Presence: Im-media-te co-experiencing and co-responding. Phenomenological, dialogical and ethical perspectives on contact and perception in person-centred therapy and beyond.

Peter F. Schmid

Abstract. Although this volume appears as the last in the series, it deals with the precondition to the conditions described in volumes 1 to 3. Without relationship and its perception, the other conditions would make no sense. This chapter also links the description of the single conditions and brings them together under a common perspective. It first sheds light on what contact, (or relationship), and perception mean from a dialogical stance. Then it examines their significance for person-centred psychotherapy in particular — on both sides, the therapist’s and the client’s —, how they develop in the therapeutic process and where they are aiming at. A phenomenological analysis deals with different kinds of relationships, their processual nature and the diverse forms of encounter: from the initial encounter of the therapist who meets the client, to a mutual encounter relationship. The quality of an encounter relationship in person-centred therapy leads from contact to presence in the encounter, from (self-)perception to (self-)realisation and (self-)acknowledgement.

Person-centred therapy, be it in groups or in a dyad, describes ‘a way of being with’, which develops from relative one-sidedness to togetherness and from a relatively restricted perception of oneself and the others to a relatively open self concept and view of the others. The therapist’s task is to perceive the client as a person and respond to the client as a person, i.e. to establish and maintain a secure and yet challenging relationship. In doing so, his or her underlying ‘way of being with the client is presence’ in the meaning of dialogical philosophy: The existential foundation for encounter, for this ‘being together by being counter’, is to be there, to be ‘present’. From this point of view, presence can be understood as joint experiencing with the client in the given instant. Furthermore, from an epistemological perspective it is a moment-to-moment-process of joint responding to the given developments, experiences and challenges within the therapeutic relationship, which happens in the ‘kairos’, the fruitful moment. The core conditions of authenticity, acknowledgement and comprehension, carefully described by Carl Rogers and analysed in the three preceding volumes, explain how the way in which the therapist opens up to the revelation of the client in the im-media-te presence. These attitudes also support and foster the client’s striving for self awareness and encounter ability and, in addition, depict the changes clients undergo in such a

CONTACT AND PERCEPTION

relationship in dealing with themselves and others. Together, client(s) and therapists(s) aim for a person-to-person-relationship without preconceived means — co-experiencing and co-responding, thus co-creating a facilitative relationship.

‘In the beginning there is relationship’ (Martin Buber)²

KAIROS — THE FERTILE POTENTIAL OF THE PRESENT MOMENT

In ancient Greece there was the figure of the god Kairós. As the god of the fertile instant, of the favourable opportunity, he was thought to be a young man with wings at his heels, always walking on tiptoe, in the right hand holding a sharp knife, with a thick front mop of hair and close-cropped in the back.³

His wings symbolise that he is flying like the wind, always hurrying. The knife reminds that the favourable opportunity is sharper than any point. The front mop of hair enables anybody encountering him to seize him, when he is hurrying past — but only for one moment! From the back it’s impossible to catch him; once he passed, it’s over: there is no chance to grasp him at the close-cropped back.⁴

This means: if you don’t use a fertile moment, it’s over. Or conversely: the fertile moment is always now. The moment for the change is now and here. The moment to influence the future is now and here. The moment to profit from the past is now and here. There is only one time: the present. Future is the anticipation of what is coming in the present, past is the remembrance — in the present — of what happened. We only live in one time: in the present. We exist here and we exist now.

‘Kairos’ is the Greek word for the quality of time.⁵ The applied meaning of ‘karios’ denotes the existential time of the human being, the subjective meaning of time (while ‘chronos’ means the objective time, which is counted by a watch.) In the bible ‘karios’ is a central term⁶ indicating that every moment is a moment for decision with the chance for encounter.

Kairology, an interdisciplinary science, is the knowledge and art of the right action in the right moment: how to read the signs of the time and how to act according to them. Kairological thinking tries to find out what ‘living in the moment’, grasping the kairos, means existentially. One of its founders was Søren Kierkegaard (1844; 1855), who stressed the fact that always the very ‘moment’ is

². Buber, 1963, p. 604; intentionally and enthusiastically formulated according to the beginning of the Gospel of John (1:1): ‘In the beginning was the Word’; cf. also the first words of the bible: ‘In the beginning God created the heaven and the earth.’ (Genesis 1:1). See Schmid, 1998c (‘Im Anfang war Gemeinschaft’).
³. The original statue of this god stood in Olympia, a copy of it still exists in a monastery in Trogir, Dalmatia.
⁴. In German there is the saying ‘eine Gelegenheit beim Schopf packen [to seize an opportunity at the front mop of hair]’ — More about a kairologic understanding of the person-centred relationship in Schmid, 1994, pp. 201–57.
⁵. As opposite to ‘chronos’, which means the quantitative aspect of time — also derived from a god, Chronos, who wolfed down his children.
the source of change. Thus it is necessary to perceive the moment and to seize it. When we really take the moment seriously, we say goodbye to conventions and patterns and open ourselves up for new sights and developments. As a consequence, taking the moment seriously always demands a decision. Another kairologist, Karl Jaspers (1932), points out that the ‘moment’ is the very unity, the meeting point of history, present and future, of ‘time and eternity’, and therefore life can be understood as continuum of fertile moments. Hans Rotter (1993) emphasises the ethical and social moment of the kairos, which always asks the question: what’s up for decision (for me, for our group, or for society) now?

Person-centred thinking is kairotic, person-centred therapy is a kairological therapy. It has its sources in this tradition of the kairotic benefit of the moment. This stance is opposite to a traditional psychodynamic understanding which comprehends the present only or mainly out of the past, and sees life as a series of reproductions of patterns gained early in life. The person-centred approach also stands opposite to an a-historical thinking which can be found e.g. in behaviour therapy methods. From a person-centred view the present moment is seen as the instant which encompasses past, present and future. The person-centred understanding of psychotherapy is rooted in the experience of the present moment as the fertile possibility to further actualise the person’s capabilities. When we talk about personal presence in psychotherapy we refer to the immediate experience of (two or more) persons encountering each other in a given moment, in a moment-by-moment process in the respective present.

Person-centred therapy understands therapy as ‘relationship or encounter’ (Rogers, 1962, p. 185), where the ‘moment-to-moment encounter of psychotherapy’ (Rogers, 1980, p. 2155) happens in the immediate present. This notion corresponds to the existential attitude of ‘presence’. What follows is my attempt to explore and explain the nature of this relationship, its preconditions and its development from a phenomenological, dialogical and ethical perspective. Both contact and perception, and their development during the therapeutic relationship, will be examined from epistemological and encounter philosophical points of view in parallel throughout this chapter.

