

Editorial – Third edition of the Psychotherapy and Counselling Journal of Australia (PACJA)

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Creating a professional identity is a long process beginning with the establishment of a disciplinary base, the development of education and training, the consolidation of professional organisations and, finally, government and societal recognition. One of the challenges for psychotherapy and counselling in Australia is to establish our identity within the context of an already busy mental health field. What is it that defines us? What are our disciplinary and professional bases? What are the challenges to recognition? This edition of PACJA is dedicated to these questions at both theoretical and practical levels.

Leading this conversation, Elizabeth Day's article outlines the philosophical bases of the profession and their implications for both research and practice. Her argument is two-fold: first, it is important to establish the methodological and theoretical foundations of the discipline in order to anchor its claims to legitimacy and; second, orienting ourselves to the subjective field of meaning, drawing on the humanities and social sciences, means the profession clearly distinguishes itself from psychology and psychiatry who have both adopted a more positivist methodological model as the evidence base for their professions. For Day, the "common factors" research demonstrates the importance of the relational dimension of therapy – specifically, that it is the relationship with the therapist rather than the paradigm s/he is working within that constitutes the basis for healing (Hubble, Duncan, Miller & Wampold, 2010) – and this calls for approaches that focus on the inter-subjective and on meaning. Day contends that while there is utility in the science-practitioner model, and in the classical empiricism on which it relies, we can and should enrich our field with phenomenological and ontological insights, and to this, I would add, with social and critical theory too.

A decade ago now, Melbourne University Professor of Psychiatry, Sidney Bloch urged that the training of doctors and psychiatrists include schooling in the humanities and the arts. The idea being that the cultivation of empathy is enhanced through an immersion in art – particularly literature, but also painting, poetry and music – where poignant, jarring and illuminating accounts of the human condition are given voice. For Bloch empathy is the "*sine qua non* of all healing responses" (2004, p. 124). This contention is, of course, not new. Indeed, the father of psychotherapy Sigmund Freud insisted that a thorough training included the study of history, archaeology, philosophy and literature. And while this may be too ambitious a project for ordinary undergraduate training, it is still

something to be aspired to and woven in where possible. For Bloch, "...clinicians with a passionate interest in the arts are particularly well placed [to teach empathy], since they are readily acquainted with the corpus of artistic works from which to draw salient material for their purposes. They should do so in conjunction with their colleagues in the humanities departments and with practising artists." (2004, pp. 124-5). In the context of an emerging discipline and profession, Day argues that inclusion of the humanities and social sciences, will bring richness and depth both to our discipline and to our practice. Let us embrace this more dimensional and interdisciplinary lens!

Ione Lewis continues the conversation giving us an account of the history of the Psychotherapy and Counselling Federation of Australia (PACFA), including its early incarnation, its leadership, key goals, accomplishments, and ongoing objectives including, most especially, government recognition. As the immediate past President of PACFA Lewis is well positioned to offer an insider's view of the organisation. As she says, hers is an important history given that this knowledge is currently embedded in the minutes of meetings and in various PACFA reports and government submissions. Lewis identifies what is unique to psychotherapy and counselling, again distinguishing our field from other mental health professions such as psychology and social work. As she points out, psychotherapists and counsellors work holistically, pose less risk to the public, are more rural and regional (and therefore capable of meeting an existing gap in mental health care in Australia), and are increasingly tertiary educated.

Notwithstanding PACFA's accomplishments at establishing ethical and professional standards for training, a national register of qualified practitioners, and the development of research – including, importantly, this journal – psychotherapists and counsellors are still not recognised by government. As Lewis outlines, psychotherapists and counsellors are defined as unregistered health professionals and have no access to Medicare provider numbers under the government's 2006 *Better Access initiative*. For Lewis, this low level of recognition continues despite PACFA's strong lobbying of government given the professional dominance of psychology and social work and the government's fear of rising health costs. In addition to government recognition Lewis contends that one of the key challenges ahead for PACFA is keeping abreast of technological changes, and, in particular, the shift to digital forms of therapy and pedagogy, generating the need for ongoing revision of ethics and training.

Denis O'Hara and Fiona O'Hara weigh into this debate with an overview of the state of psychotherapy and counselling in Australia linking theory, practice, professionalisation and recognition. They identify the knowledge and skill base informing the practice of psychotherapy and counselling and then link this to Myers and Sweeny's (2001) criteria for defining a practice as a profession. O'Hara and O'Hara identify the remaining work for gaining both government and broader social recognition (and these are, of course, linked). Principally, this rests on three things: first, the consolidation of the peak professional bodies PACFA and the Australian Counselling Association (ACA) into one (which has now occurred with the Australian Register of Counsellors and Psychotherapists (ARCAP)); second, legal protection of the terms "counsellor" and

“psychotherapist”, and therefore the establishment of co- or statutory regulation (rather than exclusive self-regulation) and; third, inclusion in the government’s Medicare rebate scheme.

For O’Hara and O’Hara the exclusion of psychotherapists and counsellors from the government’s *Better Access Initiative* in 2006 is the key problem blocking both government and societal recognition on the one hand and financial remuneration on the other. Although, as they repeatedly point out, inclusion in Medicare shouldn’t constitute the basis of professional recognition – this ought to be grounded in the acquisition of qualifications and skills on the one hand, and membership of our key professional organisations (PACFA/ACA) on the other – in practice, it is. As they note, the exclusion of psychotherapists and counsellors from Medicare sends a message to the community that psychotherapists and counsellors lack the requisite professional standing and status – in effect leaving an educated and credentialed workforce out in the cold.

