

Fundamentals of Counselling Psychology

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There are some aspects of counselling psychology which underpin *every* aspect of the profession and the tasks that counselling psychologists undertake. These aspects are fundamental in character and ever present whether they are overt or covert. While aspects of our practice change over time — sometimes in quite significant ways — in light of the therapeutic model embraced, the research method used or the contexts in which we work, these fundamentals remain central to the integrity of the profession. What are these fundamental characteristics, so crucial to the profession and the contribution counselling psychology makes to therapy and to the wider world? This section looks at just a few of them, including pluralism, relational ways of understanding the world, the understanding of distress, research and enquiry, ethics and the therapeutic relationship.

Such fundamental aspects are not easy, clear-cut phenomena and certainly not unidimensional in nature. Quite the contrary, these are sometimes rather ethereal, complex domains, requiring open, ongoing and curious engagement. In some contexts (e.g., in the debates about statutory regulation, the setting-up of professional bodies and the writing of therapeutic 'guidelines') the debates can be characterised by conflict, reliance on the exercise of power and the influence of status. This array of responses highlights the crucial nature of these fundamentals.

In light of this, it will come as no surprise to readers that the contributors to section 1 approach their topics — and, I suspect, the profession — from different positions. And in doing so, these six chapters draw readers' attention to the complexity of human experience and the ways in which

counselling psychology knowledge and practice engage with this complexity so as to be of benefit to all involved.

In Chapter 1, Donal McAteer introduces the reader to the concept of *pluralism* and the epistemological tensions with which we live today and in which counselling psychologists function. Donal reminds us that counselling psychology eschews dogma and encourages an attitude of curiosity and continuous questioning of the assumptions we make in our daily lives both as counselling psychology practitioners and as human beings. As in the wider world, this presents a challenge to the profession and its practitioners as we attempt to negotiate with different theoretical and professional perspectives and as we wrestle with our own certainties or biases. This chapter also considers one of the core tensions experienced in the profession: 'directiveness and non-directiveness'. The chapter does not ask *whether* we influence people, but how we do, why we do, when we do, when we should, how we can communicate this, and what shapes the ways in which we influence.

This is followed by Elena Manafi's first chapter, which looks at counselling psychology's *relational framework*, well known when we think about therapy, but ever-present in all our professional activities and roles. The chapter outlines the different epistemological positions that counselling psychologists draw on and how these come together in a view of human experience as constructed and intersubjective. Counselling psychology shows just how crucial it is that we move beyond the traditional view of people as self-contained to understand them as intentional and relational in all aspects of our experience and behaviour. This has implications for understanding people, understanding 'pathology' and ways of preventing psychological distress.

In Chapter 3, Deborah Rafalin looks at one of our key activities – research – and the ways in which counselling psychology engages with the challenges and opportunities that psychological enquiry provides us. The discipline explicitly engages even-handedly with both quantitative and qualitative paradigms to answer its burning questions and to explore the nature of the questions being asked of it. This chapter explores how the counselling psychologist responds to the calls for 'scientific evidence' to support their clinical choices whilst valuing the subjective phenomenological experiences shared by their clients.

That emotional pain and distress are inescapable features of the human condition is not in doubt and when working with people experiencing this, the applied psychologies often have to engage with the notion of 'psychopathology'. There is a social and cultural acceptance of the logic of a medical model of distress and has seen a steady increase in the pathologisation of everyday life. In Chapter 4, Mark Craven, Adrian Coyle and I take a

different stance and consider *human distress* through a postmodern lens, to highlight the benefits of relational frameworks when meeting clients in pain and to remind us of some of the damage that can be incurred when using outmoded, individualistic ways of understanding people. The chapter looks at 'psychopathology' *in relation* to the discipline of counselling psychology, which historically provides an alternative view of human functioning and dis-ease to that contained in the medical model.

As a profession, counselling psychology emerged from a desire to move towards a way of being with clients that would be non-directive, egalitarian and would take a holistic approach to understanding human wellbeing. So, in Chapter 5 Frances Gillies looks at one of counselling psychology's key foci – the *therapeutic relationship* — and suggests that this crucial aspect of practice benefits not only from being seen as a current relationship between the therapist and client in the consulting room, but also a relationship embedded in time. To this end, she shows how an evolutionary lens can usefully contribute to understanding the complexity of this key relationship.