FROM CONTACT AND PERCEPTION . . .

Relationship was a central category of person-centred psychotherapy from the very beginning

Carl Rogers and the person-centred approach as such were quite often blamed
for being individualistic, for promoting a one-sided, self-centred, even selfish understanding of the human being. Together with other humanistic orientations in psychology and psychotherapy it was held responsible for supporting an egocentric society, as being ‘typical US-American’.

To refute this reproach, advocates of Person-Centered Therapy often divide Rogers’ work into two main periods: the individualistic one, with concentration on the self and single therapy, and the encounter-oriented one with the main focus on the relationship and on groups, large groups and political issues. Although it is obvious that Rogers put much more attention to the individual in the beginning, this argument ignores the fact that his basic statement, published in 1957, implies both essential dimensions of an image of the human being as a person, the individual and the relational one.8 The first of his six well-known ‘necessary and sufficient conditions for psychotherapeutic personality change’ already deals with the interpersonal relation, stating that therapist and client must be in ‘psychological contact’. Rogers himself said9 that he originally wanted to use the term ‘relationship’ instead of ‘psychological contact’, but was afraid he might lose academic recognition and thus made use of the term only in the explanatory text and as a subtitle for the explanation of the condition, not in the formulation of the condition as such: ‘The first condition specifies that a minimal relationship, a psychological contact, must exist. I am hypothesising that significant positive personality change does not occur except in a relationship.’ (Rogers, 1957, p. 96)

The five other conditions define the characteristics of such a relation. All of them include the belief that the human being has the possibility and tendency to develop in a constructive way on the basis of his or her resources, if a certain form of relationship is provided. In other words, the six conditions presuppose that a human being develops constructively on his or her own, if he or she finds him- or herself in a facilitative relationship. Without hypothesising an actualising tendency, which rests on both the individual resources and the ability of relating, the conditions two to six would make no sense.

In this statement we find these two dialectic dimensions of being human described, for which, in the occidental history of theology and philosophy, the term ‘person’ was coined, namely autonomy and interconnectedness (or relationality), independence and interdependence, self-reliance and commitment, sovereignty and solidarity.10 In his precise description of person-centred psychotherapy, in the textbook by Koch, Rogers (1980, p. 2153) explicitly puts these two dimensions, autonomy and relationality, at the beginning of his article: ‘Client-centered therapy is continually developing as a way of being with persons that facilitates healthy change and growth. Its central hypothesis is [1.]

10. This is elaborated in detail in Schmid, 1991; see also 1998a. In the same way Swildens (1999) underlines the dependency on others in the perspective of the person-centred image of the human being: ‘The other is part of one’s self actualising perspective.’ He thinks of this as an implicit precondition to the person-centred approach to therapy and also points out that the unavoidable Other often is opponent first of all. Thus, according to Swildens, conflict, aggression and antagonism are part of our fate.
PRESENCE: IM-MEDIA-TE CO-EXPERIENCING AND CO-RESPONDING

that the person has within himself or herself vast resources for self-understanding and for constructive changes in ways of being and behaving and [2.] that these resources can best be released and realized in a relationship with certain definable qualities.’ (Italics and numbering mine). The fundamental hypothesis of the actualising tendency, which Rogers consistently asserts to be the only axiom, must be seen in the dialectical tension of these two dimensions (Schmid, 1999; 2001b). Whatever other motives might have been important to introduce the term ‘person-centred’ later on, it is obvious and clear that this was done consciously and purposely to denote an anthropology central to the ‘person’-centred approach.11

So the relational dimension of the person-centred approach to the human being, and to psychotherapy, was formulated from the very beginning.12 It was taken for granted in acting in a non-directive, client-centred way, even if its theoretical conceptualisation as encounter, and its practical differentiation in multiple forms of acting were elaborated only in later periods of the development of the paradigm. That the focal point was on the individual aspect at first, must be understood as necessary for historical reasons, particularly in rejecting the psychiatric, psychoanalytic and behaviouristic models.

The centrality of the relational conception is underlined by the fact that Rogers (1957, p. 96) speaks of ‘contact’ as a precondition. In other words: Contact — relationship — is the underlying essence of a person-centred approach as being truly an ‘approach’, a way of moving towards somebody.

This makes clear that person-centred psychotherapy is the relationship therapy (see Zurhorst, 2001), because it ‘works’ with the relationship only. All other forms of therapy have additional methods, skills, practices etc. and only ‘use’ the relationship ‘in order to . . .’ (if indeed they acknowledge it at all). The person-centred way does not take the relationship as a precondition for special forms of treatment in addition to it, but as a precondition for the conditions who specify the kind of relationship as such. This is a fundamentally important difference and separates person-centred psychotherapy essentially from all other therapeutic orientations. It is also the core distinction between genuine person-centred therapy and other forms of therapy which claim to be in the Rogerian tradition.

Contact means touching and being touched

This raises the question, what do contact and relationship mean exactly in a person-centred context?

Rogers (1957, p.96) specifies ‘psychological contact’ as ‘a minimal relationship’. He defines that contact means that ‘each makes some perceived difference in

12. E.g. in a manuscript from 1955 (quoted in Schmid, 2001a, p. 214f). Rogers gives a process definition of the person where relationality and individuality can be found as the two characteristics of the person. (More material on this can be found in Schmid, 1994, p. 107.) — In 1940 at a lecture he later considered to be the ‘birthday’ of the person-centred approach Rogers (1942, p. 30) said: ‘For the first time this approach lays stress upon the therapeutic relationship itself as a growth experience . . . In some respects this may be the most important aspect of the approach we shall describe’. (Details on the use of ‘relationship’ and ‘encounter’ by Rogers and others see Schmid, 1994, pp. 172–82.)
CONTACT AND PERCEPTION

the experiential field of the other. Probably it is sufficient if each makes some "subceived" difference, even though the individual may not be consciously aware of this impact. (Ibid.) This means that it requires at least some openness, some capability of awareness, of being able to be influenced by the Other.13

'Contact' means 'connection'; to have 'psychological contact' denotes to enter a relationship or to be in a relationship. Etymologically 'con-tact' (from Latin 'contactus') means 'to be in tact together', to be tuned, to be tuned in. It derives from Latin 'tangere' respectively 'contingere' which mean 'touch closely, border on, be contiguous to',14 which shows the term's original bodily meaning. In addition, the substantive 'tactus' means 'feeling', 'sensibility' (hence 'tactful' and 'tactless'). To be tactful means to do the right thing at the right time. The musical meaning of 'tact' ('beat, time') comes from the meaning of 'tactus' as a measure for rhythmic movement — a feeling for tact is necessary when playing together (not only in music).15

So, in other words, and when formulated from an encounter philosophical perspective, to come into contact means to touch and to be touched. Physically touching somebody does not only make a difference to the one being touched but also to the one touching; the same applies to psychological or emotional or spiritual touching and being touched.