John McLeod’s article shifts us from the politics of the profession back into the therapy room with his analysis of the client preferences literature. McLeod shows that client preferences are brought to bear on therapy outcomes. Taking a relational perspective, McLeod’s review of the research, including his own, demonstrates the veracity of “common factors” research with the twist that clients do better when the therapy matches their expectations. It’s not simply that all therapy works equally, then, what the client preferences literature shows is that the match between expectation (or preference) and service generates a stronger therapeutic alliance, a lower drop-out rate and better outcomes.

Matching clients with the therapy they want – whether that be a type (CBT or psychodynamic) or a style (more or less interventionist) helps generate more successful therapeutic outcomes. There are complications, of course; people don’t always know what they want or would prefer, especially if what is available is not clearly understood. Clients may not always know what they are “missing” if they haven’t experienced, for example, dream analysis or journaling and, as such, it cannot form a preference. Nonetheless, McLeod contends that this research demonstrates the importance of the client in generating therapeutic outcomes and, like other fields such as medicine, constitutes a therapeutic intervention in and of itself in that it centres the client’s perspectives. McLeod’s article extends the theoretical and conceptual work of client preferences by engaging in the nuanced field of how clients articulate and therapists respond to preferences. For McLeod, this requires therapist openness and transparency about what they’re offering and sensitivity to the client’s everyday life.

Michelle Webster and Julie Fitness’s article increases our understanding of client “emotional signatures” through the development of a new scale, the Annandale Emotional Signature Scale (AESS), designed to assess the psychological constructs of abandonment and annihilation. These categories are identified as distinct though overlapping and clearly define a client’s emotional style and, in turn, his or her relationship with the therapist and vice versa. This scale is anchored in the theoretical and clinical work of Emotionally Focused Therapy with a view to facilitating improved

therapist/client interactions and outcomes. Testing their scale across three different sample groups – students, clients and therapists – yielded consistent results. What they found was strong support for each profile, with key differences in emotional styles (and some overlaps too). Whereas clients with an abandon profile do best with demonstrations of therapist empathy; clients with an annihilate signature experience emotion as threatening and do best with a more factual and direct style of engagement.

In this third edition of PACJA, we also introduce a new non-refereed section with papers by David Tacey and Frankie Merritt. This section opens out scope for publishing conference papers, critical commentary, student work and more. Tacey was a keynote speaker at the PACFA 2014 conference with his lecture “Spiritual Connectedness and Healing”. In his article we see a uniquely Australian perspective on the discipline, which traces both a personal and a social history for the role of spirituality within psychotherapy and counselling. Lamenting the loss of the spirituality from social life with institutional secularisation in the mid-twentieth century, Tacey outlines personal encounters with “the spiritual” via Aboriginal people and culture. For Tacey, while much lip-service is paid to the importance of spiritual life, in fact, there are precious few places in contemporary western society where (non-Church going) people can go for answers to, or engagement with, the big existential questions, and so this often falls to the health professions like psychotherapy and counselling, many of whom are ill-equipped to deal with it. Making a plea to the profession, Tacey urges us to centre the spiritual in our everyday practice and connect patients back to the numinous and, in turn, to their own healing journey.

Tacey’s argument is a version of the same problem outlined by Day: there is a pronounced gap in our understanding of human needs that is not met by the existing medical model. For Tacey, secularisation has burdened the individual with the problem of generating meaning and of having to do so from an alienated locus. This, in turn, can precipitate emotional and existential crises or, conversely, fail to ameliorate these crises when they arise. Contrasting this predicament with the ancient Aboriginal culture, Tacey identifies the egocentrism and immaturity of contemporary western culture.

Frankie Merritt offers an Aboriginal Australian voice on the profession with his account of the key themes arising from his research on Aboriginal people’s encounter with psychological and counselling services. Merritt identifies the unique role of “resilience” in Aboriginal communities outlining, via a brief exegesis of his PhD research, the central role psychology has to play in offering culturally sensitive – and indeed “culturally safe” – services. Part of this process is increasing awareness of the implicitly Eurocentric/colonising paradigms used by (white) counsellors and their uncritical imposition on Aboriginal people. For Merritt, it “...is vital therefore to challenge disciplines to decolonise”. Both the disciplines and the professions of psychology and counselling can do so by including and centring Aboriginal voices. Merritt’s voice is a welcome addition to this important process.

Again, in this edition there are two literature reviews and a host of exciting book reviews. The literature reviews are commissioned by PACFA and continue to build the evidence base of our profession while providing important resources for practitioners. In this edition

we include, Nicky Jacobs and Andrea Reupert's, *The effectiveness of Supportive Counselling, based on Rogerian principles: A systematic review of recent international and Australian research* (2014) and Alexandra Bloch-Atefi and Julie Smith's, *The effectiveness of body-oriented psychotherapy: A review of the literature* (2014). There is also an array of book reviews on a range of subjects including hope, mindfulness, the DSM V, mothering and psychoanalysis, attachment, "love bombing" and more.

For Day, one of the exciting dimensions of being an emerging discipline and an emerging profession (in the Australian context), is that we get to define our field. In this third edition of PACJA we offer an exciting array of articles and reviews that do exactly this.

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