

Cultivating Presence in the Therapeutic Relationship

By Maria Stella, PhD, RCC, Contributing Writer

This article explores the power and the value of therapeutic presence in client-therapist relationships. It is my desire to increase awareness of the concept, practice and research on therapeutic presence, and to develop further ideas to improve a therapist's quality of presence.

Psychotherapy is more than just a conversation between therapist and client—it is an encounter between two people with a shared goal of improving the client's life circumstances and offering new ways of thinking and living.

While client goals may vary from learning better communication skills to personal growth and development, research suggests that the quality of therapist-client relationship is one of the main factors contributing to positive therapeutic outcome.¹

So, what does the therapist offer to clients to best promote an effective outcome? Much of counsellors' training in this area focuses on skills and techniques. However, studies suggest that the quality of the counsellor's presence in the therapeutic relationship is the primary element in a foundation for change.²

Therapeutic Presence:

The word presence comes from the Latin *praesentia* meaning "being felt as present" by another. Presence is the way a therapist shows up with a client, the unseen, unspoken connection between the two. Therapeutic presence is not simply a skill, but a quality, or a way of being with another. This quality of being is based on the therapist's ability to bring herself into the room with the client "bearing witness to the truth of another's experience."³ (p. 146).

What does presence look like? First, presence is a process that involves the therapist being open and attuned to the client in the moment; listening with her/his whole being. Second, the therapist is in contact with the surrounding spaciousness—while paying attention to the details there is also a sense of the fullness of experience. Third, the therapist feels grounded and centered within herself/himself. Fourth, the therapist's presence is guided by the intention of being of service to the client's healing journey.⁴

In summary, **"the therapist must be able to fully encounter the client's experience while maintaining the ability to observe his or her reactions and experiences and to act thoughtfully based on the confluence of these aspects of the relationship"**⁵ (p. 178).

Therapeutic presence enables the therapist, through attunement, to connect with the client where he or she is. Attunement first occurs in early nuanced exchanges between mother and baby that create neurobiological changes in both parties. Depending



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on the caregiver being fully present, the infant is regulated in the moment and also learns to self-regulate.

Research has now documented that infants

respond to particular prosody (patterns of stress and intonation in speech), facial expression, movements, and even to "unseen", but felt, caregivers' moods. It is easy to notice that an upset mother will often have trouble calming an upset baby, whereas a regulated caregiver has a soothing effect on a distressed baby. Consequently, co-regulation occurs when (any) two people are well-attuned.⁶

Studies report that when two people are in physical proximity they begin to shape the electrical activity of each other's brain. Also, "other nonverbal signals, including facial expression, tone of voice, gestures, and timing of response, have direct impact" and "it is in this manner that the emotional state of the sender directly shapes that of the receiver."⁷ (p. 277).

The attunement learned in infancy activates the brain to feel the other and be present with another; it is advantageous that the therapist and client develop it in their therapeutic relationship. Geller suggests: "Therapeutic presence can be

healing for the client as they feel met, heard, and understood in a way that allows them to become more present within themselves, as well as deeply and mutually present and connected. This creates a feeling of safety and of being emotionally held as they open to exploring the depth of their experience."⁸ (p. 180).

As clients become familiar with the bodily sensations that communicate what may be difficult for the 'mind' to know, they develop their own agency and become more responsible for their own health and mental well-being.

Geller stresses: **"The cultivation of therapeutic presence is also healthy for the therapist, as they tend to experience greater well-being, emotional regulation, decreased anxiety, reduced burn-out, enhanced internal and interpersonal connection and heightened vitality."**⁹ (p. 180).

Therapists both seem to feel more energized after sessions where they felt fully present as well as feel more available for the next client. Thus, this quality of presence may also help prevent burnout, as therapists do not carry the residual anguish from the people they see.

With presence, therapists learn to become more aware of their own bodily responses to the client's experience, which inform how they may best be helped. Their internal resonance to the client's experience interacts with their professional knowledge and out of that emerges a response right for the unique needs of the particular client seeking help.



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Development of Therapeutic Presence:

Despite the clear benefits of therapeutic presence, the topic has been only minimally explored and counselling psychology programs have yet to offer a systematic approach for teaching presence. So how can trainees and therapists develop and improve their quality of presence with clients? Mindfulness practice has been commonly cited as a means to developing therapeutic presence,¹⁰ and I suggest phenomenological reflection can help improve the quality of their presence.

Mindfulness practice was adapted from ancient Buddhist texts and is now used in the psychotherapeutic world. The practice focuses one's attention on the moment-to-moment experience and its various and ever-changing interwoven physical sensations and mental events. As Sakyong Mipham says: "Total mindfulness means being completely in tune,"¹¹ (p. 56) with what is occurring in the moment. The practice develops the ability to relax in a state of receptivity and availability without being carried away by concerns, judgments or preconceptions. Maintaining receptivity opens one to the vulnerable moments, which allow connection with the essence of another. Thus therapist and client connect through their shared humanity.