The direction of the movement in therapy always goes from the client to the therapist

In everyday life, contact may happen intentionally (think of an individual making a phone call) or unintentionally, i.e. by coincidence (think of two people colliding in a crowd). If at least one of the persons involved is interested in the other one, the contact which came about has a chance of lasting and developing into a continuing relationship.

Psychotherapy does not start out of unintentional collision. It can start with both: either the client addresses the therapist or the therapist 'makes contact' with the client. In most cases it is the client who takes the initiative, but there are also situations where the therapists is the initiator, e.g. in hospitals or prisons. Although the initiative might be different, the 'nature of the contact' has to be the same, if it is to become therapy.

Both client and therapist must be open and ready — the client at least to a minimal degree. If the therapist is open and ready for being touched, the client can touch him and vice versa. If one of them is not open to it and therefore not ready for it, contact will not happen.

When a relationship or contact does happen, both touching and being

13. To emphasise the encounter philosophical meaning, 'the Other' is written with a capital letter.
14. Compare the meaning of 'contact' in electrical engineering. All etymological specifications are taken from Duden, 1963; Hoad, 1986.
15. Duden, 1963, p. 356; Hoad, 1996, pp. 94, 481. It is also of interest that 'con-/com-/col-/cor-/ co-' (from Latin 'con, com' = 'together') is related to 'contra' ('against'), which is built with the comparative suffix '-tero'. The Greek equivalent probably is 'kata', the German ge' (Duden, 1963, 352). The relation of the 'con' and 'contra' and the shift of meaning from 'being together' to 'being opposite to, against' is relevant for the understanding of the meaning of 'en-counter' (see Schmid, 1994; 1998b; 2001a; and also below).
touched—are involved, but when we examine these processes more carefully, it becomes clear that it is always the client who ‘comes first’.

If the contact is the outcome of the client’s initiative, which is the usual procedure e.g. in private practice, the client is the one who ‘touches’ first and the therapist is the one ‘to be touched’ first.

If contact happens on the therapist’s initiative it is still the person-centred therapist who is touched first, when they first get sight of the client as a person. (If not, this will not become person-centred therapy, but some kind of directive treatment, or ‘guidance’ in the sense of the client being guided.) Addressing the client comes out of becoming aware of him or her as a person and thus from the very beginning is a response to the client’s appearance. So, it is the client from whom the movement in the beginning relationship comes, even if the therapist is the initiator of the coming together.

A basic difference becomes obvious: on the side of the client, the only requirement is a minimal openness to sense or experience being addressed and thus to perceive or ‘subceive’ the difference in the phenomenological field by being contacted (as Rogers clearly states). On the side of the therapist the requirement is qualitatively different: he or she must perceive the client as a person and thus ‘be present as a person’ him- or herself. This is the underlying essence of the so called core conditions and will be discussed at the end of this chapter.16

As shown in the etymological note above, contact is always the contact between different ‘ones’, whose ‘tact’ should go together. It therefore should be noted that it only makes sense to speak of contact if there is both difference and equality. The meaning of ‘contact’ in psychotherapy points to the fact that all understanding of therapy is based on the sameness and diversity of (at least) two human beings. What we have in common enables us to empathise and thus to do psychotherapy; what is different between us, stimulates us to increase the sensitivity of empathy and, therefore, self exploration and the development of the client’s identity.

Contact leads to communication

Contact is a precondition for communication (which might happen in a lot of ways, not only verbally). It is impossible to not communicate once there is contact. (In the ‘worst’ case the communication takes place in order to end the contact by purposely not continuing the contact, which itself is also a specific form of communication.)

Communication always aims at a common ground, even if there is no shared aim to have joint action or solidarity. Again it is etymology which helps to understand: ‘Com-munity’ and ‘com-mun-ication’ come from Latin ‘munus’ meaning ‘wall’, and points to people who have a common wall, which means that they share a common ground: they live together. If one thinks of a medieval city, surrounded by a wall, the underlying meaning of commonality becomes immediately clear.

16. The quality of therapy as a response to the client is considered in Schmid, 2001c.
Communication always aims at commonality, at ‘communion’, which means participating in the same. Thus the understanding of communication shows that it is action aiming towards togetherness. It follows that any attempt to separate communication from action does not make sense and the corresponding differentiation between action-oriented therapies and communication-oriented therapies is invalid and artificial. Even therapy by ‘purely’ verbal means is joint acting together, and indeed every form of action is intrinsically communication. Therefore, it is also nonsense to pursue the idea of adding action to communication in therapy. Only an understanding of therapeutic communication which aims at an understanding of it as joint action, and its symbolisation, corresponds to a person-centred comprehension of therapy. This also implies that therapists ‘allowing’ their clients to only talk and (often by merely not being open to anything else themselves) ‘rule out’ any other forms of communication, be it bodily or artistic (drawing, dancing, playing music, acting, writing and so on), are not at all person- or client-centred but most likely therapist-centred: they only let happen what they feel comfortable with, thus limiting the clients to the therapist’s own limits. The same applies to any therapists who force their clients into certain ways of communicating. Therapists should not limit the client’s symbolisation by limiting it to verbalisation or particular styles of verbalisation. Clients should have the freedom to choose their way of expressing themselves and communicating to the therapist (Schmid 1994, pp. 402-404).

Contact also means to keep in touch

The task in psychotherapy is not only to get in contact but also to maintain contact: ‘... these six conditions exist, and continue over a period of time’. (Rogers, 1957, p. 96) Random contacts often disappear as quickly as they appear. For psychotherapy it is necessary to stay in contact and to develop the growing relationship. This means that it is in some cases necessary to actively maintain the relationship as such, in order not to ‘lose’ the client.

To come into contact is the beginning but where does this lead those involved? It could lead in a lot of directions. One possibility might be to control or even dominate the other or the others, which in some cases might derive from being afraid to be controlled or dominated. Controlling the other might be an attempt to avoid this (by applying the same means, but in the other direction). Another possibility is to subordinate the other which is also most likely to be a way of avoiding conflict and anxiety and might be seen as a reverse power struggle. Sometimes the one seemingly controlled is the one doing the controlling as can

17 In my understanding, this is the foundation of why the theory of psychotherapy can adequately and truly be understood and conceptualised as Handlungswissenschaft (‘action science’) — a term introduced by Schelsky (1963) following the expressions ‘behavioural science’ and ‘action research’. In respect to the essence of knowledge ‘action science’ — also as a theory, not only as a practice of action — derives from and relates to action and draws immediate consequences for further action. The theory of psychotherapy is gained from an inductive approach, based on experience, it uses empirical methods, is interdisciplinary in orientation, co-operating with other ‘action sciences’ and human sciences. It does not only analyse and interpret practice, but it imparts orientation for further action, aims at improving further action. Similarly person-centred research intrinsically is action research. (Schmid, 1988c, pp. 164–5)
be seen in the various forms of sadomasochistic relationships. A third way is to negotiate on rules for the relationship, which in most cases is done anyway and without intention.

