomes an integral part of that original unit of experiencing. This is what I am intending to denote by my use of the term *synthesis*, and my explanation of this usage is that once experiencing and meaning have become synthesised, they no longer enjoy a separate existence; rather, they have become synthesised together in such a manner as to have created a *new unit* of experiencing, this time embodying the meaning that was attached through our symbolisation of this original piece of experiencing, often just a few seconds later in all probability, or even just a few microseconds later on occasion!

Certainly, to return to our epistemological discourses, the experiential and the hermeneutic discourses seem continually to be running in and out of one another’s territory, as if they had come to rely upon each other in order to establish meaning from experience, and in order to reinvest that sense of meaning with fresh experiencing in a never-ending reflexive dialogue. Indeed, it was with just this kind of dynamic process in mind that I suggested at subparagraph 4.5.3, above, that it is these two discourses that are most closely related to one another because of the way in which they necessarily articulate with each other by discerning meaning and then attaching that meaning to experiencing in such a way as to make possible the continual process of investment and reinvestment of meaning, whose added value thereby creates fresh experience.
4.6.2 Dialectical constructivism

4.6.2.0 Introduction to dialectical constructivism

Dialectical constructivism is the name given to the model that tries to reflect the way(s) in which our brain functioning processes human experiencing and thereby creates or constructs personal meaning. The early work on the development of this way of conceiving of human brain functioning was conducted by Jean Piaget, and was later further developed and refined by his former pupil and research associate, Juan Pascual-Leone, who has continued to explore Piaget’s legacy of cognitive developmental theory, and has devised the Theory of Constructivist Operators (TCO) (Pascual-Leone and Goodman, 1979; Pascual-Leone, 1987, pp. 531-570). As it is from this theory (TCO) that dialectical constructivism (Greenberg and Pascual-Leone, 2001; Pascual-Leone, 1991) is derived, perhaps this is where we should begin our introduction to dialectical constructivism.

4.6.2.1 Theory of Constructivist Operators (TCO)

The Theory of Constructivist Operators (TCO) holds that there are two sets of significant apparatus at work in our brains that determine performance and experiencing: schemes and hardware operators. The schemes are “informational structures” (Greenberg and Pascual-Leone, 1999, p. 171) that supply the details or the ‘data’ of what we are experiencing in our lived lives, and the hardware operators are what Greenberg and Pascual-Leone (1999, p. 171) refer to as “innate, general-purpose processing resources” (Greenberg and Pascual-Leone, 1999, p. 171) that are independent of meaning and which process this data for us. (Given that computing is very much a prominent discourse of the present age, it is tempting to consider these two sets of significant apparatus in terms of hardware and software. If we were to do so, we would doubtless consider the hardware operators to correspond to the processors and other hard-wired circuitry that power our modern-day computers with computational power and capacity, and the schemes as corresponding to the computer programmes and the data that we feed into our computers. As we are considering the brain functioning of human beings at this point, however, this just might be the best place to leave this analogy behind.)
Examples of some of these hardware operators referred to above are “mental attentional energy, attentional interruption (i.e., active inhibition), and the gestalt field factor (an attention “closer” operator)” (Greenberg and Pascual-Leone, 1999, p. 171). These are managed by what Greenberg and Pascual-Leone term “executive structures” (Greenberg and Pascual-Leone, 1999, p. 174) which determine the direction of our conscious mental attentional energy, such as by activating, boosting or interrupting the functioning of our schemes. It is from these schemes that Process-Experiential Therapy (PET) and Emotion-Focused Therapy (EFT) derive their highly significant emotion schemes, whose restructuring both comprises such an integral element of the sort of change which constitutes one of the prime goals of PET/EFT, and which Greenberg and Pascual-Leone suggest here are so influential in the activation of our cognitive schemes as well.

[T]he significance of affective factors on cognition is apparent: Affect brings into play certain cognition-guiding executive schemes by activating them.

(Greenberg and Pascual-Leone, 1999, p. 175)

4.6.2.2 Dialectical constructivism

We have already learned in subparagraph 4.5.1 (above) how these three epistemological discourses – the experiential, the relational and the hermeneutic – work at their best when they work together rather than independently, and in subparagraph 4.5.2 (above) how the overarching discourse that these three discourses articulate is dialectical in nature. Then, in subparagraph 4.5.4 (above) we learned that these three discourses are able to communicate with one another, and also to listen to each other in such a manner as to be able to influence or to modify either one another or else the overview taken by the host organism. In subparagraph 4.6.1 (above) we learned how the themes of integration and synthesis were the two that occurred most frequently from my analysis of the data that was presented in paragraph 4.5 (above), and in subparagraph 4.6.2.1 (above) we learned a little about the TCO, which is from whence the epistemological mechanism of dialectical constructivism is derived. But from whence did dialectical constructivism get its name?
The first word – *dialectical* – signifies this epistemological mechanism’s reliance upon a dialectical process whereby opposite positions are clarified and then brought into contact with each other, thereby giving rise to some form of dialogue which ensues between these two positions. Greenberg and Pascual-Leone explain it thus:

> We argue that this . . . involves an ongoing dialectic between two streams of consciousness: explanation and direct experience; that is, consciously mediated conceptualization, on the one hand, and automatic, immediate experiencing on the other.

(Greenberg and Pascual-Leone, 1999, p. 170)

The second word – *constructivism* – signifies that this epistemological mechanism belongs to the constructivist research paradigm whereby phenomena such as reality and truth are deemed to comprise constructions that are constructed by humankind rather than comprising enduring truths and realities that are stipulated by the immutable laws of science, and which are awaiting our discovery and understanding of them. Here is Pascual-Leone’s account of the significance of the word *constructivist*:

> A theory of development and learning is constructivist when it minimizes both content-bound maturational predeterminations and passive empiricist (simple copy) learning and, instead, recognizes innate biogenetic determinants for adapting via cognitive learning, by constructing suitable internal models.

(Pasual-Leone, 2015, p. 18)

I tend to think of dialectical constructivism as a constructivist model that has been created to reflect the way in which the human brain integrates and synthesises the data that it receives. A simple psychological therapist such as myself would scarcely make much sense of the positivist *explanans* of brain functioning, so a constructivist model that reflects and translates this *explanandum* into terms that are meaningful to me is precisely what I and many other counsellors and psychotherapists need, and hence what I am attempting to construct herein.
5.0 Overview

During the course of this chapter, I propose to discuss the various findings that I have identified from my analysis of the data studied in the course of this piece of research, focussing especially on those epistemological questions that lay at the heart of my enquiry.

The first element of this discursive chapter consists of an exposition of both the creative synthesis that comprises the sixth and final phase of Moustakas’s (1990) heuristic research method and of the interpretive synthesis that is customarily considered the ‘product’ or ‘outcome’ of a qualitative meta-synthesis. The second main subdivision of this chapter comprises a discussion both of this synthesis and of any other significant aspects of the work that have come to my attention by virtue of my engagement with this research study.

5.1 The creative and interpretive synthesis

5.1.0 Introduction to the creative and the interpretive synthesis

In this paragraph, I propose to set out formally the synthesis that is the ‘product’ or the ‘outcome’ of this piece of research. It could be considered to be a summary of this research study’s findings that also states the paradigmatic accoutrements of the potentiality paradigm with especial reference to the study and practice of the psychological therapies.
5.1.1 Ontology

As I have already stated elsewhere (Gilmore, 2008) and at paragraph 4.1, above, the ontology of the potentiality paradigm’s articulation of the psychological therapies is a constructivist one, which is reiterated in the term by which its epistemological mechanism is known: *dialectical constructivism*. This constructivist ontology is to be expected when it is not so much the scientific explanation of psychology that is being offered – which, of course, would derive from a positivist ontology – but rather the impact of psychological interventions upon the lived lives of human beings. I propose nevertheless to include in this synthesis a description of the psychological therapies that embraces both constructivist and positivist dimensions.

5.1.2 Epistemology

As Pascual-Leone’s work on dialectical constructivism features so prominently in this piece of research, particularly in its later stages, perhaps it is only fitting that we should make reference to his definition of epistemology at this juncture.

> Epistemology is the discipline that studies knowledge, its acquisition, and how to ensure its validity.

(Pascual-Leone, 2015, p. 37 – note one to chapter two)

Of interest here is Pascual-Leone’s insistence on the “validity” (Pascual-Leone, 2015, p. 15) of any understanding of epistemology to which we may come; this should not however surprise us, as Pascual-Leone is a cognitive psychologist, a developmental psychologist and a neuropsychologist whose research interests are much more likely to align themselves with either the positivist or the post-positivist research paradigms. Along with *reliability*, *validity* is the other criterion most customarily used to determine the rigour of positivist research, although even once research that relied upon qualitative research methods began to be conducted, these two terms still used to be the central planks of the criteria by which the value of such early constructivist research was still evaluated (LeCompte and Goetz, 1982). It was in the early 1980s, however, that constructivist researchers began to express their reservations as to how suitable these two terms remained in an age when research that relied upon the use of qualitative research methods had become more commonplace.
(Harrison, MacGibbon and Morton, 2001; Krefting, 1991; LeCompte and Goetz, 1982; Reason and Rowan, 1981a; Reason and Rowan, 1981b); “And so we have to learn to think dialectically” as Reason and Rowan (1981b, p. 241) put it, to cite an example from one of their own contributions to their seminal text (Reason and Rowan, 1981a). Whilst I am not suggesting that either validity or its counterpart, reliability, are no longer of any significance to constructivist research – indeed, there are those who still positively argue for their re-adoption, such as Long and Johnson (2000) and Morse, Barrett, Mayan, Olson and Spiers (2002) – such issues tend nowadays to be subsumed under terms such as trustworthiness when conducting constructivist research (Morrow, 2005), and it is this term that I have used when addressing such quality issues in this piece of research, such as at paragraph 3.6, above.

As can be seen from the subparagraphs that follow, I have broken down my account of the epistemology of potentiality paradigm therapy into two constituent elements: an epistemological mechanism – as outlined in subparagraph 5.1.2.1, immediately below, and which features dialectical constructivism’s mechanism that accounts for the integrative and synthesising aspects of human brain functioning – and three epistemological discourses – as outlined at subparagraph 5.1.2.2, below, and which account for the three principle areas that are at work in the change mechanism of potentiality paradigm therapy.

5.1.2.1 Epistemological mechanism: dialectical constructivism

The technical term for the epistemology on which process-experiential therapy is based is dialectical constructivism.

(Elliott, Watson, Goldman and Greenberg, 2004, p. 36)

And, because all potentiality paradigm therapies cite experience as one of its basic currencies of human functioning – as evinced in paragraph 4.2, above – it follows that dialectical constructivism also constitutes the epistemological mechanism for all potentiality paradigm therapies.