The final chapter in this section is by Camilla Olsen, who considers *ethics* as a fundamental dimension of counselling psychology. In this chapter consideration is given to the ethical boundaries psychological therapy is governed by and the rationale for these boundaries. Attention is also given to how these same ethical boundaries can create difficulties between human beings, in particular where you as a person have contradictory ethical responsibilities. Many of us have experienced this in our workplace, and this can be particularly difficult when multidisciplinary input is required. It is also true for training institutions as well as for supervision.

These contributors show that whether thinking about epistemological positions, the ways individuals relate to self, others and the wider world, whether we explore a phenomenon in relation to the meaning it has for clients or the role it plays in the wider world, counselling psychologists draw on relational frameworks in an ever-changing landscape and this is done with an ethical mindset – how to do the best possible work so that people are helped and harm is avoided. The contributors also highlight the complexity in this endeavour and offer fruitful ways of orienting ourselves to this challenge.

Chapter 1

Philosophical Pluralism: Navigating the Sea of Diversity in Psychotherapeutic and Counselling Psychology Practice

Donal McAteer

'Ever not quite' has to be said of the best attempts made anywhere in the universe at attaining all-inclusiveness.

(James, 1909, p. 322)

This standpoint, articulated by the American philosopher William James in the first decade of the twentieth century, highlights a central tenet of the postmodern view: that there is no overarching truth to elucidate everything. Moreover, to aim for such certainty would inevitably leave some things unexplained, while excluding other legitimate explanations in the process. The concept of pluralism stems from such a view in that it puts forward a case for recognising the validity of multiple competing perspectives in answering the questions we are faced with in our personal and professional lives and in the wider world.

This chapter discusses how the notion of a pluralistic perspective applies to therapeutic practice and how it constitutes the very foundation of a counselling psychology approach to working with clients and to the realms beyond the consulting room, including such areas as research, service development and how we relate to each other in our lives. It also incorporates the dialectical element of counselling psychology, referring to the negotiation of opposing and at times seemingly incommensurable viewpoints, and the promotion of active engagement with them. Through an emphasis on this dialectical stance, we shall see how the adoption of pluralism brings with it both great opportunities and significant challenges. This will include a discussion of one of the main challenges to pluralism in the profession – namely, *directiveness* and the degree to which we can, do or should influence clients in therapy or others around us.

Defining Pluralism

From Metanarratives to Pluralism

Given that the world in which we live consists of a multiplicity of people, of experiences, attitudes, beliefs and claims to the truth, counselling psychology, as a part of this world, adopts a pluralistic standpoint which recognises the variety within it. To foreground the notion of pluralism, it is necessary to give a brief account of the postmodern philosophy to which it is closely related.

As a philosophical movement, postmodernism arose in response to modernism and the Age of Enlightenment. The modern era had seen the rapid advancement of scientific enquiry and a search for universal laws to explain the world in which we live. It was felt that objective laws would be free from the myths, stories and beliefs that characterised premodern thinking to allow humankind to see the world as it 'really' is (Grenz, 1996). Postmodernism saw these laws and principles as essentially myths in themselves and as 'metanarratives' that serve to supersede all other claims to the 'truth'. Therefore, while science was concerned with the search for a theory of everything, postmodernism cautioned against this, challenging the notion that we can access the truth, and displaying what Lyotard (1984, p. xxiv) has referred to as 'incredulity toward metanarratives'. This position argues that instead of a single unifying answer to a given question or conundrum, we live in a complex world (or worlds) and there are multiple answers depending on a multitude of personal, political, cultural, linguistic and social factors.

In light of this postmodern counterargument to metanarratives or truths, pluralism emerged as a doctrine that valued the diversity of perspectives inherent in any conversation. Fundamentally, pluralism aims to avoid the dogmatic prescription of any particular epistemology in explaining our world or the people in it. This pluralistic epistemology is at the core of counselling psychology and represents its engagement with a wide variety

of perspectives that clients bring to therapy, or that are evident when conducting research or when working with service and policy development. It could not be more clearly stated in the guidelines for practice in this profession, whereby models of therapy seek 'to elucidate, interpret and negotiate between perceptions and world views but not to assume the automatic superiority of any one way of experiencing, feeling, valuing and knowing' (Division of Counselling Psychology, 2008, pp. 1–2). Indeed, the definition of pluralism extended here is founded on this deliberate engagement and negotiation with diversity rather than simply a recognition that there are multiple viewpoints on offer. This engagement is not without its challenges though, whether that is in offering therapy or in navigating the vast array of perspectives we encounter in the world we inhabit. These challenges are explored in a later section, but first we must further elucidate the nature of pluralism as it applies to the field of therapy and to the particular discipline of counselling psychology.