The way to go in person-centred psychotherapy is to open up for an encounter relationship that is as mutual as possible. It is only feasible to maintain a contact which took place, if at least one of the persons involved stays present. Therefore presence is the goal of contact and is what the core conditions are all about (see below).

**Perception means to take what is offered**

Rogers’ (1957, p. 96) sixth condition states that the ‘communication to the client of the therapist’s empathic understanding and unconditional positive regard is to a minimal degree achieved.’ Perception is what the client ‘takes’ (etymologically ‘per-ceive’ means to take thoroughly\(^{19}\)) from the therapist.

There is an eminent intrinsic connection between contact and perception\(^{19}\) — they require and imply each other. More precisely there are three steps in maintaining a therapeutic relationship: (1) the clients ‘enter the stage’ explicitly, implicitly bring themselves into play as persons in need — the starting and ‘moving’ point, which always is on the client’s side. This is where the ‘motivation’ comes from. (2) It is followed by the initial encounter (see below) of the therapist with the client and — as a response — the therapist’s offer of his presence, i.e. the offer of a kind of relationship characterised by the core conditions. (3) The final step is ‘the client’s perception of the therapist’ (Rogers 1957, p. 99), which means that ‘the client perceives, to a minimal degree, the acceptance and empathy which the therapist experiences for him’ (ibid.) or, in other words, that the therapist’s ‘presence’ makes a difference in his perception.

Like ‘relationship’, ‘perception’ also is a process which develops during psychotherapy on the client’s as well as on the therapist’s side. It will therefore be examined in the following considerations in its importance for both of them. In its full personal way it is ‘personal realisation’ (see below).  

...**TO PRESENCE AND PERSONAL REALISATION**  

**The nature of a person-centred relationship is neither objectification nor identification but intersubjectivity**

What happens after coming into contact? As already stated: relationship\(^{20}\) is not relationship. Human beings have a lot of different possibilities to relate to things, to other humans and to themselves.

1. One way is **objectification**: To make something or somebody an object

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18. For details see Schmid, 2001b, p. 58; for the related ‘ac-cept-ance’ see Schmid, 2001c, p. 156.
19. If one of them lacks therapy is impossible for the time being and pre-therapy (Prouty et al., 2001) might be necessary.
20. Relation derives from Latin ‘relatio’: ‘latus’ is the past participle of ‘ferre’ which means ‘carry, bring’ and ‘move’. Here etymologically the processual quality of a relationship might be seen (Hoad, 1986, p. 396).
CONTACT AND PERCEPTION

means to put it, him or her opposite to oneself (Latin ‘obicere’) and to view it from the outside: look on it, think and talk about it, him or her. To talk about is not only possible if talking about things (e.g. talking about a house) or a third human (e.g. talking about a common friend); it is also possible to talk with someone about him or her. This is the case, e.g. when talking about diseases in form of a traditional medical diagnostic way or talking about somebody’s work or performance, e.g. in school, or talking about somebody’s thoughts and feelings from an outside perspective. The same applies to thinking and talking about oneself. The ability to ‘put oneself outside of oneself’ and look at oneself from an outside perspective, i.e. to objectify oneself, is a basic characteristic of the human being (and, e.g. in therapy, a central source of the freedom to change and deliberately develop in a certain direction). Other terms for this include the ‘excentricity’ of the human being (Plessner, 1928).

In most relationships in everyday life, the objectifying perspective and relationship is the usual one. It is a necessary way of relating and communicating and thus of living one’s life. It is related to what Buber (1923) calls the ‘I-It-relationship’. Here it might make sense to mention that it is a fundamental mistake to devalue this kind of relationship and exclusively estimate the value of I-Thou-relationships. Nobody could live in I-Thou-relationships only, since nobody could evaluate, judge, or make decisions without objectifying.

2. Another way is identification: In identifying I equate myself completely with the other, set myself in the place of the other, I feel like him or her, I think the same way they do, I completely loose distance, there is no moment of opposition or difference. Both merge into one.

3. Fundamentally different from both of these ways of relating is to relate to the other (be it a thing, be it a person) as a whole and in their essence without ignoring my own essence, i.e. keeping the difference. This is called a personal relationship (of which a person-centred relationship, e.g. in therapy, is a special case). In the case of a relationship to another person, it is a subject-to-subject-relationship or a person-to-person relationship. This way of relating traditionally is named encounter (or ‘meeting’).

In this case the proper question for a personal relationship towards a concrete Other is not ‘What is this?’ (as with an object) and not ‘Who is this?’ (as about another individual), but it is ‘Who are you?’ — thus indicating the dialogical nature of encounter.

The differences between objectification and personal encounter become obvious when having a look at those characteristics of such a relationship, which for psychotherapy are held as ‘core conditions’. Such a relationship does not aim to gain knowledge about the Other but rather is concerned to acknowledge him or her thus fostering self-acknowledgement. Encounter itself is furthered by acknowledgement (Schmid, 2001c) — its aim is not to know something about

21. Encounters can be friendly and loving, but also frightening and hostile. I can encounter something or somebody which or whom I experience as a threat, even a life threat. In this case there is no objectification either but rather a ‘being impressed’ and shaken or even shocked deeply in my existence.
22. To meet means ‘come face to face or into contact with’ (from the 13th century on, Hoad, 1986, p. 288).
them but it is a way to connect, to establish contact. Its nature is holistic, it is belief and love instead of certainty and knowledge only. (I can believe that I love or that I am loved or not, but I cannot know this.) In terms of relating to feelings and attitudes of another person, empathy is the way of relating in the personal encounter, while ‘cognitive social-perspective taking’ is the corresponding way of relating in objectifying forms of relationships (2001b). Such a relationship does not aim to be a directional relationship from an expert to somebody about whom an expertise is given, rather it aims to be a relationship between person and person; it is characterised by authenticity (2001a; see below).23

In an encounter relationship the usual active-passive-relation of subject and object is transcended into intersubjectivity: a We-relationship. This constitutes a situation of ‘with’, of ‘co-’, of togetherness.

