

The Renewal of Humanism: Lessons from an Existential-
Humanistic Training Program
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Lessons from An Existential-Humanistic Training Program

Good morning

I'm delighted to be with you this morning and add what I can to this important conversation.

My topic is: "Lessons from an Existential-Humanistic Training Program."

And I'm going to jump right in with the first lesson....

Lesson #1: If someone asks for volunteers to create a training program—don't raise your hand!

I don't really mean that, although maybe Victor, my dear partner, wishes I hadn't, given the extensive time and effort it took to develop it.

I do have a mixture of feelings though. One part of me remembers how daunting the project felt. The other part remembers how enormously satisfied I felt, seeing how the students engaged so positively with it.

My mixture of feelings seems to lend truth to the old saw: "whatever doesn't kill you makes you stronger."

Stronger, yes and definitely wiser about what type of learning we need to give therapists-in-training. I thought I understood what was

needed because of having been mentored by Irv Yalom and Jim Bugental. Both valued developing the person of the therapist and creating experiences of being.

I knew I wanted to organize our training around these two principles. But I'd never created as extensive a curriculum as was needed here. I felt a huge responsibility to give our trainees significant learning experiences that would ground them in the principles of existential-humanistic therapy, e-h therapy for short.

Their feedback about the program, which I will share with you today, seems to indicate that we succeeded quite well. But of course it really isn't our success, it's theirs, because like therapy, success in training depends primarily on the person who is participates...and *we* had an amazing group of participants. Much of this presentation will be hearing their voices, describing their experiences in the program...organized as "lessons learned" from them, our remarkable participants.

Let me give you a bit of background first, so we have a shared context:

Nader Shabahangi, Kirk Schneider and I, of the Existential Humanistic Institute launched a training program last year, leading to a certificate in the foundations of existential-humanistic practice. We currently offer two certificates, one through EHI and the other in partnership with Saybrook University.

Nader, Kirk and I have been practicing e-h therapy for more than 25 years. We were blessed with extraordinary mentors Rollo May, Jim Bugental and Irv Yalom.

In 1996, with Jim, we created the Existential-Humanistic Institute. Our goal was to continue the training of therapists that Jim had begun with his "Arts" program.

Because of our special relationship with Saybrook University, we offered their students workshops in e-h therapy many years before proposing a certificate program.

The participants feedback that I used for this talk comes from pre- and post program questionnaires, created to evaluate the certificate program's effectiveness. Right now, we only have preliminary findings...by August at APA, I'm sure they'll be more comprehensive.

Here's some data on our trainees: We had six PhD students from Saybrook, and two non-Saybrook students; one was a therapist from Malaysia and the other a psychiatric resident from Austria. The range of our participants' therapeutic experience varied from just a few years in practice to more than 25 years. Their ages ranged from 28 to 62. They all expressed an affinity for the e-h perspective.

For this talk, I gathered data from four questions from the post-program questionnaire:

1. What are the most important features of the certificate program?
2. What did you gain from the program professionally?
3. How do you think you will integrate your learning into your therapeutic approach?
4. What did you gain personally from the program?

I compiled the responses and then reflected on the information appreciating that I was embedded in a context---being the author and a teacher of the curriculum.

The following themes emerged.

Lesson # 1: Trainees need more experiences of being, and fewer explanations about it.

Of course didactic teaching is necessary but we structured our training so that we always brought the focus back to the here-and-now.

A participant's voice:

"The program itself was a living laboratory of presence. The teaching was always before us, verbally and non-verbally."

Irv Yalom has said: "Working in the here-and-now is the power cell of therapy." We believe it is also true for training. Why is this so?

The here and now in therapy is where action, feelings and being resides.

Not only is the client before us, so is his life story, manifesting in his ways of being with himself and with us.

We use the therapeutic relationship as a living laboratory, knowing that it is a microcosm of the client's relational world. By focusing on what is embodied, enacted or evoked in both client and therapist, dysfunctional relational patterns, in both client and therapist, can be illuminated and worked through allowing healthier patterns to develop.

Another voice:

"Overall, this program lived what it taught...the subtleties, so difficult to describe in e-h therapy were everywhere to be observed."

A focus on the here-and-now puts the client and the trainee *in* their experience of being. By contrast, in the "then and there" they are *talking about* their experience, abstracting it, and analyzing it. Too much "then and there" takes the life out of therapy and training.

We believe this immediacy of experiencing, is the juice that cultivates change.

Lesson # 2: Create learning that brings theoretical principles of practice to life

A participant's voice:

"The most important part of the program was to meet current leaders of e-h therapy and to experience their work "in action."

Our students learned theory taking the on-line courses, and then we brought the theory to life during the two 4-day experiential sessions.

Another voice:

"The theoretical courses were useful but the experientials were invaluable—changed the theory from... words I thought I understood to a lived experience."