Pluralism in Therapeutic Practice

There exist several hundred individually defined approaches to therapeutic practice (Cooper, C., 2003; Kazdin, 2000; Tillet, 1999). In fact, it is difficult to arrive at an exact number and no doubt it will have increased by the time you read this book. This makes it difficult to refer purely to 'therapeutic practice'. As Rowan (cited in House, 1997) argues, any attempt to represent the field of therapy as a single, cohesive profession fails to account for the fundamental differences in worldview that exist between these various schools and approaches. In light of this variety, the benefits of a pluralistic perspective in counselling psychology become apparent through an awareness of the different positions and an emphasis on their validity. Pluralism in this sense stems from a respect for the 'Other', and Cooper and McLeod discuss the importance of this stance in therapy:

Pluralism, then, is not just an epistemological position, but an ethical and political commitment to respecting, valuing and being inclusive towards Otherness: other worldviews, other counsellors and psychotherapists and ... respectful to our clients.

(2007, p. 136)

However, this valuing of otherness in a pluralistic approach does not always run smoothly. With such a variety of outlooks comes disagreement and, put simply, the therapeutic field is 'full of dispute' (Feltham, 1997, p. 119). For instance, major disputes have historically taken place between psychiatry and clinical psychology, between the various applied

psychologies, and between particular approaches that endeavour to claim pre-eminence. It is with this dispute in mind that another element of the pluralistic focus of counselling psychology is utilised – this discipline not only acknowledges the variety, but enters into the arena of disagreement with a view to actively participating in it. Indeed, Samuels contends that 'the trademark of pluralism is competition and its way of life is bargaining' (1997, p. 201). This highlights the dialectical nature of pluralism. While it involves an attitude of recognition, respect and inclusivity towards different positions, it also promotes an engagement with this difference and the tension that it can bring. It is perhaps no wonder then that counselling psychologists can be found in the field of mediation and conflict resolution, given this emphasis within the discipline on dispute and negotiation (Spinelli, 2004; Strasser & Randolph, 2004).

It can be seen that dialectical pluralism is fundamental to counselling psychology. It is present in its engagement with different models in an informed approach to therapeutic practice (Clarkson, 1995). It is present in creating an atmosphere of openness and tolerance in which divergent research methodologies can be equally valid in exploring important questions both within and outside therapy (Barker & Pistrang, 2005). Naturally, those who adopt a position of active participation in the 'messiness' of difference are not always in comfortable territory. In negotiating the competing and contrasting theories on offer in therapy, a dialectical approach places importance on many features of engagement that we might prefer to avoid – disagreement, conflict, frustration, uncertainty – and argues that it is in the creative tension generated between therapeutic perspectives that the value of pluralism lies. More fundamentally, this negotiation begins with adopting a critical stance to our own assumptions and the fixed categories we create that obscure our view of the alternatives around us. Rowan (2001) states that such a stance quite simply entails a 'take nothing for granted' policy, which opens us to other perspectives and worldviews. The importance of this fundamental questioning is demonstrated for all of us in our relationships not just with others in therapy, but with other people in general – through accepting the potentially enriching influence of other faiths, cultures, races and genders without having to guard so heavily against them. These notions bring shades of grey, or preferably multicolour, to the proceedings in favour of a restrictive 'either/or' position, and include an element of paradox that once again takes it beyond clearly defined categories and sedimented knowledge. Through this attitude, counselling psychology becomes adaptable to the inevitable changes that a pluralistic world entails, and is able to grow continually within what is certainly a complex matrix of interactions and influences that are in a constant state of flux. As is perhaps becoming clearer at this stage, wrestling with the interplay of multiple perspectives can bring substantial challenges to those willing to wade into this sea of diversity.