The reason for dialectical constructivism’s status as the epistemological mechanism in potentiality paradigm therapy is because it reflects our brain functioning. We saw in paragraph 4.2 (above) how the manner in which we symbolise our experiencing helps us to
construct the various felt senses that we experience throughout lived lives. In addition to this symbolisation of our experiencing, it is the manner in which the human brain integrates and synthesises (as we saw in paragraph 4.6.1, above) the data from our three epistemological discourses – the experiential, the relational and the hermeneutic – that determines our responses to those life events that populate our lived lives, including how we emote, how we think and how we behave. Finally, we saw in subparagraph 4.6.2 (above) that it was these functions that were covered by what we call dialectical constructivism.

5.1.2.2 The epistemological discourses: the experiential, relational and hermeneutic

It is all very well to proclaim dialectical constructivism to be the epistemological mechanism operating in the practice of potentiality paradigm therapy, but in order to render this a meaningful or a helpful account, we will need to specify what it is that is being integrated and synthesised by dialectical constructivism.

The answer to this question is that it is the data that emanates from the three epistemological discourses which have been identified from my analysis of this research study’s data as constituting the heart of potentiality paradigm therapy – the experiential, the relational and the hermeneutic – that are being integrated and synthesised by our brains under the guise of dialectical constructivism; or, put another way, it is the material from these three psychological registers or domains across which the integration and synthesising work of dialectical constructivism takes place, and which represent the three principal data sets with which dialectical constructivism is working.

5.1.3 Methodological laboratory: the therapeutic relationship

The reference immediately above (at the conclusion to subparagraph 5.1.2.2) to data sets should give the attentive reader some clue as to how I am arriving at this creative, interpretive synthesis: I am doing so by reflecting on the study and the practice of potentiality paradigm therapy as if it constituted a piece of research, which of course is precisely what it does constitute: each piece of potentiality paradigm therapy genuinely does indeed constitute an individual piece of research. I adopt this position on the basis
that none of us who practice the psychological therapies – no matter for how long we may have been studying or practising them – can ever claim to know precisely how any given client is going to react to any particular psychotherapeutic intervention. Therefore, on this basis, each and every piece of individual clinical work has to be regarded as in itself constituting a piece of research, or as an experiment, which is how those practising Transactional Analysis or Gestalt therapy used to refer to it way back in the 1970s. (“Would you be willing to try this little experiment with me?” they would typically ask their clients.) So, taking this comparison of psychological therapy to research, how would this influence how we should regard the methodology of potentiality paradigm therapy?

In our research paradigms, the methodological element deals with how we view our research task, initially from a philosophical or a theoretical perspective, as this will determine how we come to view the research task that faces us. Once we have adopted a theoretical or a philosophical view of our research task with which we are happy to proceed, these methodological perspectives will next guide us towards identifying those research methods that will help us to unearth whatever kind of data we may be seeking. If the research task is to find an answer to a research question, what then is the equivalent methodological task that faces the practitioner of the psychological therapies?

Given my remarks below, at subparagraph 5.2.1, where I stress how critically important a meaning-changing mechanism is to the viability of potentiality paradigm therapy, the principle task that confronts the practitioner is, aided by what one has found out about the nature of the personality of one’s client, to identify which of the many potentially meaning-changing strategies would best help the client to examine and, wherever it is viewed by the client as necessary or desirable, to change the meaning(s) that they have been attaching to their experiencing. It is extremely important that the most careful consideration is given to this most crucial of points, because different clients with different personalities are likely to respond quite differently to the same sort of psychotherapeutic intervention. Therefore, in order to achieve the best possible outcome for each client, it is important to achieve a sense of fit between one’s choice of meaning-changing mechanism and the personality of one’s client. It is, then, in this sense that I have come to consider the psychotherapeutic relationship as constituting something of a methodological laboratory in the practice of potentiality paradigm therapy. In this methodological laboratory, the practitioner will ‘experiment’ by trying to identify those psychotherapeutic interventions or other strategies that will stand the best chance of assisting their client to achieve whatever
psychotherapeutic goals they may have set for themselves and for their practitioner. It is in this sense, then, that I am couching the psychotherapeutic relationship between client and practitioner in terms of a methodological laboratory, after the way in which laboratories have come to be associated with experimentation [cf. Harré and Secord’s invocation of the term “learning laboratory” (Harré and Secord, 1972, p. 46)]. However, in view of the unfortunate connotations that have flowed from some of the more gross acts of experimentation with human beings in the name of psychology over the years, it is nonetheless particularly important to note here that I am not suggesting that practitioners of potentiality paradigm therapy should be given carte blanche to ‘experiment at will’ with their clients: such experiments as are conducted with clients should always be done so with the utmost respect for the client, and in a manner that is justifiable in terms of assisting the client to achieve the psychotherapeutic goals that they have set for themselves.

Therefore, we arrive at a position whereby we may proclaim that our psychotherapeutic methodological task is to identify those strategies and interventions by which we may stand the best chance of assisting our clients to achieve their psychotherapeutic goals. Just as the philosophical and the theoretical position that we adopt with respect to pursuing our research task can help us to identify those research methods that would seem to stand the best chance of helping us to address our research question, so too how we adopt a hermeneutic stance with respect to our psychotherapeutic task will help us to determine how best to structure our psychotherapeutic relationship with our clients, or else how to identify the various psychotherapeutic interventions that we may use to progress our psychotherapeutic work with respect to our client’s agenda.

5.1.4 Illustrative analysis of instances of epistemological discourses

5.1.4.0 Introduction

Given the rather abstract, theoretical nature of this piece of research, I thought it might help to bring it to life somewhat were I to furnish the reader with some form of illustration of how the three epistemological discourses that feature so significantly in this piece of research may arise during the course of a fairly typical piece of clinical work. This represents something of a creative synthesis, in that I have created the following case
vignette by synthesising numerous pieces of clinical work that I have conducted at various points in time over the past four decades or so. Although this illustrative vignette represents a purely fictional account that has been specifically created by this researcher to illustrate the manner in which these three epistemological discourses articulate the potentiality paradigm with respect to the practice of the psychological therapies, it should nevertheless represent the sort of clinical work to which no reasonably experienced practitioner of the psychological therapies should feel themselves to be a stranger.

5.1.4.1 Illustrative case vignette with accompanying analysis

Let us presume that a client is talking to their therapist about an aspect of their personality which they find difficult to accept and which they would like to change. Obviously, because it is virtually impossible to experience (experiential discourse) something without our mental apparatus attaching some form of symbolisation (hermeneutic discourse) to it (after Gendlin, 1997), our putative client must be forgiven for including assumed meanings (hermeneutic discourse) (explanatory model) in their initial account of their psychotherapeutic agenda to their therapist. The therapist’s job at this juncture is therefore to strip this account of any meaning (hermeneutic discourse) (explanatory model) which may serve more to distract than to aid any meaningful focus on the client’s agenda. Our putative therapist is likely to achieve gaining this more narrative, descriptive account of what has been happening in their client’s life by going over their client’s account in such a manner as to reframe it in a manner more conducive to a phenomenological account, perhaps in the manner advocated by Giorgi (2009) (descriptive model). A need for understanding (hermeneutic discourse) could explain how our putative client may have been adhering to the more explanatory model rather than the more descriptive model required here. Our putative therapist may use this phase of therapy to introduce our putative client to the distinction between description and explanation (a use of the psychoeducative model that is more frequently found in pathology paradigm therapy), although it should be noted that this is done in the interests of clarity rather than telling the client how they should be thinking.

The therapist may then use their understanding (hermeneutic discourse) to develop a picture of the client in terms of the sort of changes that they, the client, would like to implement. In cases where the client desires to experience themselves differently
we may use the term ‘more positively’ as a form of shorthand to annotate the direction of the desired change – the therapist is likely to try to achieve this by structuring her or his relationship with the client (relational discourse) in such a way as to facilitate the client coming to experience themselves more fully and hence more positively (experiential discourse).

However, the actual work of changing is facilitated, but not achieved by the therapist; it is achieved by the client, and not by the therapist’s use of the psychotherapeutic relationship (relational discourse). We can assert this because we know that change can be brought about only by the individual her- or himself changing, as the type of change for which we are aiming in the psychological therapies cannot be imposed, nor should it be inflicted upon anybody.

Therefore, the client her- or himself has to engage with their own hermeneutic discourse applied to their psychotherapeutic relationship with their therapist (relational discourse) in order to develop an understanding (hermeneutic discourse) of how the therapist is experiencing them (experiential discourse) in the psychotherapeutic relationship (relational discourse). Then, the client has to determine what implications the therapist’s experiencing of them in therapy (experiential discourse) has for their own experiencing of themselves (experiential discourse). Finally, if our putative client can be helped to experience themselves more positively (experiential discourse), this will presumably also affect the most basic of all relationships (relational discourse), the client’s relationship with themselves (both relational discourse and experiential discourse).

By way of an illustration of this last point, if our hapless client has hitherto always experienced themselves (experiential discourse) as unacceptable or unlikable (hermeneutic discourse), if they are then able to experience their therapist (experiential discourse) as liking or accepting of them (hermeneutic discourse) through their engagement with the relational discourse, it is to be hoped that they can then no longer define themselves as being unlikable or unacceptable (hermeneutic discourse), because here at last is one person who clearly does accept and value them (relational discourse), which in turn may lead to a change in the client’s relationship with themselves (relational discourse): they will be able to like or, at the very least, to accept themselves instead of dislike themselves (both experiential and relational discourses). Consequently, it is to be hoped that this newly acquired capacity to re-experience themselves (experiential discourse) in a more positive
light (hermeneutic discourse) enables them to switch from a potentially restrictive external locus of evaluation to the potentially less restrictive and more facilitative internal locus of evaluation, in which they are no longer constrained to depend on others for their own sense of acceptance and validation.

5.1.5 Conclusion

The assiduous reader will have noted the repeated references to human brain functioning contained within my account of this piece of research. Such repeated references have come about because it is our human brains that integrate and synthesis the data gleaned from across the three epistemological discourses that feature so centrally in this research study: the experiential, the relational and the hermeneutic discourses. Naturally, as our brains work according to the laws of physics – through electrical impulses – and chemistry – by means of the biochemical mechanisms that are subsumed under the study of neuroscience and endocrinology – the study and investigations into the functioning of these mechanisms comes under the remit of the positivist research paradigm. I am not purporting for one moment to be a neuroscientist when making these references: rather, I am a constructivist who is using a qualitative meta-synthesis to construct a model that reflects the way(s) in which we as constructivists must glean from neuroscientific research how our brains integrate and synthesise the data that reaches them. As dialectical constructivism emanates from the Theory of Constructivist Operators (TCO), it is only right and proper that I should both acknowledge and reference this derivation at some point in this research study.

