Client centred (also known as person centred or Rogerian) psychotherapy is based on a phenomenological conception of human behaviour:

- Each person has a phenomenal field that is a definition of events or phenomena as they appear to him or her.
- Their field determines a person’s behaviour, and prediction of their behaviour demands knowledge of that field.

Carl Rogers (2003), chief proponent of client centred therapy, has pointed out that values which become an integral part of the individual's phenomenal field may be derived either from direct experience or taken from others.

- Values that are taken over in a distorted fashion from others lead to confusion, unhappiness, and ineffectiveness.

This type of person does not 'know himself', for their organism tells them one thing and their self-concept tells them another. Such an incongruent individual, anxious or vulnerable, is a likely candidate for psychotherapy.

Client centred therapy, according to Rogers, is a process of disorganisation and reorganisation of the self (Rogers 2003). The new organisation contains more accurate symbolisation of a much wider range of sensory and visceral experience, a re-conceptualised system of values based on the person's own feelings and experiences. The client can make the painful disorganisation and reorganisation mainly because the therapist accepts both their old contradictory attitudes and the new and difficult patterns. The client comes to introject the calm acceptance of the therapist and can handle the new and difficult reality perceptions necessary for the reorganisation.

Rogers (2003) has postulated that psychotherapeutic personality change can be and will be affected when the following conditions are fulfilled:

- A psychological contact between therapist and client
- A state of incongruence in the client
- A state of congruence in the therapist
- Unconditional positive regard for and empathetic understanding of the client by the therapist
- The client's perception of the therapist's positive regard for and empathetic understanding of him.
Diagnosis, professional knowledge, and other frequently emphasised characteristics of the therapist are not considered necessary by Rogers, and may, indeed, according to him, be obstructive (Rogers 2003).

**Hypnotherapy and the Rogerian Approach**

Hypnotherapists can most readily employ Client Centred approaches during the rapport building stage of a hypnotherapy session. By the therapist taking a stance of ‘unconditional positive regard’, the patient will come to an understanding that you are there for them, concerned about their well-being and will do what ever is ethically possible to help them achieve a resolution to their presenting problem.

It is important to remain focussed on your patient during a session whilst leaving your own problems, concerns and belief systems outside the therapy session. By taking this approach a good therapeutic relationship can achieved that can ease and facilitate the process of positive change.

**References / Bibliography**


Rogers CR (2004) *On Becoming a Person* Constable and Robinson