The Challenge of Dialectical Pluralism

Roadblocks to Pluralism

Given this conflict, it comes as no surprise that adopting and maintaining such a stance can be difficult. This will immediately be apparent to therapists in the consulting room, and to those beyond the confines of this domain, who have grappled with the arguments posed by viewpoints different from that with which they are most comfortable. For the purpose of the point in question here, I shall focus on the challenges presented to therapists when working pluralistically in their practice. The following example should help to illustrate some of the complexity of pluralism in action:

Consider a counselling psychologist working with a client who has come for help with his 'depression'. She works from, and allies herself predominantly with, a Rogerian, person-centred perspective; however, her training also included significant focus and exposure to other therapeutic theory and methods. She takes note of how the client seems to struggle with filling his day, due to the fact that he is not working and has little social activity. In attempting to adopt a pluralistic attitude, the therapist is faced with multiple questions. Will she continue with her chosen humanistic approach and empathise with the here-and-now difficulties her client experiences? Will she incorporate elements of a cognitive behavioural approach that might help him to specifically change the behaviour that is troubling him and the thinking that may be interfering with such a change? What impact will it have on her therapeutic relationship with this client? Moreover, what approach might the client find more appealing? What approach might be of more benefit to him, and what would this benefit look like? Should she rule out CBT, given her preference for the person-centred perspective, or does that mean she's being too dogmatic? Furthermore, what do other approaches have to say on this issue?

There are no easy answers here and this is but a sample of some of the questions – *pluralistic dilemmas* – which a dialectical stance raises. However, when engaging in a dialectical enterprise, 'answers' as such are not always being sought, nor are dilemmas always resolved, and the conclusion

does not have to entail the agreement or synthesis between viewpoints (Downing, 2000). Rather than answers, this therapist's situation emphasises the conflict encountered when attempting to help others by moving around the therapeutic landscape with a dialectical compass. As Rowan puts it, '[t]he lessons of the dialectic are hard ones' (2001, p. 3). The values we maintain and the foundations on which we build our lives are open to question, and there can be a lot at stake when poking at the walls that hold our house up. This includes the theories we hold dear, whether therapeutic or philosophical, and these have already been arrived at through much deliberation and are inexorably connected to us as individual human beings. Samuels (1997) writes about the psychological difficulties of the very human endeavour of pluralism, namely that therapists or psychologists, being human, find it hard to maintain a consistent attitude of tolerance when engaging with those people or perspectives that oppose them. However, he once again underlines the value of this uncomfortable interaction and encourages that competition be brought into the open as a contribution to personal and professional growth. Furthermore, this growth will surely be to the benefit of the clients receiving support from those committing themselves to such personal exploration.

It is easy to see how, in this conflict-ridden paradoxical enterprise, there are not only intellectual dilemmas or roadblocks to pluralism in the form of understanding the complex landscape, there are also emotional roadblocks when entering this potentially threatening area of exploration. Downing (2000) discusses these emotional challenges as being associated with therapists' personalities, allegiances, personal worldviews and value systems or ethics. In specific reference to counselling psychology, Rizq (2006) argues that the profession's identification with a pluralistic and dialectical attitude places trainees particularly in emotional turmoil as they struggle to get to grips with multiple theories and the realisation that it is not possible for one single and clear set of rules to be given to navigate their way.

Beyond these personal struggles in embracing pluralism, there are the difficulties of balancing pluralism with the demands placed on us by the contexts in which we work. This exposes us to dilemmas of how to communicate our stance towards pluralism and highlights the relevance this has to all of us as people in a diverse, pluralistic world. Counselling psychology's commitment to evidence-based practice in therapy is also challenging as it requires the balancing of pluralism in producing and evaluating scientific evidence while respecting the phenomenological experience of individual clients or research participants.

Considering the difficulties in encountering the multicolour conflict that defines dialectical pluralism, the question arises: is it a case of 'many hands make light work' or 'too many cooks spoil the broth'? As is the dialectical

prerogative, it's neither and it's both. Many hands or theories certainly don't make for light work when it comes to wrestling with these ideas, but nor do they spoil the broth. They are the broth. They are already in the mix, whether we like it or not, and the tension comes from communicating with opposing views we cannot ignore. However, we can, of course, *choose* to ignore or reject these other views (including the view of pluralism), and this point will be discussed towards the end of this chapter. Before that, there is a particular pluralistic dilemma in therapeutic practice that captures one of the major challenges in dialectical engagement and that helps to illuminate the issues under discussion here.

A Question of Direction

A significant barrier to pluralistic engagement with or between competing therapeutic approaches is the question of whether a practitioner sees the approaches as either 'directive' or 'non-directive' within therapy. This can be fundamental to the perception of a type of therapy and the therapists associated with it, and as such, it can have a bearing on which therapies practitioners choose to engage with if attempting to adopt a pluralistic attitude in their practice.