Nevertheless, the view that this piece of research has taken with respect to the analysis of the epistemological mechanism – dialectical constructivism – by which our brains integrate and synthesise the data gleaned from across the three epistemological discourses – the experiential, the relational and the hermeneutic – has quite properly been underpinned by the constructivist research paradigm, as outlined above at subparagraph 2.3.1.

As the concept of synthesis seems to feature quite prominently in this piece of research, my ambition was to include somewhere in this paragraph – which is in itself designed to represent a creative, interpretive synthesis – some form of amalgamation of these two research traditions that may reflect how these two paradigms may articulate with each
other so as to help to describe how each may influence the other in the practice of the psychological therapies. The following description, which can be read in the sentence immediately following on from this one, comprises the fruits thus far of the endeavour that has been generated by this ambition.

The practice of the psychological therapies represents an art that is at once best illuminated by constructivist creativity, and yet which remains best practised when informed by an understanding of those boundaries established by positivist research. Perhaps this view of the psychological therapies may be viewed as constituting another “middle way” (Pascual-Leone, 2015, p. 15), after Pascual-Leone’s remark about dialectical constructivism constituting “a middle way between rationalism and empiricism” (Pascual-Leone, 2015, p. 15).

What I am attempting to articulate in this form of words is that, whilst the creativity that inevitably goes into the clinical practice of the psychological therapies inevitably derives from the constructivist position, it should never knowingly or recklessly contradict what we have learned, particularly with respect to human brain functioning, from scientific research that will have been underpinned by the positivist research paradigm. Indeed, I believe that the current rise in the profession of counselling psychology represents no coincidence; rather, it seems to me to represent just such a balanced amalgamation of our learning and knowledge of human functioning acquired through the very best research that is available to us from both the constructivist and the positivist and the post-positivist traditions.

5.2 Discussions

5.2.0 Introduction

The purpose of this paragraph is to consider any issues that have arisen from the analysis of the data exposed by this piece of research and which have not already been discussed in the previous paragraph (5.1, immediately above).
5.2.1 Primacy amongst the three epistemological discourses

The other, possibly more common triumvirate that keeps cropping up when considering the psychological therapies comprises the domains of emotion, affect or feelings; cognition or thought; and behaviour or how we act or behave. One of the most keenly contested stances, depending on whichever theoretical orientation one adopts, is which of these three domains or registers has primacy, or which takes precedence in human functioning.

These days, those who practise the cognitively-derived approaches to the psychological therapies (Beck, 1979; Beck, Rush, Shaw and Emery, 1987; Ellis, 1977) often try to make out a case for cognitions holding primacy, to the extent that it is how we think or what we are thinking that determines our emotions and our behaviour, whereas those who practise approaches such as Process-Experiential Therapy (PET) or Emotion-Focused Therapy (EFT) (Elliott, Watson, Goldman and Greenberg, 2004; Greenberg, 2002; Greenberg and Paivio, 1997; Greenberg, Rice and Elliott, 1993) would take the view that it is our emotion schemes that are responsible for determining how we feel and how we may respond to people and to situations, although Greenberg and Paivio point out, however, that emotion schemes are . . .

Not based solely on emotion, (but that) they involve a complex synthesis of affect, cognition, motivation, and action that provides each person with an integrated sense of him- or herself and the world, as well as with subjective felt meaning.

(Greenberg and Paivio, 1997, p. 3)

It interesting to note, however, that just a couple of pages earlier these authors assert that:

[N]o emotional change takes place without producing cognitive change.

(Greenberg and Paivio, 1997, p. 1)

How interesting that they put it this way round, rather than suggesting that no emotional change ever takes place without cognitive change(s) having taken place first, which is what one might have expected to have read had a CBT therapist written this particular passage.

Greenberg and Paivio write in the following terms about the centrally important role played by our emotions:
Affects and emotion serve as organizing forces in human functioning and play a key role in the development of personal meaning. Emotion in conjunction with the allocation of mental attentional energy guides conscious cognition and makes individuals active determiners of their conduct rather than passive reactors to stimuli.

(Greenberg and Pascual-Leone, 1997, p. 171)

[The reference to “mental attentional energy” (Greenberg and Pascual-Leone, 1997, p. 171) constitutes a reference to Pascual-Leone’s work on the Theory of Constructivist Operators (Greenberg and Pascual-Leone, 1999).]

So, what of the triumvirate that features so prominently in this research study: the epistemological discourses of experiencing, relatedness and hermeneutics? Well, there are, as is often the case when working in the interpretive paradigm, more than one position that one may adopt by way of attempting to address this question. First off, we could note that my initial view of potentiality paradigm therapy was that it utilised our experiencing as its basic currency – or data, to persevere with my research analogy from subparagraph 5.1.3, above – in that it is their experiencing of their lived lives that our clients typically bring into therapy and relate to us as the point of departure on their psychotherapeutic journey. But then we could note the following observation of Kuehlwein’s:

[C]lients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts

(Kuehlwein, 1996, pp. 499-500)

Whilst potentiality paradigm therapists do not generally approach the practice of the psychological therapies from the position of considering what might be wrong or somehow deficient about their clients, it sounds from this last quotation of Kuehlwein’s that it could be to this area of human functioning that the focus needs to be directed in the case of the practice of the psychological therapies with such clients. Furthermore, one could note from my exposition of the data relating to the experiential discourse (at paragraph 4.2, above) and the hermeneutic discourse (at paragraph 4.4, above) that meaning derives from our symbolisation of our experiencing, so a synthesis of these two approaches would seem to suggest that in some respects these two discourses function almost as one, as indeed I illustrated at subparagraph 4.5.3, above. So is this to suggest that it is the hermeneutic discourse that holds the most influence over how we experience our lived lives, then?
One might then ask oneself what the overall objective of the practice of the psychological therapies might be. If we were to begin to address this question by hypothesising that the object of psychological therapy is to repair the disjointed relationship between the client and her- or himself, then the therapeutic relationship would proceed to analyse the client’s experiencing and the meanings that the client attaches to their experiencing, the object then being to change the client’s hermeneutic discourse in order to find meanings that will be more accommodating to the life that the client wishes to live, thereby realigning their relationship with themselves. This would seem to resonate with the writings of practitioners and theorists such as Frank and Frank (1993) and Spence (1982) who have suggested that the goal of the practice of the psychological therapies is to assist people to devise a narrative that enables them to make ‘best sense’ of their experiencing of their lived lives: perhaps one that enables them to frame their account of their lived life in the most positive or helpful terms. As a seasoned practitioner of the psychological therapies, I would suggest that, from the vantage point of my own experience of my clinical work, this goal would seldom be directed out towards other people in the client’s life, but rather towards themselves: that the objective of the practice of the psychological therapies is to assist our clients to develop as positive a relationship with themselves as may prove possible. This would seem now to favour the prominence of the relational discourse.

But what do we mean by the expression ‘the client’s relationship with themselves?’ I would suggest that another way of putting this would be to suggest that somebody’s relationship with themselves really amounts to little more than how they experience themselves. So you see, we have arrived back at the experiential discourse, which is from whence we started this particular little voyage of exploration and discovery.

What does this apparent circularity have to teach us, then? By way of a response to this question, I would suggest that, rather than a hierarchy whereby one discourse is considered to be more important or somehow more fundamental to the psychotherapeutic process than the others, what we have in effect ended up with here is some kind of circular structure where these three epistemological discourses are located around the arch of a wheel, each connected to the hub of the wheel, which of course represents our client, who should quite properly be considered as constituting the centre of our attention and of our best psychotherapeutic endeavours. Whilst the client at the hub of our imaginary wheel may of course communicate directly with each epistemological discourse via the spokes of our wheel, we have already seen at subparagraph 4.5.1 (above) how these three discourses
function optimally when they work together as one reflexive overarching discourse by which our wheel rotates and thereby performs the task that it was devised to accomplish.

Returning to the emotional-cognitive-behavioural triumvirate with which we began this consideration of primacy at the opening of this subparagraph, and although an in-depth study of PET and EFT lies well beyond the remit of the present research study, emotion schemes constitute an enormously important element of EFT, as they provide the context against which new experiencing is evaluated and meaning created. Furthermore, the theory that has been built up around emotion schemes offers a comprehensive account that can be used to rebuff the claims of cognitive and cognitive-behavioural therapists who claim that cognitions have primacy over behaviour and emotion because it is our cognitions that determine our behaviour and our emotional responses. Granted that our cognitions occur alongside our emotions, but PET and EFT offer an excellent account of why one can’t hope to change human experiencing through changing cognitions alone.

But for me, there is an even more important point to be made here, and it is most easily stated as follows: that of all of the three epistemological discourses that have featured so prominently in this piece of research, it is the hermeneutic discourse that is often the most overlooked. If this piece of research has done anything to redress this imbalance, then it will have achieved an important rebalancing of the role and the place of the hermeneutic discourse in the practice of the psychological therapies, and in the training of psychological therapists such as counsellors, psychotherapists and counselling psychologists.

Please note that I am not hereby intending to suggest that this makes the hermeneutic discourse the single most important of our three epistemological discourses, if only because I do not wish to fall into the same trap as the practitioners of the more cognitively derived therapies fell into when they claimed that cognitions had primacy over behaviour and emotions. In my opinion, the experiential, relational and hermeneutic discourses still function optimally when they function together as one overarching discourse, as stated above at subparagraph 4.5.1. I shall nevertheless restate the point here by having recourse to the following pithy observation of Kuehlwein’s:

[C]lients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts.

(Kuehlwein, 1996, pp. 499-500)
What Kuehlwein is suggesting here is that one reason why many of our clients are clients is precisely because of the manner in which they will have at least sometimes been attaching meaning to their experiencing has produced narratives that tend to sabotage rather than to facilitate their living of their lived lives in a meaningful and satisfying manner; or, if you prefer, their hermeneutic discourse disrupts their relationship with themselves by dislocating the manner in which they perceive their experiencing of their lived lives. This is why the following point of Power and Brewin’s is of such central importance to the practice of the psychological therapies:

>[T]herapeutic change, in any form of therapy, requires a transformation of meaning to occur.

(Power and Brewin, 1997b, p. xi)

So strongly do I feel about this that I would go so far as to say that without a meaning-changing mechanism, one doesn’t have a genuinely therapeutic form of the psychological therapies to deliver. Let me be quite clear about precisely what I am asserting here: any form of psychological therapy that cannot provide a plausible account of any genuine meaning-changing mechanism that features as a central component of that psychological therapy fails to satisfy one of the most important criteria for inclusion as a legitimate form of psychological therapy. It is for this reason that I maintain that the hermeneutic discourse is of such central importance both to the practice and to the analysis and understanding of the psychological therapies that it cannot be omitted from the therapist’s account of how the form of psychological therapy that they practise is designed to work. If a plausible account of such a meaning-changing mechanism is omitted from any therapist’s account of how they work, then that therapist is no longer practising psychotherapy. One may be prepared to allow it to be practised if it were to be referred to by another name – such as supporting or befriending, for example – but psychotherapy it most certainly is not!