Although there might be a striving for commonality in an intersubjective relationship the Other is respected as a completely different individual, always having in mind that he or she is truly an Other in the sense of encounter philosophy, not to be possessed or destroyed or ignored (see 2001a, p. 217).

Therefore, encounter always has to do with ‘counter’, but in a completely different way than is the case in objectification. The human being as ‘the being counter’ (Buber, 1986, p. 83) has the capability of having the relationship opposite to the other. To gain distance is a specific human quality — as a precondition for encounter. ‘Being counter’ is the foundation for meeting face to face, to acknowledge, to empathise with. Being counter appreciates the Other in his autonomy and as somebody of worth to be dealt with. Standing face to face avoids both, identification and objectification; it enables encounter. (See Schmid, 2001c)

Whilst Moreno was the first (as early as in Freudian times) to think of aspects of therapy as encounter (1969; see Schmid 1994), Rogers was the first to understand therapy as an encounter relationship in all its facets. In person-centred therapy the client is not only trusted and respected in terms of contents (the ‘what’), but also in terms of the way to proceed (the ‘how’) and the therapist is ‘simply’ their facilitator (i.e. not an ‘expert’). It is very different in e.g. gestalt therapy or classical psychodrama where the therapist is the one controlling the procedure and the specialist who takes the lead on the ‘how’, e.g. regarding the methods.24

To encounter another person with acknowledgement instead of objectifying him or her by trying to get knowledge about the Other, is an essential paradigm

23. Generally, relationship can either be seen as preceding encounter, as a precondition to encounter, as the substratum of what can become fully through encounter, like Buber in ‘I and Thou’ (1923, p. 36) does, or can be seen as the fruit of encounter, when the actual encounter relationship emerges into a latent, lasting relationship (Buber, 1962/63, I; 1963; see van Balen, 1992, p. 170). Relationship can be first, but also spring from encounter. It can be both, disposition and consequence (see Böckenhoff, 1970, p. 434). It can be the space for encounter (‘Begegnungsraum’, Heindler, 1983, p. 299) and the outcome of encounter. Relationship, it follows, can be understood as facilitating encounter as well as resulting from encounter.

24. There is also an essential difference between (unintentional) openness to the experiencing (out of the attitude of encounter) and (intentional) focusing of the experiencing (out of the process expert’s stance of furthering certain processes within the client) or even steering the client’s process by process-oriented interventions. This view categorises person-centred, experiential and process-directive as different forms of therapy (Schmid 2001d; 2002a).
shift in psychotherapy and helping relations of various kinds — it is the epistemological foundation of person-centredness.

Acknowledgement, the personal way of perception as realisation of the Other

The qualitative difference between objectifying and encountering is the way of perception: In an encounter we do not perceive the outside, the ‘seeming’, but the ‘core’: we perceive the essence of what we encounter. This means we do encounter the reality, be it a person or not. Hence the term ‘realisation’ properly describes what personal perception means. Real-ising means to become aware of what really is there (the Latin word ‘res’ means ‘the things’ themselves, as they ‘really’ are; cf. the use of the term ‘realness’ by Rogers to describe the nature of congruence), thus pointing to the authentic being of a person. Personal realisation means to be open for the Other in his or her concrete, typical, unique way of being, in contrast with observing them as an object or on the surface only. In personal realising we touch the Other’s reality; we do not only ‘take’ (‘perceive’) what we see and hear of them, we also ‘take’ what they might be and become. This means to accept them not only in their actual reality but, moreover, in their possibilities. It is a way of becoming aware of somebody in a process of opening towards the Other’s actuality and possibilities. Buber (1984) coined the phrase of ‘Realphantasie’ (‘phantasy of the real’), which indicates that personal perception goes beyond a superficial view and encompasses the open future of the Other. Personal perception is more than getting to know, it is to acknowledge — the personal way of realising.\(^{25}\)

It is obvious that such a way of perceiving provides an incredible power of support for the Other’s development. And it also shows that self-realisation is only possible through being realised and acknowledged by somebody else. It marks an understanding of self-realisation as realisation both in and out of the relations in which the individual lives. Self-realisation is never possible without the realisation of the Other. In therapy this applies to both client and therapist.

If the personal perception of the Other is the basis of the relationship, an ethical relation is created. The epistemological paradigm change for psychotherapy achieved by Carl Rogers from knowledge to ac-knowledge-ment and from per-cept-ion to ac-cept-ance on part of the therapist, leads us to understand him or her as somebody who is called to respond by his response-ability to respond. This makes psychotherapy an ethical challenge (see Schmid 2001a; 2001c). The Other is never an object to perceive or to know about, but, as (Gabriel Marcel, see below) puts it, ‘invocation and thus ‘demanding’ a personal response. The Other cannot be understood by a refinement of the methods of perception, they must be understood by increasing the sensitivity of empathy and by increasing the openness of being touched by him or her through their revelation — by what they show and disclose. It is this reverse of the usual order of communication which makes the person-centred way of communicating unique among the therapeutic orientations and justifies the designation ‘non-directive’.\(^{26}\) In the

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process of therapy the client’s response-ability grows and the therapist’s ‘responses’ more and more become co-responses of the client and the therapist to the experiences in the relationship.

Taking a closer look at the core of person-centred theory, as expressed in Rogers’ 1957 statement, we find that its ethical foundation is already included here: Psychotherapy means responding to the client’s incongruence (the second and often ignored necessary condition!), to a vulnerable or anxious person. Even more: If these six conditions are necessary and sufficient for a constructive development of the person by means of psychotherapy, then it is an obligation for the therapist to take them into account (contact, client’s incongruence, communication of therapist’s attitudes) or to offer them respectively (congruence, unconditional positive regard, empathy). (See Schmid 2002a)

**Approaches to understand an encounter relationship**

The nature of an encounter relationship has been examined closely by personalistic or encounter philosophy. Some examples of outstanding thinkers might give an impression of its meaning and lead to deeper understanding.

*Romano Guardini* (1885–1968) understands encounter as an amazing meeting with the reality of the Other. According to Guardini (1955), encounter means that one is touched by the essence of the opposite. To let this happen, a non-purpose-oriented openness, a distance which leads to amazement, and the initiative of man in freedom, are indispensable conditions. In interpersonal encounter, affinity and alienation can be experienced at the same time. Encounter is an adventure which contains a creative seed, a breakthrough to something new. The relationship ‘centres in the Other’.