It can be unclear to what exactly the notion of directiveness refers. At first glance, the idea of being directive in therapy appears to relate to how a therapist guides the client and the process towards particular goals. Cooper, M. (2003) suggests that direction can involve the introduction by the therapist of their own topics and issues, and it is often associated with specific 'techniques' that the therapist employs or theories that are openly communicated to the client. Conversely, a stance of non-directiveness is one that communicates a fundamental respect for the client's autonomy by not imposing the therapist's views on where the process should be going or pointing the client in any particular direction (Levitt, 2005).

Research I have conducted in this area (McAteer, 2006) was concerned with the meaning of directiveness and what it might look like in practice. Specifically, it looked at cognitive behavioural therapy and existential therapy as these are traditionally seen as directive and non-directive respectively. The findings suggested that the concept of directiveness is not as straightforward as the terms above might imply. It does not seem to be a case of one therapist or type of therapy directing the client while the other does not, but more to do with direction and influence forming an integral and unavoidable part of the therapeutic process, regardless of the approach. The research also questions the notion of categorising therapies on the basis of a particular 'type'. Both approaches encompassed therapists who practised

in a variety of ways and, consequently, had different effects on the direction of the therapeutic process. Therefore, it is concluded that the issue centres more on how we already influence our clients in our individual style of therapy and how we can remain aware of this, even if this relates to how we communicate our position in 'non-directiveness' that it would be more beneficial for them if we didn't explicitly direct the process. Deurzen (2009, p. 35) highlighted that this pertains to an approach that is 'neither directive nor non-directive, but directional, purposeful and searching instead', when attempting to assist clients in finding their own direction.

This idea of conveying our position or worldview to clients in therapy and the effect this can have has been underlined by Deurzen-Smith (1992), who argues that therapeutic dialogue can be a converting of the client to the therapist's political or ethical position, and 'by not intervening, one is still making an intervention and transmitting a certain view of the world' (1992, p. 18). In reference to Polanyi's (1967) work on the 'interiorisation' of theory in science, Downing considers what is required of clients in this respect when they enter therapy:

In the complex exchange which follows, it is no doubt crucial that therapists teach clients to interiorise some implicit or explicit theoretical rationale and philosophical framework, just as they themselves have interiorised it.

(2000, p. 250)

In light of these seemingly inevitable communications, it is important then that we remain aware of our influence and the fact that we play a part in co-directing the therapeutic process towards what we feel might best serve our clients. The following example may shed some light on maintaining a reflexive awareness of the influence we can have:

As I have been writing this section, I have been conscious of overtly insisting that we should always remain aware of our directiveness, with the suggestion that this is the 'right' way to set about practising in an appropriately pluralistic fashion. I am wary of being too directive! But I am still trying to make a point, so perhaps I can be more explicit. My aim is to have an impact on you as the reader, otherwise I wouldn't have written this. However, my aim is also not to ultimately provide an 'answer' or to tell you what you should be doing in therapy or in your approach to life. Instead, I intend to open the doors to a conversation I feel is important and share my views on it. In resisting the prescription of a specific course of action, I am communicating the importance I place on the idea of you coming to your own conclusions based on our interaction through this text. Of course, this is because I feel your

viewpoint should be respected, just as other's should, without having to impose my worldview on you. Nonetheless (and perhaps you can see where I am going with this), I have just impressed on you the essence of my worldview and the pluralism at the foundation of this – namely, that I feel this is the way it should be and I have a preference for us to communicate in these terms.

What is being demonstrated here is the subtle, implicit nature of our influence and direction at times, but it is influence nonetheless. I am essentially asking you to buy into my worldview. But you can choose not to.

What if in the example above you demanded of me that I tell you the 'right' way to do things rather than leaving it up to you? I might insist that I am not in the position to determine what is right for you because I appreciate the fact that it would be my take on the issue, and I would not automatically assume the superiority of my view over yours. Thereby, my pluralism, and my direction towards that, is perhaps becoming a little more explicit through my active rejection of doing things differently from that which I value, and ultimately I am actually assuming the superiority of this view.