We modeled a way of being for them, we demonstrated a way to work, they practiced the work in dyads, we viewed films, we worked with their dreams and we did other experiential exercises. We concluded the experientials by observing their work and giving them feedback. Non-Saybrook students additionally received 10 hours of case consultation in conjunction with their 40-hour practicum.

Lesson # 3: What you say to participants is far less important than your way of being with them

A participant's voice :

“The most important part was to learn from Orah, Kirk and Nader for not just their skills and experience, but their ways of being-- just priceless.”

We wanted to create a training culture that valued awareness, understanding, collaboration, acceptance, transparency, imagination and play. It was actually easy to create this culture because Nader, Kirk and I share these values even though our personalities are very different. That’s what makes working with them such a pleasure.

Another voice:

“The depth of openness, feeling and connection we experienced was amazing”.

And another:

“I have appreciated the opportunity to be involved with Orah, Kirk and Nader. I have been inspired personally by each of you, by who you are, how you work, how you see life.”

Lesson #4

Ground the principles of practice in personal experiences of being

Alfred Langle cautioned us on the danger of using human features like empathy in a technical way, as he says, “in a framework of non-human understanding.” I think this is a very valid concern. It raises the specter of the therapist *acting empathic* instead of *being empathic*. But if trainees have personal experiences of empathy, presence, acceptance, and understanding then these principles do not become techniques “to do” but instead become valued *ways of being*.

Here is a sample of the e-h principles of practice and how the participants engaged with them:

...Appreciate that self-protections are functional-- The therapist's role is to understand their meanings

"I learned not to conceptualize my client's struggle as a problem to be fixed... objectifying my client in the process which is what I was trained to do. Now I'm able to see how my client's way of being and relating could be her mode of self-protection that constricts her from experiencing life more fully, but allows her to function. I see my role as therapist to help her become aware of it so she can decide if this is how she wants to live".

...Appreciate the value of cultivating personal and interpersonal presence

"I'm now able to appreciate the focus on being present, what I believe to be most the fundamental "skill." It allowed me to shift from my usual "doing mode" to being so I could fully appreciate and empathize with what my client is experiencing."

"I learned the difference between being fully present with the client in comparison with just relating on a cognitive-matter-of-fact level."

"I have another option than being the "expert"—I can sidestep analysis and relate in and from the moment, trusting that what is needed is there, deeper change, more profound engagement."

"I am more capable of creating healing conditions now that I've experienced it. Before I would classify my clients in terms of what was right or wrong (or thinking I knew best). Now I see the value of allowing the client space to grapple with their lives on their own terms."

... Appreciate that our past is alive in the present moment. An awareness of context empowers the therapeutic relationship.

A participants very profound experience of this principle:

“There was the breathtaking sensation when I could actually feel the concept that one’s whole life is alive in the moment of being. I understood this in my body and another dimension opened up...a new door.”

If trainees experience how they bring their past (their context) into the present, they will be able to work with their own disowned experiences and those of their clients that are embodied, enacted or evoked in the therapeutic relationship. In an atmosphere of safety and intimacy, dysfunctional relational patterns can be illuminated, disowned experiences incorporated and new relational patterns can form. This is how the therapeutic relationship can heal.

Another voice:

“I am now aware of how my client’s way of relating may trigger some of my personal issues and how to use this constructively to assist clients.”

And another:

“I have an enhanced awareness as to how we are always in dialogue, unconscious or conscious with the entire story of our life.”

The Final Lesson--Lesson # 5:

If training focuses mainly on developing the person who is the therapist, the trainee will likely develop the personal qualities that determine therapeutic effectiveness.

We took a page from Carl Rogers and appreciated that therapy and training therapists is like gardening, *we can't make something happen* but we can provide a soil, rich in experiences, that supports and nurtures personal growth. We apparently got the mix right. Our participants reported feeling significantly changed by their training experience:

"It's not a stretch to say I'm a completely different person than I was before. I am more confident, secure, and present. I am more centered and at peace, but mostly, I'm more alive."

"I feel emboldened to go further and trust that I am standing on solid ground inside myself. I feel more acceptance and more willingness to risk."

"I have dropped some of my own protections. My heart is more open. The program has challenged me to show up, to walk the talk, to take responsibility for my choices."

And the last voice:

"Where do I even begin? In short, it has been an awakening experience for me. I'm not certain where this process will go, but I am experiencing my being to the fullest, for the first time in a long, long while."

I'll end with a quote from Bruce Wampold, leading therapy researcher:

“An understanding of the principles of **existential therapy** is needed by all therapists, as it adds a perspective that might ...form the basis for all effective treatments” (Wampold cited in PsycCritiques, February 6, 2008, p.6).

What do *you* think?

Thank you very much.