My reason for expressing this point in such categorical terms is because it has been my experience that, in many of the more humanistic-oriented approaches to the psychological therapies, little is made of what we have been referring to here as the hermeneutic discourse. Much is made of the relationship between client and therapist, but even here, it is this relationship that features most prominently in such accounts of psychological therapy rather than the client’s relationship with themselves. The client’s experiences often feature in many forms of therapy too, but here again, it is their experiences rather
than their experiencing that usually features most prominently. How the client has attached meaning to their present and previous experiencing is often a crucial factor in determining how the client has come to feel, not only about themselves, but also about the other people who populate their lives, and thereby about their lived life more generally as well.

The functioning and the effects of the operation of the hermeneutic discourse should be explained to those clients unfamiliar with its operation, possibly by some form of psycho-educative input if need be. All too often one hears of clients simply explaining away – or failing to explain – how it is that they arrive at the way(s) of responding to the challenges that they face in their lived lives: ‘It’s just me,’ or ‘That’s just how I am,’ or I always respond like that.’ Whereas if clients were taught how this hermeneutic mechanism operates and to what effect(s), then, once they have understood how they are responsible for creating their own meaning, we would be empowering them to change their way(s) of responding to life’s challenges by reviewing how they may have been symbolising their experiencing previously, and by changing this symbolisation process so that they may end up with meanings and understandings that enable them to lead their lives in a manner more conducive to the achievement of their own legitimate psychotherapeutic goals.

So it is for this reason that all legitimate forms of psychological therapy need to stipulate how they are going to assist their clients to examine and, where necessary or desirable, to change not only the meanings that they have attached to their experiencing, but also the manner in which they typically attach meaning to their experiencing, for it will have been this that will probably have had more influence than anything else over how the client has come to feel about themselves and their lived life, and which may well have brought them to seek therapy in the first place.

Finally, I am aware that this insistence on a genuine meaning-changing mechanism in the practice of potentiality paradigm therapy may sound as though this position lies in direct contradistinction to that adopted by Rogers in his seminal 1957 paper, itself entitled “The necessary and sufficient conditions of therapeutic personality change” (Rogers, 1957), and whose title is cited by Mearns and Cooper (2005, p. 35) and quoted above in subparagraph 4.5.1, in which they discuss “Rogers’ ‘necessary and sufficient conditions’ for therapeutic personality development” (Rogers, 1957, cited in Mearns and Cooper, 2005, p. 35).
Perhaps we should revisit Power and Brewin’s (1997, p. xi) remarks on this subject so that we may clarify this important point. Here is what they write in the second paragraph of their preface to this volume (Power and Brewin, 1997).

One of the key factors that has been established as necessary for therapies to be effective is that there should be a good therapeutic relationship between the therapist and the client. We ourselves are strong advocates of this common factor as an essential one before therapy can be effective. However, we believe that the therapeutic relationship, while being a necessary factor in effective therapy, is not a sufficient one. We argue that a good therapeutic relationship provides the context in which effective therapy occurs, but does not provide the mechanisms through which change or transformation happens. In this book we have asked each of the contributors to consider the possibility that one such key mechanism involves meaning. That is, we consider the possibility that therapeutic change, in any form of therapy, requires a transformation of meaning to occur. This change can and should occur at a number of levels for improvement to be maintained, whether in behaviour therapy, cognitive therapy, or psychoanalytic therapy.

(Power and Brewin, 1997, p. xi – all emphases feature in Power and Brewin’s original text)

The findings from the hermeneutic discourse of this piece of research would agree with Power and Brewin’s position on this point: that a good psychotherapeutic relationship, whilst necessary, is by itself insufficient for the effective practice of potentiality paradigm therapy precisely because it identifies no meaning-changing mechanism. Would it be possible somehow to reconcile these two positions? The only path towards such a reconciliation evident to this researcher would be if those adherents to Rogers’ (1975) position were able to demonstrate that the therapeutic relationship itself had the capacity for facilitating the change in meaning to occur in the client, for then the therapeutic relationship would itself become the meaning-changing mechanism that potentiality paradigm therapy requires. If these adherents to Rogers’ position were genuinely to believe such to be the case – as sometimes this researcher suspects that they may – then they would need to argue this point in the research literature, although this particular researcher would still incline to the view that it would be the meaning-changing capacity of the therapeutic relationship that would be responsible for what Rogers refers to as “therapeutic personality development” (Rogers, 1957). It matters less how meaning is changed (so long as such changes are achieved through ethical means) than it does that such changes occur, always providing that they help clients to achieve their (ethical) goals.
So, to summarise my position on this point, Greenberg and Van Balen (1998, p. 42) consider that, according to dialectical constructivism, human beings are “meaning-creating being(s)” (Greenberg and Van Balen, 1998, p. 42), as they state in the following passage:

Integrating and developing experiential theory in line with modern views on emotion, constructive cognition, and the operation of dynamic systems, a dialectical constructivist model of experiential therapy has recently been proposed. In this view a person is seen as a symbolizing, meaning-creating being who acts as a dynamic system constantly synthesizing information from many levels of processing and from both internal and external sources into a conscious experience. (Greenberg and Van Balen, 1998, p. 42)

Whilst I believe that therapy without any genuine meaning-changing mechanism does not constitute potentiality paradigm therapy, as argued above at subparagraph 4.4.14, I want to stop short of declaring that the hermeneutic discourse is the single most important of these three discourses. This recalcitrance is due to the fact that, as we generate meaning through symbolising our experiencing, it must follow that there can be no meaning without first having the experiencing to symbolise, and on to which subsequently to attach it. This view accords with my observation recorded earlier (at subparagraph 4.5.1) that the three central discourses of potentiality paradigm therapy – the experiential, the relational and the hermeneutic – work most effectively when they work together to articulate in consort the potentiality paradigm.

On the other hand, however, it is my belief that, rather than the Rational-Emotive Behaviour Therapy (REBT) position – that it is our thinking that determines our emoting and our behaviour, and that therefore has primacy – it is the various meanings that we attach to our experiencing – which of course comprise our cognitions, our emoting and our behaviour – that are most responsible for determining our thinking, our emoting and our behaviour – all of which of course combine to constitute three elements of what is referred to in this piece of research as the experiential discourse. This notion whereby it is the meanings that we attach to our experiencing that are most likely to shape our behaviour and other responses was first popularised by Blumer (1992), who gives the following exposition of the three basic principles that underpinned what he called symbolic interactionism:
Symbolic interactionism rests in the last analysis on three simple premises. The first premise is that human beings act toward things on the basis of the meanings that the things have for them. The second premise is that the meaning of such things is derived from, or arises out of, the social interaction that one has with one’s fellows. The third premise is that these meanings are handled in, and modified through, an interpretive process used by the person in dealing with the things he encounters.

(Blumer, 1992, p. 2)

The understanding of meaning has therefore long been a critical element of psychology's understanding of how human beings function, and is also a crucial element in our understanding of potentiality paradigm therapy. An adequate exploration and understanding of the hermeneutic discourse and how it operates, therefore, constitutes a sine qua non of an adequate training to practise potentiality paradigm therapy.

As if to illustrate how far meaning goes towards illuminating our understanding, I shall close this subparagraph by illustrating how Donmoyer (1990, p. 179) suggests that meaning influences our appreciation of the different research paradigms because meaning is a crucial determinant of paradigms themselves. Indeed, Donmoyer (1990, p. 179) almost goes so far as to suggest that paradigms equate to meaning in the following passage.

The problem posed by paradigms can be demonstrated by considering a term such as learning. Few people would disagree with the proposition that schools should promote learning, but the term learning will mean different things to a kindergarten teacher influenced by Piaget, a process-product researcher, an art teacher who wants to promote productive idiosyncracy, and a parent who wants the schools to go back to basics. Each of these meanings reflects a different conception of what learning is and what teaching ought to be. Each can be said to reflect a different paradigm of reality.

Before a researcher can determine whether Program A produces more learning than Program B, the researcher must choose one of the paradigms – that is, one of the meanings – alluded to above or one of the multitude of other meanings that could be associated with the term learning. The meaning selected will influence the researcher’s findings at least as much as the empirical reality being described.

(Donmoyer, 1990, p. 179)
5.2.2 How can we tell if we have got the potentiality paradigm correctly configured?

5.2.2.0 Introduction

I want to make three observations about the manner in which the potentiality paradigm has been configured in terms of constituting a dialogue between its three central discourses: those of experience, of relatedness and of hermeneutics.

5.2.2.1 The all-or-nothing approach to its optimal functioning

The very fact that (as noted in subparagraph 4.5.1, above) these three discourses work most effectively when they work as one overarching discourse rather than as three discrete sub-discourses suggests to me that this configuration of the potentiality paradigm represents something distinct and meaningful in the practice of the psychological therapies. It is as though some psychotherapeutic force that is especially potent is released when all of these three discourses are firing simultaneously, much as Rogers claimed for his six “necessary and sufficient conditions for therapeutic personality change” (Rogers, 1957, pp. 95-103), cited by Mearns and Cooper (2005, pp. 35-37), and herein at subparagraph 4.5.1, above.

5.2.2.2 These three central discourses of potentiality paradigm therapy surely also represent the three central discourses of human growth and potential

My contention is that these three central discourses – of experiencing, of relatedness and of hermeneutics – are so well suited as ways of working psychotherapeutically with human beings because it is these same three discourses – of experiencing, of relatedness and of hermeneutics – that are also essential characteristics of human functioning more generally. The whole gamut of the experiential therapies is based upon the fact that human beings are sentient, experiencing organisms (Greenberg, Watson and Lietaer, 1998), and Giorgi (1992) maintains that hermeneutics is indispensable because human beings are by nature self-interpreting beings (Giorgi, 1992). The notion that human beings are equally essentially relational beings has for a long time been something of a truism for which no supporting evidence is required, although if one were to insist on such, I suppose that one
could cite the entire relational psychotherapeutic canon. However, our relational traits are by no means confined to the psychotherapeutic endeavour: the social sciences more widely also recognise us as a social and hence a relational species. Therefore, if one had been commissioned to design a psychotherapeutic paradigm that was especially fit for the task of working psychotherapeutically with human beings, then surely this would have been just the sort of paradigm that one would have designed in response to such a commission, because the potentiality paradigm represents the truly human paradigm.

5.2.2.3 Doesn’t the experiential discourse embrace emotion, feeling and behaviour?

At the outset of this research study – at the beginning of paragraph 1.4 above, to be precise – I said that for the purposes of this piece of research I wanted to regard emotions, cognitions and behaviour as those psychological elements that were changed rather than necessarily constituting those elements in which the agency of change was to be invested. I indicated my preference for regarding the three epistemological discourses of experiencing, relatedness and hermeneutics as constituting potentiality paradigm’s essential change mechanism. “But aren’t our emotional, cognitive and behavioural functioning subsumed under our experiential discourse in any case?” I hear you cry. Well, yes, indeed they are. So why have I indicated such a strong preference for referring to these sub-discourses by the more generic and inclusive term: the experiential discourse?