From McAteer (2006), it seems that the roadblocks we might face when attempting to engage with the range of therapies from our pluralistic standpoint can be challenged. In adopting a dialectical approach to the dilemma of whether to be directive or non-directive in therapy, we can see that this distinction is brought into question, as well as any definitive categorisation of therapies in practice. It therefore queries some of the bases on which different approaches to therapy may be thought to be incommensurable, although there will clearly be other hurdles to overcome. It causes us to look more closely at ourselves and the other, and in doing this, we can often find that our assumed differences are not as clear as we once thought and there is a blurring between the poles or supposed opposites. However, while applying these dialectical principles can help us tackle the roadblocks, it is unlikely to look the same across all situations and interactions within and outside of therapy. What if I encounter someone who insists on treating another with violence, oppression or discrimination on the basis of their difference from them? Would I implicitly suggest that my pluralistic or dialectical viewpoint be taken into account? Would I attempt to impose it? Would I shelve dialectics and pluralism and demand that they treat that person differently because what they are doing is wrong? It is clear that we are presented with many choices here and we can suddenly find that dialectical pluralism in action is once again a challenging endeavour.

Towards a Reflexive Pluralism

Choice within Pluralism

It appears that the initial pluralistic dilemma of 'to direct or not to direct' in the process of therapy in many ways represents the overall challenge we face when attempting to enact our pluralism in all areas of life. That is, given our respect for diversity, multiple perspectives and the individual's right to hold these, how do we decide how or when to intervene? The fear is that intervention may compromise the very respect that we set out to uphold in the first place. As we have seen, it is not possible for us to completely avoid directing, intervening or influencing. Therefore, we are confronted in pluralism with the element of *choice*, which is what our discussion has been leading to. Pluralism is not about a lack of action or deciding *whether* to have an influence on someone; rather, it is about acknowledging our inevitable influence, choosing *how* to act in light of this and justifying or assuming responsibility for the action we take and the views we communicate. In doing this, we challenge the fundamental roadblock and dialectic of directive versus non-directive in how we approach our therapy and the world beyond.

There is clearly room for the elevation of some views over others in a definition of pluralism that involves choice. It is not always a level playing field of neutrality in the sense of a relativistic 'anything goes'. It does not mean that counselling psychology only advocates the communicating of a pluralistic attitude without the expression of opinions or arguments, nor does it mean that we cannot be enthusiastic or persuasive in the views that we hold. Samuels argues: 'This is not a dry or woolly perspective; passion abides in dialogue and tolerance as much as it does in monologue and fanaticism' (1997, p. 209). Moreover, the professional guidelines in counselling psychology specifically require counselling psychologists to express their opinions and they highlight that we have obligations both to ourselves and to society:

[Practitioners will] challenge the views of people who pathologise on the basis of such aspects as sexual orientation, disability, class origin or racial identity and religious and spiritual views.

(Division of Counselling Psychology, 2008, p. 8)

It is clear that counselling psychology has an inherent responsibility to make a case for some views in preference to others and to challenge those that it disagrees with, and that this applies not only to therapy but to the discipline's contributions outside this arena.

Rescher's (1993) work on pluralism provides an insight into the justification of choices between perspectives and the advocating of some over others, within an attitude of fundamental respect for them. He cautions against what he refers to as 'relativistic indifferentism' (1993, p. 80), which is summed up by the stance that all views are equal and that there is no rational basis for choosing one above another. Instead, he argues that we can indeed be rational in our choices between standpoints without negating our appreciation of others in the process. Rescher (1993) therefore promotes the idea of perspectival pluralism based on the idea that, while a variety of perspectives are available, we do not automatically ascribe equal validity to all of them. We can put forward our own view and justify this through rational argument, while also remaining aware of and acknowledging that this view comes from our individual perspective, informed by factors such as our upbringing, culture, age, political affiliation, and so on. In turn, we appreciate that the basis on which these arguments or justifications are made might be different from another's perspective, be that an individual, group, organisation or school of therapy. This demonstrates that Rescher (1993) is proposing a compromise or negotiation between monism – that is, the promotion of one view as superior and 'true' – and the respect for the diversity of truths within pluralism (Seibt, 1994). There is again room for disagreement, taking us away from the horizontal plain of mutual appreciation and moving us towards growth.

Within the realm of therapeutic encounter, Downing concurs with the juggling of tension between conviction in our ideas and the uncertainty that causes us to examine our own position:

Remaining cognizant of our dual nature – a strong need to believe and a complimentary need to question ourselves radically – may be our best hope for retaining our humanity and integrity as psychotherapists.

