

# Which technique is right for me?

I am an integrative therapist which means I have been trained in a variety of schools of thought, which are:

## Person-Centred Therapy (PCT) – Founder Carl Rogers

PCT focuses on the “here and now” meaning it explores the thoughts and feelings a situation causes us today, rather than how it made us feel in the past.

The theory is based on the assumption that everyone has the ability to “self-actualise” but they need the correct nurturing conditions (6 Core Conditions) in order to achieve their full potential. The 6 Core Conditions are:

1. The client is in psychological contact with the therapist;
2. The client is incongruent and vulnerable;
3. The therapist is congruent;
4. The therapist experiences unconditional positive regard;
5. The therapist is empathic towards the client;
6. The client perceives the therapist to be empathic and experiencing unconditional positive regard.

Rogers regarded points 3, 4 and 5 as “necessary and sufficient” for therapy to occur.

Our “self-concept” is built up by others’ expectations of what we “ought” to do in order to gain positive regard (conditional), for example “If I am reliable others will like me...”. Psychological disturbance occurs when our “self-concept” clashes with immediate personal experiences (we can’t be and do what others’ expect all of the time). Psychological disturbance will continue for as long as we rely on our “self-concept”.

A typical session with this theory would be centred round the client feeling free to express their thoughts and feelings without judgement or analysis from the therapist, whilst the therapist remains genuine and not holding back on any information. The client should feel heard and understood by the therapist.

This theory is widely used in Cornwall and does not require having a set amount of sessions (e.g. 6-8).

Clients will need to attend no less than once weekly or fortnightly sessions.

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## Cognitive Behavioural Therapy (CBT) – Founder Aaron T. Beck

CBT is widely used by the NHS because of its proactive, goal orientated and short-term nature. It focuses on the “here and now” and how our thoughts, feelings, behaviours and physiology relate to one another in particular circumstances. It is psychoeducational, which means the client is encouraged to become their own therapist. It is necessary for the techniques they have learned to be applied outside of the therapeutic setting, so that success is continued once therapy has ended.

### The Hot Cross Bun:

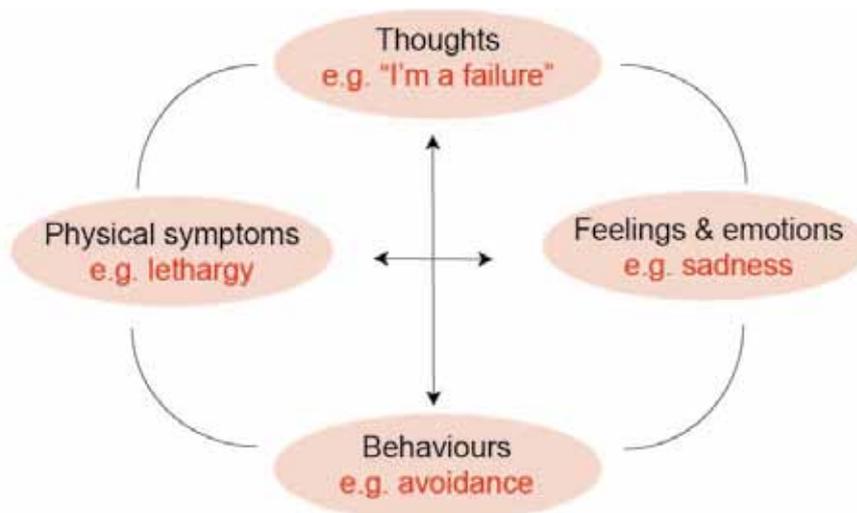


Fig. 1 Padesky Hot Cross Bun Model

CBT looks at how you view yourself, others and the world and focuses on changing thoughts to change the behaviour.

# Which technique is right for me?

CBT is particularly effective with:

Anxiety;  
Depression  
Panic;  
Phobias;  
Eating disorders;  
Trauma;  
Obsessive Compulsive Disorder (OCD);  
Anger;  
Low self-esteem;  
Pain;  
Fatigue

The first session will be focused on setting the agenda for therapy for an agreed amount of sessions for the contract. The agenda is set by looking at the current situation, what you wish to achieve and how you plan to achieve it (Egan's Skilled Helper). The sessions need to be strictly structured to meet the goals set and can only work with one issue at a time. The client is also required to be highly motivated and receptive to the theory for therapy to be successful.

Clients will need to attend no less than once weekly or fortnightly sessions.

**Psychodynamic – Derived from Sigmund Freud's Psychoanalysis and further developed by Anna Freud et al.**

Psychodynamic therapy is focused on the conscious and unconscious mind, the relationship between the Id ("pleasure principle" basic desires such as food, warmth, sex etc. "I want..."), Ego (balances Id's basic desires and Superego's judgements) and Superego (the parental influence/values and judgements "I should..." "I must..." Aiming for perfection) and the relationship between client and therapist – with the particular focus on transference (the client's reaction to the therapist based on relationships experienced elsewhere), counter-transference (the therapist's own reactions to the client's actions) and defence mechanisms (the mechanism by which we deal with anxiety when the Id and the Superego are in conflict).

Psychodynamic therapy is generally longer term and more intense than perhaps PCT and CBT.

As I am an integrative therapist, therapy plans do not necessarily have to be strictly one theory or another, but can be made up of relevant parts best suited to the client.