My good answer to this good question is because referring to this as our experiential discourse enables it to embrace much more than merely our emotional, cognitive and behavioural functioning; under the term experiential discourse, I am also including so many more psychological phenomena that I haven’t had the time or the space to include in this brief research study, such as our perceptions and more spiritually based phenomena such as out of body experiences, et alia. In fact, the experiential discourse may be taken to include any kind of phenomena that human beings are capable of experiencing. Regarding the experiential discourse as embracing such a wider brief than merely emotions, cognitions and behaviour enables potentiality paradigm therapy to extend its remit to include other forms of therapy such as those that would often be regarded as transpersonal in nature. This more inclusive remit for potentiality paradigm therapy should enable it to be of use to an even wider range of clientele whilst still relying upon the same forms of epistemology as those that are being investigated herein.
5.2.3 Functional and structural forms of governance and of regulation

I first gave an exposition of the structural and functional models of governance or regulation at paragraph 1.4 (above), and went on to give a more authoritative account of them at paragraph 2.4 (above). I want now to locate these models in my overarching paradigmatic configuration of the potentiality paradigm therapy, whose formal exposition I began at paragraph 5.1, above.

To recap briefly what I wrote above in subparagraph 2.4, a model of governance or regulation is considered functional when it merely states those aspects of practice that need to be addressed, such as ensuring that trainees are well-supported whilst trying out new ways of working as they participate in their programme of professional training. However, should this model extend to prescribing the means or the mechanisms by which support is to be extended to trainees whilst participating in their programme of professional training – such as by stating that all potential clients should first be assessed by a member of the staff of the training programme before they are assigned to trainees for therapy – this model would then be termed structural, as it would now be specifying not just those areas of concern that need addressing, but also the structure(s) or mechanism(s) by which they were to achieve this objective of governance or of regulation (Mearns and Thorne, 2000, p. 36).

Given the manner in which psychological theory is used to help practitioners of the psychological therapies to make sense of their clients’ sometimes disordered or chaotic presenting material – or, as it is sometimes put across a wide range of diverse disciplines, to create some sense of order out of chaos (Davenport, 2001; Gibson, 2006; Holland, 2000; Houri, 2012; Jarvis, 2007; McPherson, 1991; Prigogine and Stengers, 1989; Samuels, 2013; Twaddle and Hansen, 1995) – it is my contention that these theories constitute a structural articulation of the hermeneutic discourse, and that my paradigmatic configuration of potentiality paradigm therapy into an engagement with the three discourses of experiencing, relating and meaning constitutes a more functional model of hermeneutic governance or regulation, which some might call a meta-model, as after Egan’s Skilled Helper (Egan, 2013), for example, or after Wampold’s contextual model (Wampold, 2001).
5.2.4 The location of expertise and authority in the psychotherapeutic relationship

As already documented above at subparagraph 4.2.7, pathology paradigm therapy is characterised by its reliance upon superior knowledge and skills. It is a fairly straightforward matter to appreciate from whence the locus of authority derives: it is from the practitioner whose superior knowledge and skills are required to be taught by practitioners to their clients. Under this paradigm, authority rests with the superior expertise of the practitioner. This articulates concordantly with the view already expressed above at subparagraph 4.2.7: that it is this sense of expertise that confirms pathology paradigm therapy as comprising what is essentially a training model or form of therapy.

But where does the sense of authority reside in those forms of the psychological therapies whose practice may be subsumed under the aegis of the potentiality paradigm? In approaches to the psychological therapies such as the person-centred approach (PCA), whilst the practitioner is generally regarded as an expert in the facilitation of psychotherapeutic relationships, it is the client who is regarded as constituting the expert on themselves and their requirements. It is so as not to contradict or dilute this residence of authority in the client that PCA practitioners avoid evincing any form of authority in their psychotherapeutic relationships with their clients, preferring instead to model a sense of deference towards their clients’ judgements and preferences whenever practicable.

Catterall (2007, p. 65) poignantly illustrates the issue that is at stake here, as already cited above at subparagraph 4.3.14, when she writes about a piece of work that she was once doing with a mother. The therapist found it difficult to remain empathically accepting of this client at times when the client spoke in ways that suggested negativity or a certain harshness of attitude towards her children’s behaviour, as this created an impression in the therapist that the mother had little empathy for her children at such times.

The greatest challenge for me when I explore the theme of parenting with clients is when their parenting styles and beliefs differ greatly from mine. At times Josie would talk very harshly and negatively about her children’s behaviour and describe responses that showed little empathy for them. At such times I know I found it difficult to experience her unconditionally, withdrawing from her frame of reference into imagining what that experience might be like for her children. When I retreated like this, back into my own frame (and my empathy and acceptance for her were lost), I was aware of wanting to become directive by trying to get Josie to imagine the experience from the children’s point of view. Whilst this may have been helpful at times, it might also have been unhelpful and counter-therapeutic if I had taken it to another level where an exploratory challenge becomes authoritative advice-giving and where a perceived loss of empathy from me could have left Josie
feeling negatively judged as a mother. The fact that this work is set within a multidisciplinary setting is enormously helpful in dealing with such conflicting issues because I knew that Josie had requested, and was receiving, help with her skills in managing the children’s challenging behaviour so I did not need to dwell on this important, but separate, issue of parenting skills. Whilst Josie had a somewhat harsh, no-nonsense attitude towards managing the children, she also had a wonderfully soft and imaginatively playful side which the children also benefited from, so if our work together had got bogged down in how she could ‘improve’ her parenting skills, it may have overshadowed a celebration of what she was doing so well already.

(Catterall, 2007, p. 65)

What had seemed to have rescued this therapist from the dilemma that might otherwise have arisen from the conflict of interest created between attending to the client on the one hand and attending to her parenting of her children on the other was the fact that this client had been receiving help in examining her parenting styles with her children from another practitioner in what was evidently a multidisciplinary setting. The advantage thus afforded by this multidisciplinary approach to working with people was that this freed up the therapist to focus exclusively on accepting and valuing the client without having to focus on the client’s parenting style, thereby avoiding any potential for a conflict of interest to have arisen between these two equally important issues.

From a theoretical perspective, the point at issue here is that, had the therapist in this piece of work weighed in with advice to the mother about how better to manage her responses to her children, she would have been adopting the role of an expert, in this case on child-rearing practices. Such expertise, however, is difficult to reconcile with an approach to working with people that claims to renounce any appeal to expertise, and hence to any ensuing sense of authority or status that this might imply. Furthermore, from the more practical perspective of the relational discourse, a therapist who claims to be in a position to tell a client how best to rear their children could easily be mistaken for a therapist who appears critical of their client and their child-rearing practices, which would risk cutting across all the work that would presumably have already been done in establishing an accepting relationship wherein the client would feel safe enough to examine her past and present behaviour – along with the attitudes that might have underpinned it – and to experiment with alternative ways of responding to similar situations in the future.

As something of a coda to this subparagraph, I must say how refreshing I found Catterall’s humility as exemplified in the final sentence of the afore-going account of her work. This
has also caused me to reflect upon the distribution of qualities across the models about *description, interpretation, understanding* and *explanation*. What has occurred to me in particular is the way in which our own experience is something of a precursor to our capacity for *description* and *understanding*, whereas *interpretation* and *explanation* seem dependent on our cognitive capacity for reflection and analysis. Certainly, one would expect to find *interpretation* and *explanation* to be the currency of the sort of prescriptive expertise that is traditionally dispensed through practice that is rooted in the pathology paradigm, whereas a more permissive focus on *description* and *understanding* is what we might have cause to expect from the practice of the potentiality paradigm therapies.

### 5.2.5 Maybe it’s not so much the *what* as the *how* that may be more significant

Nearing the end of this account of this piece of research, I am minded to ask myself what changes this work has brought about in my own view of the rather simplistic division between the potentiality and the pathology paradigms with respect to the practice of the psychological therapies. If we were to return to basics for a moment and remind ourselves that the pathology paradigm takes the viewpoint that its discourse is about recognising and healing pathology whereas its counterpart, the potentiality paradigm, is about the facilitation of growth, does this still seem to constitute such a meaningful distinction?

I ask myself this question because of my thinking about our clients’ achievements utilising these different approaches. For example, is there really such a difference *in outcome* between these paradigmatically different approaches? If, by way of illustration, we were to assist clients to facilitate further growth, would we not expect this also to help them to address issues of pathology by neutralising some of its worst effects? And similarly, if we were to assist clients to address issues of pathology, would we be so very surprised to learn that being freed from the constraints of pathology were in itself to help clients to maximise their potential for further growth? Frank and Frank express this last point like this:

> Because they focus on the conquest of specific symptoms, cognitive and behaviour therapies may be more effective than evocative ones in heightening the sense of mastery and in generally increasing self-confidence. They teach patients to confront situations and inner feelings they have previously avoided, thereby opening up renewed opportunities for learning and growth.

(Frank and Frank, 1991, p. 240; also quoted in Cunningham, Ollendick and Jensen, 2012, p. 238)
Joseph and Worsley also seem inclined to go along with me on this point, at least for part of the way, although it should be borne in mind that they are writing here of human distress as opposed to outright psychopathology.

From the perspective of person-centred personality theory, there is no absolute distinction between the facilitation of human growth and the relief of distress, for both involve the person becoming more fully and congruently engaged with the process associated with organismic evaluation.

(Joseph and Worsley, 2007, p. 218)

And, as if to reflect the current vogue for mixed methods research, Julia B Frank (2012) weighs into this discussion with a comment that could be taken to reflect the discourse articulated by what Egon Guba (1990) called The Paradigm Dialog, which in this instance amounts to a dialogue between the approaches offered by positivism’s psychotropic medication and constructivism’s psychotherapy.

[M]edication and psychotherapy may have similar effects: medications may change meaning by directly modifying the neural networks that create it, while rhetorical methods such as psychotherapy provide experiences that gradually modify these networks, either by reducing their spontaneous and dynamic neurotransmitter activity or by modifying the anatomical connections between cells, creating new ones or routing transmission away from connections established by prior experience. An effective psychotropic drug changes thought, just as an effective psychotherapy modifies neurological activity.

(Frank, 2012, pp. 77-78)

One thing, however, seems palpably real to me: that these two paradigmatically different approaches to the practice of the psychological therapies result in processes that its participants find strikingly different. Remembering that I will seldom conduct therapy with most clients for more than one series of sessions, speaking from my experience as a practitioner of both approaches, I am in a position to assert this because of the work that I have done with clients who had experienced a different approach to the practice of the psychological therapies before they had begun working with me, and they have told me how differently they have experienced these two radically different approaches.