According to *Paul Tillich* (1886–1965), with whom Rogers entered into an open dialogue as he did with Buber (Rogers/Tillich, 1966), the person emerges from the resistance in the encounter of the Other: if the person ‘were not to encounter the resistance of other selves, then every self would try to take itself as absolute. ... An individual can conquer the entire world of objects, but he cannot conquer another person without destroying him as a person. The individual discovers himself through this resistance. If he does not want to destroy the other person, then he has to enter into a community with him. It is through the resistance of the other person that the person is born.’ (Tillich, 1956, p. 208)

*Bernhard Welte* (1906–1983) sees the ‘art of encounter’ as a loving struggle between words and counter-words, as a creative act in which it matters to bring one-self into it in dialectic awakening ‘in the flash of the contact’, to open up and to expose oneself, but on the other hand to ‘let yourself be you’. (Welte, 1966)

*Gabriel Marcel* (1889–1973) emphasises that the Other has always been there in advance: It is only in (bodily) communication with the Other that I am. *He* (the object which I talk to you about) is not capable of responding, but *you* respond — to you I am responsible. What we talk about is the object. You are never an object, but invocation and presence. I can judge objects, but in you I

27. For the central characteristics of an encounter relationship see Schmid, 1988b; 1994, pp. 273–8; see also 2001c.
CONTACT AND PERCEPTION

have to believe. You are only accessible through love. In particular, Marcel (1935; 1978) protests against the objectification of the body.

According to Frederik J. J. Buytendijk (1887–1974) encounter can be illustrated as a game: both are characterised by the oscillation between closeness and distance, opening up and closing up. Buytendijk (1951) emphasises that the loving encounter with the person opposite, in acting and in devotion, needs reciprocity and equality, even if this is hardly ever completely realised.

Martin Buber (1878–1965) is convinced that being a person is constituted by the event of encounter or dialogue, of communicating oneself. He defines encounter as the immediacy of the I-Thou-relationship, an event in which one becomes presence to the Other. The I is not constituted until such an encounter relationship: ‘The I becomes through the Thou. Becoming an I, I say Thou.’ (Buber, 1923, p. 18) ‘All real life is encounter.’ (Ibid.) Therefore encounter is where dialogue happens.

Emmanuel Levinas (1905–1995) stresses in a much more radical way than Buber the ‘absolute being-different’ of the Other. He extends and understands encounter as a Thou-I-relationship, where the Thou must never be used for the I, denoting an ethical foundation of encounter and philosophy which is in contrast to the traditional occidental understanding which according to Levinas is mere ‘egology’. Furthermore Levinas (1961; 1974; 1983) makes clear that such relationships are never isolated and must not be seen relatively contained but embedded in the reality of many relationships that each individual lives in, and in society as a whole. This is why ‘the Third One’ comes into play — a cipher for the necessary We-perspective of encounter: There is not only one Other, there are many Others (including the Others of the Others). Therefore how to act is no longer obvious, and the question of justice and the necessity of judgement arise. This provides space for freedom and makes it necessary for us to distinguish and to decide.

Initial and personal encounter — from experiencing to co-experiencing and co-responding

It might be helpful for the understanding of the nature of the therapeutic relationship that the very core of encounter is the same with persons as it is with other realities. We encounter e.g. nature (think of a sunset at the sea or in the mountains) or art (think of a painting, of music or of theatre). Böckenhoff (1970, p. 426) distinguishes between encountering the reality of things (‘Wirklichkeitsbegegnung’) and a Thou (‘Du-Begegnung’). Both have in common that there is this moment of the principled otherness of the Other and of surprise by the unknown. This helps in understanding that for an encounter relationship it is not necessary to be mutual. The therapist can encounter the client although the client might not encounter the therapist (but maybe busy with examining him- or herself or investigating the therapist’s intentions. The mere fact that the therapist on his or her part encounters the client makes a difference to the relationship and thus to the client and his or her perception (if it does not, and until it is, according to Rogers’ statement, therapy aiming at personality development will not be possible).
Yet such ‘initial encounter’ has to be transcended into a personal encounter relationship, finally aiming at a reciprocal, mutual encounter relationship.

On further investigation the phenomena of encounter, differences in encounter experiences and encounter relationships can be found. For the sake of the clarity of terms, we have to distinguish between the ‘Thou-encounter in the beginning’, as experienced by an unaffected child, and the ‘personal encounter’ which only becomes possible through reflection. At first there is the initial encounter which can transcend via an objectifying intermediate phase into personal encounter.

1. The initial encounter is often compared with lightning. It simply happens. The situation is ‘given’. It seems to occur by coincidence. English ‘co-incidence’ (from Latin ‘co’ and ‘cadere’: ‘to fall’) like German ‘Zu-fall’\(^{28}\) indicates that the underlying experience is something coming from the outside which hits or strikes me. An example for this kind of encounter phenomenon is when you walk down the street and suddenly, one out of the hundreds of other people just ‘catches’ your eye. Similarly, lightning strikes when you fall in love — the stage of amorousness is an initial encounter relationship. A typical paradigm for an initial encounter relationship is the mother-child-relationship. In therapy this is the first ‘im-pression’ a therapist gets from his client, before reflection.

2. It is important to be aware that only after a ‘step back’ from the ‘initial encounter’ into an objectifying position is a mature encounter relationship — a ‘personal encounter’ — possible. After the ‘naïve’ beginning and, in the light of experience, we can look at somebody, analyse and critically reflect. This happens when being in love changes to loving — critical reflection takes place and changes the nature of the relationship.

This is particularly important for psychotherapy and counselling. After the first ‘strike’ there must be reflection about what happened. Just as it is necessary for the therapist to be impressed by the Other, to be astonished and questioned, so it is equally important to reflect on this. (In later states of therapy this might well happen together with the client, in earlier stages it is often the task for the therapist alone.) The necessary input for the client is when they can see that (self-)experiencing is followed by (self-)reflection. Since clients in most cases tend to view therapists as a model of treating oneself and others, the more the client can see this through the transparency of the therapist, the more facilitative it is for the client. Only after this does a mature encounter relationship become possible in a professional therapeutic relationship. The moment of reflection does not only take place in the therapist’s supervision of his therapeutic relationships but also within the therapeutic relationship itself — most often in quick succession: being affected and reflecting cannot happen at the same time, but happen quickly, after one another. What I just experienced makes me reflect and the outcome of that reflection leads to new affecting experiences, and so on.

In therapy and counselling, experiencing and reflecting alternate with each other and become more and more co-experiencing and co-reflecting and in this they are co-creating the relationship and the persons.

The closer reflecting follows experiencing, the more this is a holistic process.