(2000, p. 292)

We can see that he has extended this to the moral plane and the ethics of practice, and that it is necessary to maintain an awareness of the philosophical components informing the choices we make. Downing therefore discusses the different 'lived modes of knowing' (2000, p. 184), which point to how philosophical positions translate into our practice at different times, regardless of the approach to which we subscribe. Specifically, this refers to a spectrum ranging from realist through to representational, perspectival, dialogical, critical and nihilistic modes of knowing, which therapists will move between. Downing (2000) argues for an awareness of the movement within these different modes of knowing that highlights their dialectical

nature and provides a set of 'checks and balances' for the therapist in an ethical, pluralistic approach to practice. This reiterates the challenge of the simple categorisation of therapies that was put forward earlier when discussing the notion of directiveness and calls for recognition of these different modes of knowing in counteracting any temptations to remain fixed within a chosen philosophical stance.

Maintaining Curiosity

A final note in this exploration of dialectical pluralism within counselling psychology is the move towards a reflexive approach in our efforts to engage with others. Due to the emphasis in the preceding discussion on the value of pluralism and the need to adopt a dialectical approach towards it, a potential contradiction presents itself here. If the message of this chapter can be interpreted as 'pluralism is right', then we are faced with the fact that this doesn't sound very pluralistic or acknowledging of other philosophical perspectives. It is actually beginning to sound as though pluralism is being proposed as an all-encompassing category that explains everything and that argues others should be subsumed under its influence. According to Wilkinson, we are on dangerous ground if pluralism becomes the dominant discourse:

What are the totalitarian dangers of a unified world framework like this, as opposed to the unresolved conflict network of capital, science, religion, media, tribe and nationhood, the conflict we now have? Would it be an anti-fundamentalist fundamentalism? An intolerance of intolerance?

(2002, p. 11)

Certainly, any attempt at a 'world synthesis' (Wilkinson, 2002, p. 11) such as this would denote pluralism as metanarrative and will have become the very force that it set out to counteract in the first place.

Therefore, in order to remain truly dialectical in our outlook, we are required to maintain a continuous attitude of curiosity towards our views and our arguments, including the pluralism on which these are founded. This curiosity is at the centre of counselling psychology and is a fundamental starting point for all its interactions. Foucault wrote about the importance of curiosity and captures the essence of this stance:

It evokes 'care'; it evokes the care one takes of what exists and what might exist; a sharpened sense of reality, but one that is never immobilized before it; a readiness to find what surrounds us strange and odd; a certain determination to throw off familiar ways of thought and to look at the same things

in a different way; a passion for seizing what is happening now and what is disappearing; a lack of respect for the traditional hierarchies of what is important and fundamental.

(2000, p. 325)

In maintaining this curiosity towards our pluralism, we allow ourselves to be open to the challenging of others who may take a much more definitive stance on the absolute certainty of their own convictions. The concept of perspectival pluralism (Rescher, 1993) can also be useful in viewing the dialectical pluralism itself as one of many standpoints towards life and relationships – it can be rationally justified from our perspective, but we must appreciate that others will put forward different arguments from their perspective. In doing this, we challenge the monistic potential of our pluralism and maintain a reflexive and dialectical approach to both what we are encountering and to the ways in which we encounter.

Summary

By recognising our influence over others, the attitude of perspectival pluralism and an increasing awareness of the lived modes of knowing, we have seen in this chapter how counselling psychology can conceptualise itself both within therapy and in its reach beyond the consulting room. As such, while counselling psychology's foundation remains a pluralistic one, opinions are still held and arguments put forward, with an emphasis on the awareness of the processes within this. The move away from dogma towards curiosity highlights the importance that counselling psychology places on the reflective and respectful elements of our lives both as practitioners and as human beings in a diverse world. Some of the challenges in undertaking this task have been highlighted, but we have barely scratched the surface of the areas in which counselling psychology operates or the opportunities it brings. We shall see in the following chapters how the fundamental attitude of questioning has given pause for thought and shed new light on areas ranging from the environment and religion to issues such as race, sexuality and an innovative rethinking of theoretical perspectives in therapy. These discussions are told from multiple voices and styles representing the rich array of perspectives constituting the profession today. Through this plurality of expression and of relation in the way that it engages with different contexts, counselling psychology extends into arenas beyond therapy without undermining what it is or devaluing the principles at its core. Its dialectical nature means that it is not a static discipline with fixed and unchangeable features – it is evolving, organic and adaptable and it has much to say.

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