And so the conclusion with which I am left is that the difference in clients’ experiencing of these two approaches to the practice of the psychological therapies is likely to be due in no small measure to the different ways in which these approaches are configured, and hence
delivered: in other words, not so much the *what*, but the *how*. When people ask me which
I consider to be the better of the two approaches, I invariably reply that it is in my opinion
a question of fit: if one has something ‘wrong’ with them or is unwell in any sense, I
consider it a jolly good idea to consult a medic, who is usually considered to be a
practitioner of the pathology paradigm, whereas if pathology is largely absent and further
growth is what is required, then some form of psychological therapy that is subsumed
under the aegis of the potentiality paradigm would seem more appropriate. So it would
seem to be more about being fit for purpose to my way of thinking – always providing, that
is, that we can be clear about our client’s purpose(s) before we set about accompanying
them upon their psychotherapeutic journey.
Chapter Six: Conclusions

6.0 Overview

In this final chapter, I want first to summarise some of the more significant findings and conclusions to have been obtained from my analysis of the findings of this piece of research before going on to consider the limitations of this research study followed by the implications that it may promise, first, for the practice of potentiality paradigm therapy, and second, for further research.

6.1 Recapitulation of the significant findings and of the conclusions

Following several years of reading epistemologically rich theoretical accounts of potentiality paradigm therapy, during the course of which I concluded that the dominant ontology of the psychological therapies was a constructivist one, I then proceeded to extract the most epistemologically rich passages of these theoretical writings and to code them in such a manner as to be able to identify the main epistemological discourses that were involved in the processes of change in the practice of potentiality paradigm therapy. I identified these central discourses as an experiential discourse, a relational discourse and a hermeneutic discourse. Whilst in one sense this form of psychological therapy may be described as constituting an engagement with an experiential discourse that is delivered through an engagement with a (usually speech-based) relational discourse, and which is best understood when analysed from the perspective of a hermeneutic discourse, this analysis is more descriptive of the discrete functions performed by each discourse rather than illuminating how they actually articulate one with another, and that, as it turns out, is everything.
Most theoretical writers maintain that these three discourses work best when they work as one overarching discourse as opposed to three discrete sub-discourses. The *experiential* and *hermeneutic discourses* work in particularly close conjunction with one another (as noted above in subparagraph 4.5.3), as once one has registered some form of experiencing some phenomenon, one’s brain immediately and automatically seems to seek some form of symbolisation of it to serve both as an *aide memoire* and as a short-cut to referring back to the phenomenon at some point in the future. This form of symbolisation, and especially the various meanings that become attached to this initial piece of experiencing through our symbolisation thereof, then come to be reinvested as an element of that initial experiencing itself, meaning that our experiencing and the meanings that we attach thereto constitute what the family therapist Salvador Minuchin (Minuchin, 1977; Minuchin and Fishman, 1981) would call a “dance” whereby each of these two discourses dance and weave their way in and out of each other’s territory so as to represent an integrated landscape of these aspects of our lived lives. In this sense we come to experience our meanings, too.

If the subject-cum-object of the client’s experiencing in their therapy is their relationship with their therapist, then we have the third member of this triadic “dance,” the *relational discourse*, ready to play its part in the development of these psychotherapeutic processes, although in many ways a more meaningful way in which to refer to the relational discourse would be in terms of the client’s relationship with her- or himself, as it is usually to this end that much of the psychotherapeutic endeavour is directed. Given that that to which we are referring by the expression *the client’s relationship with her- or himself* is actually the way(s) in which s/he experiences her- or himself, then our epistemologically discursive circle is now complete as we arrive back at the experiencing with which we began this epistemological episode.

We may also claim that it is our past experiences, together with the meanings that we engender by symbolising them, that determine who we are; that who we are determines our sense of identity; and that our sense of identity is intimately bound up with our relationship with ourselves. In other words, we are our past experiencing. This is yet another way of tying in our relational discourse with our experiential and our hermeneutic discourses. By way of an illustration, suppose that we had tried certain sporting activities and determined that we were unlikely to be able to develop any sporting proficiency. This lack of sporting prowess could be absorbed into our sense of identity, at which point we no longer simply describe ourselves in terms of attributes – lacking sporting prowess – but in terms of our
identity – as not *being* sporty. Whilst it would be our use of the verb to be that constitutes the outward indication that our lack of sporting prowess had entered into our sense of self, it would nevertheless be the meanings fashioned out of our symbolisation of our past experiences that would be responsible for the creation of this aspect of our identity.

It can hardly be regarded as mere coincidence that these three discourses – the *experiential*, the *relational* and the *hermeneutic* – also constitute three of the core psychological elements of what it means to be a human being. Indeed, these are three of the core functions that human beings are performing for virtually each and every minute of our waking lives as a way of making sense of our experiencing of our lived lives. This paradigm, then – the potentiality paradigm – constitutes an essentially human paradigm that consists of an amalgam of the three discourses that have been obtained by my analysis of the data of the this research study – the *experiential*, the *relational* and the *hermeneutic* – presided over by a constructivist ontology. But how does the human brain manage to get these three discourses to articulate with one another in such a manner as to articulate the one overarching discourse? Well, by integrating and synthesising their material, as documented above at subparagraph 4.6.1. And the epistemological mechanism that reflects the manner in which our brains integrate and synthesise this material is dialectical constructivism, as outlined above at subparagraph 4.6.2.

The methodological laboratory of the psychological therapies is to be regarded as being contained within the psychotherapeutic relationship, for it is within this relationship that the psychotherapeutic duo (or couple or family or group) works out its best therapeutic strategies for the effective practice of potentiality paradigm therapy. This is all set out in the interpretive synthesis with which chapter five opens at paragraph 5.1 (above), and this synthesis concludes at subparagraph 5.1.4 (above) with what one might term a ‘worked example’ illustrating how a typical passage of potentiality paradigm therapy can be analysed into the three constituent psychotherapeutic discourses.

Only by having examined all of this material, which of course comprises the data *corpus* of this piece of research, from such an abstract perspective could I have envisaged the creative interpretive synthesis with which I opened the previous (fifth) chapter, above. Indeed, it seems to me likely that it will have been the abstract nature of this piece of research that probably accounts for why this topic has been so profoundly neglected by researchers in the past, just as it has been the need for epistemologically rich data that
accounts for why this research study has taken the form of a qualitative meta-synthesis of those theoretical writings made available by the professional and the academic literature.

6.2 Limitations of the claims to be made for this research study

6.2.0 Introduction

I have divided this paragraph into two broad sections: the first dealing with other sets of discourses that this present research study has not had the space to consider as much as I should have liked, and the second, dealing with more methodological issues. Let’s begin with a consideration of other discourses that may be worthy of investigation.

6.2.1 Other discourses and models that may prove worthy of investigation

I propose to use two quotations to offer examples of other kinds of discourses that a broader ranging investigation may wish to consider. The first is from Greenberg and Van Balen (1998, pp. 42-43) writing about the experiential therapies.

Integrating and developing experiential theory in line with modern views on emotion, constructive cognition, and the operation of dynamic systems, a dialectical constructivist model of experiential therapy has recently been proposed. In this view a person is seen as a symbolizing, meaning-creating being who acts as a dynamic system constantly synthesizing information from many levels of processing and from both internal and external sources into a conscious experience. Three major levels of processing – innate sensory motor, emotional schematic memory, and conceptual level processing – are identified. In addition people are seen as organizing experience into emotion-based schemes that then play a central role in functioning and the creation of meaning.

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4The term “scheme” is used rather than “schema” following Pascual-Leone (1987) and Piaget (1969) to emphasize the scheme as action-oriented experience producing structure rather than cognitive representational experience.

(Greenberg and Van Balen, 1998, pp. 42-43)
Writing here about dialectical constructivism’s view of the human brain’s capacity for processing data from many different sources simultaneously, Greenberg and Van Balen cite “[t]hree major levels of processing – innate sensory motor, emotional schematic memory, and conceptual level processing” (Greenberg and Van Balen, 1998, p. 42) as examples of processing mechanisms that may be worthy of investigation in a broader based investigation into the working of the epistemological discourses that contribute to potentiality paradigm therapy.

Greenberg and Van Balen also cite “emotion-based schemes that . . . play a central role in functioning and (in) the creation of meaning” (Greenberg and Van Balen, 1998, p. 43). Emotion schemes feature most prominently in PET and EFT and I know that practitioners of these approaches to the psychological therapies would certainly wish to nominate emotion schemes as a further illustration of other discourses worthy of inclusion in a fuller, more detailed account of potentiality paradigm therapy.

Moving on now to a brief quotation from Greenberg and Pascual-Leone, we can see that they too have other discursive candidates for inclusion in a more comprehensive survey of the epistemological discourses that are at work in potentiality paradigm therapy.

Consciousness . . . is . . . the arena for a final synthesis of different sources of sensory, kinaesthetic, emotional, conative, and conceptual information about the self and the world.

(Greenberg and Pascual-Leone, 2001, p. 166)

It is probably fair to suggest that these five discourses – the “sensory, kinaesthetic, emotional, conative, and conceptual” (Greenberg and Pascual-Leone, 2001, p. 166) would probably be more likely to be nominated for inclusion by a psychologist rather than by a therapist, unless of course our putative therapist happened also to be a psychologist, such as a counselling psychologist. (I have made a point of confining the discourses in this research study to those most likely to be nominated by a counsellor or a psychotherapist.)

One further point is worth making here, and it is this: that if one were to examine our topic from a sufficiently wide number of different perspectives, there would in all probability be so many different discourses that one could nominate that no reasonably sized study would be likely to have sufficient resources to accommodate them all. Furthermore, there need in any case be no limit to the number of discourses that one could come up with because
virtually anything could be considered to comprise a discourse *qua* interpretive repertoires after Potter and Wetherell (1987, pp. 146-157) and Wetherell and Potter (1988).

Finally, the understanding and explanatory pair of models along with the descriptive and interpretive pair of models (Giorgi, 1992) would also make excellent categories for further analysis, especially in terms of into which of the two paradigms – the potentiality paradigm or the pathology paradigm – their distribution would seem to be indicated naturally to fall.

In effect, what I am suggesting in this subparagraph (6.2.1) is that just as these could have been included as topics that commend themselves for further investigation, so too am I including them here by virtue of the fact that their exclusion from investigation in this very limited research study represents some of the limitations of the present piece of research.

### 6.2.2 Methodological considerations

Whether one is disappointed at the outcome of a particular process depends partly, I suppose, on the expectations that one had entertained at its inception. However, whether or not disappointed, limitations there certainly must be to any piece of research, and this one is no exception.