\(^{28}\) ‘Etwas ist mir zuge-fallen.’ (=”It fell to me, was assigned to me.”)
and feels as ‘one whole step’. (In this light, merely cathartic therapies with the one-sided stress on action and experience, e.g. some body therapies, miss the importance of a personal process by avoiding or omitting the reflection, thus fostering ‘actioning’ or ‘living without thinking’. On the other hand therapies in which there only is reflection lack the experiential part, thus supporting ‘rationalising’ or ‘thinking without living’.)

It is ‘you’ whom I encounter, and after that it is ‘he’ or ‘she’ whom I think about — not in order to overcome this experience but in order to integrate it and to facilitate the further relationship. (Therefore ‘you’ never become ‘it’ in the process of an encounter relationship which stays in the present moment.)

Whether an encounter is deliberately chosen (as in therapy to work with somebody) or whether it happens ‘by coincidence’, the initial encounter happens beyond freedom, decision and responsibility. After this, reflection provides room for freedom and responsibility.

Also, by this process correspondence, ‘co-respondence’ is sought for between my experience and the other person’s experience, on the one hand tuning me into the experience of the Other, and on the other hand ‘separating’ my experience from his or hers and ‘separating’ my perception from the other’s perception of his experience. As already stated this is a process of real-isation, of checking experience with reality. It is what congruence is about and what genuineness is about (Schmid, 2001a). As the term shows, this striving for ‘co-respondence’ is a way of responding together to a given experience.

3. After this ‘stage’ of reflection a new way of encountering becomes possible. It is encounter out of responsibility due to the newly gained freedom by reflection. The Other becomes a Thou anew. This personal encounter opens up the possibility to deliberately form the relationship which is a way of creating it. This is what Carl Rogers was describing by the formulation ‘therapy as relationship encounter’ (Rogers, 1962, p. 185). A typical paradigm for a personal encounter is love between partners. (Schmid, 1994, pp. 111–22) It is only after reflection that the therapeutic encounter enables both, client and therapist, to understand therapy as the co-creation of a unique encounter relationship which aims to strengthen the authorship of the client to enable him or her to ‘create’ their future.

Psychotherapy aims to become a mutual encounter — a social and political claim

Whilst person-centred therapy therefore is not simply a personal encounter at the outset, it aims for it. ‘Therapeutic encounter’, then, is reciprocal or at least open to reciprocity, even if it is asymmetric. It is a relationship which is equal in value, even if it is not equal in intensity. In the beginning it may be only the therapist who offers a personal encounter, in the sense that what is encounter for the therapist cannot yet be reciprocated by the client. The goal of the therapeutic process, however, is still the full — and thus mutual and symmetrical — personal encounter. In it, both persons face each other as persons freely and in full awareness of their responsibility, and thus, becoming one, on the one hand, and on the other acknowledging each as the Other in his or her essential difference, i.e. being present as persons to each other. Therefore the final goal of
PRESENCE: IM-MEDIA-TE CO-EXPERIENCING AND CO-RESPONDING

therapy is to be surpassed and done away with, to make space for mutual personal encounters. As soon as this is achieved, therapy has made itself superfluous — which is the emancipatory aim of psychotherapy anyway.

One of the most essential foundations of the person-centred approach is that it begins from a ‘We’. In its basic statements it is rooted in the conviction that we are not merely a-contextual individuals. We can only exist within, and as part of this ‘We’. If we don’t pay any attention to that larger ‘We’ and if we are not aware that we are unescapably a part of it, we ignore our roots, our present and our future. This ‘We’ is not an undifferentiated mass of ‘Us’ nor is it a mere accumulation of ‘Mes’; it is a ‘We’ which embraces sameness and otherness.

If we are not aware of this, as soon as we separate an ‘Us’ from a ‘Them’, we begin building a place where all the horrendous things we know, from the human race’s history and present, can happen. An ‘Us’ is created with the possible over-identification of similarities with some people, and the narrow focusing on differences attributed to others who become ‘Them’. Similarities are usually highly valued and differences are frequently seen as negative. ‘Us’ and ‘Them’ is not a contradictory dichotomy but rather an ever changing process within the ‘We’. If we are not aware that each and every one of ‘Us’ is somebody else’s Other we lose the feeling of and the knowledge about our principled interconnectedness. The social and political consequences are obvious.

Person-centred psychotherapy tries to bridge the differences among us by respecting and holding in high esteem otherness and diversity. Encounter is the proper kind of relationship for this.

By its nature especially the group tends to overcome one-sided forms of encounter, because the strict separation between therapist and client does not exist. Therefore the group can justly be called an ‘experiential community’ (Bebout, 1971/1972), where mutual co-experiencing takes place.29

‘Psychological contact’ already starts with at least a minimum of mutuality. It requires at least some openness, some capability of awareness of being able to be influenced by the other. Person-centred therapy is the kind of encounter relationship which, starting at some point of more or less (even almost complete) impaired mutuality and openness, strives towards full mutuality. Experiencing becomes co-experiencing; its symbolisation and communication become more and more congruent which is achieved by a joint process of checking; perceiving becomes realising and co-realising, encounter becomes a common experience; the person-centred relationship moves towards a mutual personal relationship. This is fostered by authenticity, acknowledgement and comprehension, which themselves are furthered by an openness to experience in a facilitative climate. The underlying way of being and developing the relationship towards mutual personal encounter is truly called presence in a kairological sense.

Presence: Co-creating the therapeutic relationship

‘Presence’ is the proper term for the ‘core conditions’ in their interconnectedness

29. More on the importance of the group, on group encounter and the social and political dimension in the three volume handbook by Schmid (1994; 1996; 1998c); see also 2000; 2001a, pp. 228–30; 2001b, pp. 65–6; 2001c, pp. 166–8; 2002c.
as the way of being and acting of the therapist. If one takes a closer look at the three 'core conditions', as described from a dialogical and encounter philosophical stance in the preceding volumes, and the light shed on them in the context of the 'We'-perspective, one can easily see that they are phenomenological descriptions of what 'presence' is all about. These 'core conditions' only can come into play if (1) there is a minimal contact between an (incongruent) client and a therapist, which is developed into an encounter relationship, and if (2) the client is perceiving the therapist's offer of this relationship, thus realising that he or she might develop out of so far unrealised resources.

The basic attitudes of authenticity, unconditional acknowledgement and comprehension can thus be understood as encounter conditions.

1. In its openness to the given moment, presence fosters authenticity. Authenticity (Schmid, 2001a), means that the person (the therapists as well as the clients) is regarded and trusted as his or her own, genuine author in the relationship to themselves and to the others. Being authentic is a precondition to enter dialogue — the way of communicating between persons where the Other is truly acknowledged as an Other, who is opening up, revealing him- or herself. Thus, in an epistemological perspective, authenticity is the foundation of personal and facilitative communication.