Rather than a systematic literature search, I have conducted an ideographically-based trawl of the literature based on my own view as to what is representative of each school of therapy. I am justifying this on the basis that an exhaustive representation of the literature is not what is required of a qualitative meta-synthesis: rather, as Doyle (2003, p. 325-326) documents, “the sample is purposive rather than exhaustive” (Doyle, 2003, pp. 325-326).

Like meta-analysis, meta-ethnography utilizes multiple empirical studies but, unlike meta-analysis, the sample is purposive rather than exhaustive because the purpose is interpretive explanation and not prediction.

(Doyle, 2003, pp. 325-326)

The purpose of the quotations that I have used in this qualitative meta-synthesis is, therefore, illustrative of the generally agreed understandings of the various theoreticians’ work, just as my interpretive synthesis is illustrative of another way of conceptualising potentiality paradigm therapy.
Research that strives to describe and to understand holds an especially important place in research into what is essentially a practice-based discipline such as the psychological therapies. By way of illustration, the client’s description of their experiencing of their lived life to their therapist along with the therapist’s attempts at understanding the role played by the client’s sense(s) of meaning are fundamental to the success of the psychotherapeutic endeavour.

Constructivist research eschews the cause and effect equation that has been popularised so successfully by the positivist research paradigm, preferring instead to concern itself with more descriptive methods. Whilst any claims at proof would be quite inappropriate arising directly out of constructivist research, we must instead content ourselves with contributing towards the construction of an image or a picture of a certain discipline or a sub-unit thereof, albeit necessarily constituting something of a snapshot taken at a particular moment in that discipline’s development.

But, to move from the research paradigm to the research design, perhaps the most predictable form of critique of research such as this would be to question the value of what might be accomplished by a qualitative meta-synthesis such as this one. Does not this piece of research simply consist of some tired old guy’s view of a certain body of work which we will call potentiality paradigm therapy? Well, yes, indeed it does; but indeed it also comprises so much more as well.

The reliance, at least in part, on the heuristic research method (outlined at subparagraph 3.5.3, above) comprises the best endeavours of this seasoned practitioner and scholar’s experience in the profession; someone who has collected together and reviewed some of the most pertinent, thickly descriptive and epistemologically rich theoretical writings that he has been able to identify, and which outline and in some cases detail the epistemology of potentiality paradigm therapy. Then, this scholastic practitioner has integrated and synthesised the results of his literature trawl in an effort to condense and present a synthesis that is at once sufficiently creative and yet also sufficiently interpretive of the many textual accounts to do justice to his chosen research focus, and has presented same within the research design of a qualitative meta-synthesis.

It is in point of fact largely with this integrative and synthesising process that the criticism of limitation may perhaps be most pertinently levelled: that the integration and synthesis of
this data corpus has been left in the hands of one person alone, and yet such is the fate of doctoral research in which the individual researcher has to be assessed for their eligibility to have the degree of Doctor of Philosophy (PhD) conferred upon them. Research by committee may or may not have achieved more of a consensus, but when the personal creativity and interpretive capacity of the researcher-practitioner are being called for, as in a qualitative meta-synthesis, then research by committee may prove a difficult circle to square when consensus is required! (And in any case, as psychotherapeutic practise has, apart from the presence of one or more clients, also routinely to be undertaken alone in most settings, we may as well learn to live with this constraint.) But then, thickly descriptive and epistemologically rich research data did not end with Geertz (1993a, 1993b), just as it did not end with Ryle – from whom Geertz (1993a, p. 6) borrowed the term – before him.

The validity, meaningfulness, and insights generated from qualitative inquiry have more to do with the information-richness of the cases selected and the observational/analytical capabilities of the researcher than with sample size.

(Patton, 1990, p. 185 – emphases feature in Patton’s original text; also cited in Morrow, 2005, p. 255)

This need for epistemologically rich data that is thickly descriptive of some fairly abstract concepts scuppered my early attempts at literature searches, and some there may be who would point to this as representing a methodological weakness. Luckily, my experience as a practitioner and as a student of the psychological therapies meant that I could legitimately call upon a heuristic sense that guided me as to where to search for the literature from which I could extract the epistemologically rich data that I needed.

One may be tempted to ask whether the human brain’s tendency for integrating and synthesising one’s life’s material makes something of a nonsense of an analysis that breaks this material down into its constituent components. However, it is often necessary to break something down into its constituent components before we can understand fully how some mechanisms are designed to function, and doing precisely that in this piece of research has aided my appreciation of the need for the epistemological mechanism of dialectical constructivism, for now it is so much easier to see what it is that is actually being integrated and synthesised by the epistemological mechanism known as dialectical constructivism.
Given that this piece of research has ended up citing dialectical constructivism – which is the epistemological mechanism whereby our brains synthesise our experiencing along with the meanings that we attach to our experiencing through symbolisation – as the epistemology of potentiality paradigm therapy, it is perhaps appropriate that this theme of synthesis is also reflected in the overarching research design that I have elected to pursue throughout this research study – a form of parallel process perhaps, or of congruence if you prefer.

One could certainly point to the subjective nature of a qualitative meta-synthesis that culminates in an interpretive synthesis as a methodological weakness, for the interpretation is mine, and mine alone. Would not a different individual be likely to have arrived at a different interpretive synthesis to the one that I exposed above at paragraph 5.1? Yes, this much must surely be acknowledged as representing a perfectly plausible possibility. However, it would be equally possible that such an interpretive synthesis would have been based on different data sets drawn from an altogether different data corpus. Ultimately, differences could be expected both in the data used and in the analysis of this data, culminating in a different interpretive synthesis.

In positivist research, this would be indicative of a weakness in one’s research design. At the end of the day, however, the objective of a qualitative meta-synthesis such as this one is to produce a novel way of conceptualising the research topic under investigation, which this particular method refers to as an interpretive synthesis, and which Moustakas’ (1990) heuristic research cycle (outlined above at subparagraph 3.5.3) terms a creative synthesis. If one is looking for a piece of research that offers a different view of the epistemology of potentiality paradigm therapy, then this research study offers such an alternative view precisely because the researcher who carried out this piece of research elected as his research design one that is designed to produce such a novel view: a qualitative meta-synthesis. The price that one’s critics might suggest that this study pays is that it is all down to one researcher – this particular researcher – who has chosen not only the data corpus and then has refined this data corpus into various data sets, but who has also chosen all the quotations from the literature that appear in this research study, and who has placed them within this piece of research, thereby framing the context in which they are to be read. Finally, he has also analysed all of its data and written the entire research study up all by himself.
All of this amounts to a large measure of influence by anybody’s standards, and it raises a legitimate question about authority. Many potentiality paradigm therapists would espouse the view that they would wish to leave the authority in any piece of clinical work that they undertook with a client with that client; and yet, in this research study, I seem to have taken it all for myself. The views and opinions expressed in the literature have ended up in this piece of research precisely because I have deemed that they should feature in it. As if by way of a counterbalance to this degree of latitude, one of the thoughts behind restricting myself to drawing only from published books and papers that emanate from well-respected sources was designed partly to balance out the large degree of influence that this research design has afforded me. The thinking behind this was that if I was assuming a role that accorded me such a large measure of influence in terms of my research design, then I should at least make an attempt to allow some authority to come through from sources whose opinions about the understanding and practice of potentiality paradigm therapy are well-respected. It is to be hoped that having chosen such well-respected sources from which to quote will at least allow some authority in this piece of research to be found residing outside of myself.

Finally, one could suggest that any findings from such an abstract research study would be hard to apply to the nitty-gritty of the practice of potentiality paradigm therapy. I have said elsewhere (Gilmore, 2008) that how we look at therapy is in danger of becoming almost all that we may ever know about it, and this research study certainly does claim to be taking an abstract view of the theoretic constructs investigated herein. But one may also claim that if one can demonstrate one’s thinking by reference to abstract constructs, then this could be said to represent the most ‘pure’ form of understanding that is open to expression.

### 6.3 Implications for practice, including for training and supervision

Most therapists of whatever persuasion cannot but be aware of the pre-eminent place held in our overview of the psychological therapies by the behavioural, the cognitive and the emotional discourses. (This much is now surely common knowledge.) But although it is the changes in our clients’ *expression* of these discourses that are often achieved and
celebrated as *outcomes* by those who participate in the psychological therapies, whether as clients or as practitioners, do they represent the actual *process* of the psychological therapies? Is it with these three discourses – the behavioural, the cognitive and the affective – that the psychotherapeutic dyad, trio, family or group should most productively be focusing what Pascual-Leone and Piaget before him would doubtless refer to as the best of their “mental attentional energies” (Pascual-Leone, 2015)?

I think not, and this has constituted one of the main foci of this piece of research. What is it that is actually being worked with in the practice of potentiality paradigm therapy? One of the most significant findings of this research study is that there is ample evidence in the professional and academic literature to suggest that it is actually a different trio of discourses that lie at the heart of the change process or the change mechanism in the successful practice of potentiality paradigm therapy: the experiential, the relational and the hermeneutic discourses. Whilst it may well be our emotions, cognitions and behaviour that will change through our engagement with potentiality paradigm therapy – along with our corresponding brain functioning as well, of course – it is nevertheless through work using our experiential, relational and hermeneutic discourses that we will actually bring about such change. Our view of potentiality paradigm therapy needs to accommodate the view that it is with this latter trio of discourses that its clients and therapists are engaging, and that it is across these three discourses that the epistemological mechanism of dialectical constructivism is working to integrate and to synthesize its data. Furthermore, one advantage of the heightened sense of accommodation afforded by the sort of meta-model proposed by this research study would be to enable us to work more fluently across theoretical boundaries, which many would suggest would constitute an appropriate accommodation of the recent trends towards more dialogical ways of working, as documented above at subparagraph 4.3.17.

Whilst many potentiality paradigm therapies cite the relational discourse as uppermost in our practice considerations, and whilst many also include the experiential discourse too – most notably, of course, the experiential therapies – the one discourse that I have noted is sometimes omitted from such consideration is the one that I refer to herein as the hermeneutic discourse. Gendlin has this to say about the centrality of meaning and of the role played by the hermeneutic discourse more widely in potentiality paradigm therapy:
At first it may seem that experiencing is simply the inward sense of our body, its tension, or its well-being. Yet, upon further reflection, we can notice that only in this direct sensing do we have the meanings of what we say and think. For, without the “feel” of the meaning, verbal symbols are only noises (or sound images of noises).

(Gendlin, 1964, p. 112; 1970b, p. 139)

What Gendlin is in effect saying here is that without meaning, there can be no experiencing – only experience (as in ‘stuff happens’) – for it is through the attachment of meaning that we relate experience to our lived lives, whereupon it becomes experiencing, for which Gendlin (1997) has expressed a strong preference for denoting by use of the gerund (experiencing) rather than the noun (experience). Kuehlwein has the following to say about the importance of meaning-making in the practice of the psychological therapies:

[C]lients typically come to us with problems resulting largely from inadequacies of their meaning-making ability in certain contexts.