2. To expose oneself to the presence of the Other means to be open to being touched existentially by another person's reality and to touch his or her reality. Thus comprehension (Schmid, 2001b) points to psychotherapy as the art of not-knowing, i.e. the interesting and challenging part is the unknown and not-yet-understood. From a personal perspective to be empathic generally means to bridge the gap between differences, between persons — without removing the differences and without ignoring them. In expecting the unexpected, empathy is the epistemological foundation of person-centred therapy.

3. In its careful respect of the other persons as truly being Others and at one and the same time being aware of the commonality of the basic and unescapable 'We', presence furthers acknowledgement. Acknowledgement (Schmid, 2001c) without conditions, is a pro-active way of deliberately saying yes to the Other as a unique person. It means the person as such is 'ap-preciat-ed' in his or her worth and dignity — esteemed as a 'precious' being. It aims towards a mutual acknowledgement as persons instead of knowledge about another. The presence of the Other which always 'comes first' is a call for a response (cf. Schmid, 2001a) from which I cannot escape, because nobody can respond in my place. We have response-ability and we are obliged and responsible to the Other and owe him or her an answer — making a 'priority' of the Other. And from the response follows responsibility which is grounded in the fact that nobody else can respond instead of me in a given situation. Thus, the ethical dimension of encounter is denoted.

To sum it up: presence means to confidently take part in the present moment of life. In a relationship it means to jointly learn from, and to respond to, what just happened, to jointly experience the presence and to jointly create the future. Presence is the kairotic quality.

**PRESENCE: IM-MEDIA-TE CO-EXPERIENCING AND CO-RESPONDING**

**Immediacy takes advantage of the potential of the kairos**

As mentioned above, one of the essential characteristics of an encounter relationship — and thus for person-centred psychotherapy — is the renunciation of preconceived means and methods. Im-media-cy is born through the fact that all ‘media’, that separate us, ‘decay’ (Buber, 1923, p. 19), become unnecessary, surplus (which also expresses that this always is a process, not simply a state). For this it is important first of all to dispense with all techniques and methods, all means that serve as a protection to defend against what comes across or what is encountered, because encounter lies beyond all methods. It is involvement in the immediacy of the experience of relationship. Only when this is achieved does presence become possible.

The person-centred approach not only rules out, on part of the therapist, any conception of oneself as an expert on the problems, or on the person, of the ‘partner’ in counselling and therapy; it also rules out that the therapist considers him- or herself to be an expert in the correct usage of methods and means, and even excludes any preconceived use of methods and techniques31, which is not rooted in the immediate experience of the relationship.

A person using preconceived methods is relating to the past not to the present, a person using techniques ‘in order to’ achieve something is relating to the future not to the present. Such a person is not in relation to the person he or she is encountering right here and right now. Presence is im-media-te. It is the encounter person to person, co-experiencing without anything in between. It is because of this that it seems to be so challenging; both frightening and fruitful. The only ‘means’ or ‘instrument’ employed is the person him- or herself.

Therefore the person-centred approach differs radically from those other approaches both in therapy, education and in many other fields of life, which in the meantime have all more or less found their way to the core conditions of authenticity, unconditional positive regard and empathy described by Rogers. However, these approaches consider Rogers’ conditions only as a preparatory scheme or design meant to establish a certain climate or rapport, as obviously-human preconditions, so to speak, upon which the actual therapeutic work still has to be constructed. For the person working in the person-centred field the realisation of these basic attitudes, means that no further supplementation by specific methods and techniques reserved for the expert is necessary. ’Expertism’, if such a thing can be described, lies exactly in the ability to resist the temptation of behaving like a traditional expert (even against the client’s wishes). Or to put it in Rogers’ words: ‘The client is the expert’ — or even more radical — ‘Dammit, we have the best resource for knowledge right there in the other chair’32 (meaning the client). The task of the therapist is to take the risk: not to ‘make’ experiences but to co-experience with the client.

To encounter a human being means to give them space and freedom to develop themselves according to their own possibilities, to become, and to be fully the

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31. The notion of the terms changed drastically. The original Greek meaning of the term ‘method’ [‘méta hodós’], meant: ‘to be on the way with somebody, to follow somebody’, the original meaning of ‘technique’ [‘techné’] was ‘art’.

32. E-mail by John Shlien, Oct 27, 2001.
CONTACT AND PERCEPTION

person he or she is able to become. On the one hand this is opposed to any use as a means to a particular end or any ‘intention’ and on the other hand it is also opposed, to interaction based on a role or a function.

In the ‘way of being with’ called ‘presence’ the relationship becomes realisation, and realisation becomes relational: in a certain sense ‘contact’ and ‘perception’ unite.

Encounter means risk and daring. But it also provides the chance to receive the gift of the revelation of another person and the possibility of full personhood. The existential and im-mediate presence as understood by encounter philosophy, the personal being-with which leads to a togetherness, means that in his or her psychophysical presence, the person who offers a person-centred relationship opens up to his or her partner(s), the possibility to concentrate on the fertile instant and thus on oneself and his or her relations. In the kairos, out of a basic attitude of wonder, astonishment and amazement, it is important to take advantage of unrealised potential and to seize the opportunity of personalisation, of becoming a person.

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PRESENCE: IM-MEDIA-TE CO-EXPERIENCING AND CO-RESPONDING


CONTACT AND PERCEPTION


Phenomenological and experiential perspectives. Chapter Â· January 2007 with 3 Reads. Publisher: Palgrave.Â This was defined as a feeling of profound contact and engagement with another, in which the therapists experienced high levels of empathy, acceptance and transparency towards their clients, and experienced their clients as acknowledging their empathy and acceptance in a genuine way. Participants were primarily experienced person-centred therapists, five of whom were female and three of whom were male. Data was gathered through the use of qualitative, unstructured interviews within the broader framework of a person-centred and phenomenological methodology. Person perception refers to the various mental processes used to form impressions of other people. Learn about the ways person perception takes place.Â For example, if you learn that a new co-worker is very happy, you might immediately assume that she is also friendly, kind and generous. As with social categorization, implicit personality theories help people make judgments quickly, but they can also contribute to stereotyping and errors. Was this page helpful? Presence: Immediate co-experiencing and co-responding. Phenomenological, dialogical and ethical perspectives on contact and perception in person-centred therapy and beyond. Article. Peter F. Schmid.Â From this point of view, presence can be understood as joint experiencing with the client in the given instant. Furthermore, from an epistemological perspective it is a moment-to-moment-process of joint responding to the given developments, experiences and challenges within the therapeutic relationship, which happens in the ‘kairos’, the fruitful moment.