(Kuehlwein, 1996, pp. 499-500)

This is why this next point is so important to the practice of the psychological therapies:

[T]herapeutic change, in any form of therapy, requires a transformation of meaning to occur.

(Power and Brewin, 1997b, p. xi)

So strongly do I feel about this that I would go so far as to say that without a meaning-changing mechanism, one doesn’t have a genuinely therapeutic form of the psychological therapies to deliver. Let me be quite clear about precisely what I am asserting here: any form of psychological therapy that cannot provide a plausible account of any genuine meaning-changing mechanism that features as a central component of that particular approach to psychological therapy fails to satisfy one of the most important criteria for inclusion as a legitimate form of psychological therapy. It is for this reason that I maintain that the hermeneutic discourse is of central importance both to the practice and to the analysis and understanding of the psychological therapies, for if we change the meaning that we attach to our experiencing, then we change this very experiencing itself! Indeed, of such central importance is the hermeneutic discourse that, once meaning has been attached to our experiencing, it is difficult for us to think back to this original piece of experiencing
without at the same time evoking the self-same meanings that have been attached thereto, as these meanings become reinvested back into that experiencing. Only by re-symbolisation can we ultimately alter the sense of meaning that we have come to attach to this original piece of experiencing, and thereby change the way in which we regard and process this initial piece of experiencing.

The view that I have come to hold of the practice of the psychological therapies is that such practice represents an art that is illuminated by constructivist creativity, but which is best practised when it is also informed by an understanding of those boundaries established by positivistic research. What I mean by this is that there is no point in constructing a constructivist model that reflects the positivist functioning of the human brain, such as dialectical constructivism, if that constructivist representation of brain functioning actually contradicts something that has already been established through positivistic research. If these two paradigms seem to be contradicting each other rather than complementing one another, then our understanding of the practice of potentiality paradigm therapy would benefit from the investigation of any such apparent conflict, as such contradiction would serve only to give the unhelpful impression of a system that is articulating rather different narratives.

In terms of training, these findings encourage us to train our therapists to be able to work with their clients’ experiencing in general and with the way(s) in which they attach meaning to their experiencing through symbolisation in particular – the hermeneutic discourse. Therapists also need to be trained in how best to put these concepts across to clients during any psychoeducational phase of therapy that they may deliver. In particular, we need to train therapists to persuade [after Frank (1961, 1973) and Frank and Frank (1991)] their clients to distinguish between those facts that are given, and those value judgements that, although they may have bought into them as givens, are actually not facts at all, but rather are value judgements through which we construct our sense(s) of meaning; that the only given about meaning is that it is not given at all: rather, it is constructed; and if we can accept responsibility for having constructed it in the first place, then it follows that we can also accept responsibility for having the agency to deconstruct and then to reconstruct it again afterwards.
We need to train therapists to persuade their clients to conceive of how they relate to others in terms of the status of their own relationship with themselves in general, and to appreciate that their relationship with themselves actually influences how they experience themselves in particular, thereby completing the cycle of these three epistemological discourses – the experiential, the relational and the hermeneutic – for in so doing they will have created a unified understanding to offer their clients: one that eloquently articulates the potentiality paradigm with especial reference to the practice of the psychological therapies.

Whilst not wishing to detract from the roles of the other two epistemological discourses studied in this piece of research – the experiential discourse and the relational discourse – we can expect potentiality paradigm therapy to focus on meaning-changing interventions that would be designed to focus the client’s attention upon the operation of the hermeneutic discourse. This could involve, for instance, studying how their emotion schemes may produce a pattern that influences how they tend to symbolise their experiencing, as this sort of knowledge could help our clients to avoid the pitfalls of symbolising their future experiencing in a manner disadvantageous to their future happiness and wellbeing, as well as enable them to symbolise in an alternative manner their past experiencing where this is still causing them difficulties in their present lived life.

### 6.4 Implications for further research

Looking back on this piece of research, I am of the opinion that the single most important piece of the research jigsaw in this research study was getting the most epistemologically rich data to use for my data analysis. Morrow cites Patton (1990) in support of this view.

Patton (1990) recommended that “validity, meaningfulness, and insights generated from qualitative inquiry have more to do with the information-richness of the cases selected and the observational/analytical capabilities of the researcher than with sample size” (p. 185).

(Morrow, 2005, p. 255)
Of course, knowing where to look for this epistemologically rich data was also key and,
given the somewhat abstract nature of some of the concepts studied in this research study –
such as the potentiality paradigm and its three constituent discourses of experiencing,
relatedness and hermeneutics – the length of my experience of having been involved in the
psychological therapies enabled me to adopt a heuristic approach to this search which may
have been unavailable to others, or which at least may have been less readily available to
some. When planning research into abstract areas of any discipline like this, it needs to be
borne in mind that literature searches function cumbersomely rather than effectively when
searching for highly abstract concepts which, whilst they are likely to be written about in
many disparate terms, are often written about without reference either to the most logical
search terms, nor to those particular search terms that one would have chosen oneself.

The qualitative meta-synthesis has, I believe, proved to be a most useful research design
for use with such highly abstract research topics as this one. It has enabled me to pursue
what some may consider as constituting – with apologies both to M Scott Peck (2006) and
to Annette De Burgh (2013) – something of a road less travelled, and possibly even a road
down which many would not even care to travel! But I firmly believe that, although not
necessarily constituting one of the mainstream preoccupations of many therapists these
days, how we look at something becomes of profound importance when we are
contemplating the practice of something as abstract as the psychological therapies, and
especially of those psychological therapies whose aegis is subsumed within the potentiality
paradigm. For, as I have said elsewhere (Gilmore, 2008), there is a very real sense that
how we look at something as abstract in nature as the psychological therapies may under
certain circumstances become just about everything that we will ever know about them.

Epistemology, therefore, comes to assume a central importance in such disciplines and, to
an appreciation of the central and pivotal role played by the experiential, the relational and
the hermeneutic discourses in the study and the practice of potentiality paradigm therapy,
must now be added an appreciation of the role of dialectical constructivism in the
psychotherapeutic endeavour. This epistemological mechanism reminds us that the human
brain processes the data that it receives from the epistemological discourses by integrating
and synthesising the data that it receives. An understanding of this process is critical for
potentiality paradigm therapists who are intent upon working with these epistemological
discourses, for without knowing how to unravel the synthesised forms that these
discourses’ data has taken, we would be unable to assist our clients to review their former
symbolisation of their former experiencing so that they may re-symbolise it in a manner more conducive to them leading the sort of life that they feel called to live without sabotaging them achieving this goal through experiencing barriers to their lifelong growth.

Given the significance of the epistemological underpinnings of potentiality paradigm therapy, I remain mystified as to why the epistemological mechanism of dialectical constructivism is hardly ever mentioned in most training courses of counsellors, psychotherapists and even of counselling psychologists. This surely needs to change if we are at all serious about offering such trainees a thorough grounding in the discipline that they have chosen to practise!

The only way in which I can account for this apparent recalcitrance to engage in matters epistemological is perhaps because the psychotherapeutic professions have been more interested in striving to be viewed more like a science than a hermeneutic discipline. Furthermore, there seems to be precious little material about research methodology with respect to the conduct of abstract research. Virtually everything that I have read about research methodology has assumed a focus on empirical rather than on abstract research; this also needs to change if universities are serious about resisting the accusation of the dumbing down of our academic standards and research endeavours.

But I have another reason for advocating that we adopt a more conscientious approach to epistemology: it is my belief that we can only be satisfied that somebody has understood something complex or abstract once they have successfully expressed their understanding of it in abstract terms, for such a test affords us the conviction of a practitioner of a discipline that is based upon genuine understanding of its underlying principles and precepts rather than on a series of explanations that have been learned on a rote basis.

Different practitioners have differing ideas as to whether supplementing potentiality paradigm therapy by offering various forms of psychoeducational input is likely to prove helpful or not. If, however, our grasp of such matters is less than comprehensive, then we would hardly be well advised even to attempt to share such accounts with our clients, whether or not by way of some form of psychoeducational supplement to potentiality paradigm therapy. We cannot share with others that of which we have little or no understanding ourselves.
One aspect of this piece of research that I should have liked to have investigated further is the notion of the psychotherapeutic relationship as a methodological laboratory, and another is the view of humankind that this qualitative meta-synthesis’s interpretive synthesis yields us: a view of human beings as being continually searching for meaning(s) (Frankl, 2004).

Man’s search for meaning is the primary motivation in his life and not a “secondary rationalization” of instinctual drives. This meaning is unique and specific in that it must and can be fulfilled by him alone; only then does it achieve a significance which will satisfy his own will to meaning.

(Frankl, 2004, p. 105)

In classifying what Frankl terms “[m]an’s search for meaning” (Frankl, 2004, p. 105) as a “primary motivation” (Frankl, 2004, p. 105), Frankl is suggesting here that the human being’s preoccupation with meaning is a characteristic that almost defines humankind. This is suggestive of a quality that is genetically handed down from one generation to the next, and which could be said to distinguish human beings from the rest of the animal kingdom. Frankl’s description of “[m]an’s search for meaning” (Frankl, 2004, p. 105) as “unique and specific in that it must and can be fulfilled by him alone” (Frankl, 2004, p. 105) also tells us that what we are talking about here is meaning as a personal construct and as a social construction (in the unlikely case that any may still harbour any residual doubt about this) that each of us is responsible for constructing out of our brain’s synthesis and symbolisation of our experiencing of our lived lives.

Unfortunately, it appears that it is forever the privilege of the ingénue researcher to try to take on more than he can chew in anything approaching a fit and seemly manner. As is sometimes the case, the dictates of the word limit won out on this occasion, and these intriguing pair of topics will have to wait for another day for their eventual outing.

Another topic that fell victim to the word limit was the work that I conducted to investigate models such as the understanding and explanation models, and the description and interpretation models (Giorgi, 1992), as well as much of the work on psychotherapeutic theories as well. All of this work had unfortunately to be excised from the present work, much to my chagrin, but it may surface elsewhere at some point in time. I should particularly like to follow up the notion of whether and precisely how these pairs of models
are paradigmatically based, for I have relished the various paradigmatic considerations that my analysis has brought to the surface during the course of the present research study.

This takes me to my final point about research generally, and more particularly about my own response to it. If there is one thing that I have learned about myself in all of these research endeavours it is that it is the more abstract research topics that really fire both my enthusiasm and the sense of imagination and creativity that plays such an important role in the conduct of abstract research of this nature. It was, I believe, the absence of any sufficiently pervasive abstract quality in my previous research study (Gilmore, 2008) that left me feeling so unfulfilled upon its eventual completion. Identifying and remedying what for me represented something of a deficit has been important for me, as I now know where to look for my next challenge.
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