Mindfulness not only increases a person's capacity to be present but also regulate one's moods and increases positive affect.¹² A simple momentary shift from mindless reaction to mindful recognition can reduce the power of a stress reaction and its

hold over people. Once a person has stepped out of automatic pilot mode and identification with the stress reaction, she or he has a choice in how to skillfully respond to the experience in the moment. Mindfulness' self-regulatory component and orientation toward "curiosity, openness and acceptance,"¹³ (p. 232) helps the therapist develop therapeutic presence.

Along with mindfulness practice, phenomenological reflection can improve the quality of presence of trainees and therapists. The purpose of phenomenological reflection is to gain insight into a lived experience. By reflecting on the experience of therapeutic presence (or its absence) with a client one becomes aware of all the aspects of that lived experience—both what helped the therapist to be present and what hindered that ability.

Van Manen talks about four elements of reflection: Lived Space; Lived Body; Lived Time; and Lived Other.¹⁴

1. Lived Space is felt space, or the way one experiences day-to-day existence, the landscape in which one moves. For instance, as an overwhelmed client walks into a therapist's office, both the client and the therapist may feel overwhelmed by feelings of powerlessness; this is how one becomes the space one inhabits in the moment.
2. Lived Body, or physical presence, reveals something about how one responds to the critical gaze of a client. A therapist's body or gaze may respond in telling ways; lived body reflection increases self-awareness of bodily sensations/reactions.

3. Lived Time is subjective time as opposed to clock time. Does the therapist-client encounter seem to be speeding up or slowing down?

4. Lived Other is the relationship one maintains with others. How does the therapist attune to, or receive, the other? For example, during an encounter with a particularly anxious client, a therapist may or may not be able to maintain his centre.

By reflecting on these four elements a therapist is able to examine subtle, often unnoticed interactions and improve his overall ability to be present with clients. That is, phenomenological reflection, or inquiry, helps bring to light, details of the client-therapist encounter making explicit whether the interaction was beneficial and providing insight for improvement; thus the reflection can result in a more attuned therapist. Mindfulness practice and phenomenological reflections complement one another in developing and improving therapeutic presence.

Practice of Therapeutic Presence:

My desire to write this article was inspired by the possibility of deepening connection and healing in the therapeutic relationship. Mindfulness and phenomenological reflection are the two areas I suggest therapists explore training, and practice, in order to cultivate presence. Both develop the four categories of presence described by Geller¹⁵:

1. Awareness of one's self in the moment;
2. Being open and receptive;
3. A sense of spaciousness and expanded awareness and perception;
4. The intention of being with the client.

Mindfulness:

Mindfulness helps develop the first three categories of presence: Being aware of one's self in the moment, maintaining openness and receptivity and having a sense of spaciousness and expanded awareness and perception. Mindfulness is a simple practice that involves learning to develop focus and concentration.

There are hundreds of techniques, practices and systems of meditation. I usually begin my practice with feeling my state of being, a simple internal check in. I allow myself to notice what is occurring in the moment and then bring my awareness to the sensations of my body breathing. Noticing the conscious and subconscious mental gossip, recognizing that the attention has swerved from the physical presence of the body and returning to the breath, I breathe in and out of my lungs.

Often one must slow down to a point the mind finds uncomfortable in order to locate awareness in the body. Slowing to a pace where one can observe the sensations underlying one's thought process takes a lot of practice. This process results in being in tune with one's inner world while being open and receptive to another's. Also, using the body, feelings, and mind to increase concentration and seeing sense perceptions as invitations into further mindfulness can open doorways into a larger environmental awareness.¹⁶

Phenomenological Reflection Following a Therapeutic Session:

Phenomenological reflection builds on the previous categories of presence and includes the awareness of one's intention of being with a client while reflecting on therapist-client interactions. The practice of phenomenological reflection processes lived experience. In the Somatic Transformation training developed by Sharon Stanley,¹⁷ I learned many valuable phenomenological reflections that can be used while in session or following a session to embody particular narratives.

While attending to the body-felt sense (the bodily awareness of a situation, or the totality of sensation)¹⁸ I usually recall the uncomfortable parts of a session and reflect on how I managed those feelings in the moment. This is how I work through those feelings while I am reflecting as they still linger from the past interaction. This process allows for new information and insights to come to light and informs the next meeting with that client.

New learning is available whenever I take the time to slow down and reflect. This tends to increase my sense of

competence as well as lead to personal and professional growth. This kind of phenomenological reflection is also helpful in my processing unfinished residue of the suffering from clients I see in my daily practice.

Preparation Prior to Seeing a Client and for Maintaining Presence in the Session:

Geller describes steps to cultivating therapeutic presence prior to seeing a client, or for cultivating the conditions for presence to emerge in therapy sessions, as follows:

- Pause – take a moment to stop what you are doing;
- Relax into this moment by taking a deep breath;
- Empty yourself of judgments, thoughts, distractions, agendas, preconceptions;
- Sense your inner body, bring awareness to your physical and emotional body;
- Expand sensory awareness outwards (seeing, listening, touching, sensing what is around you);
- Notice what is true in this moment, notice the relationship between what is within you (internal environment) and around you (external environment);
- Center and ground (in yourself and your body);
- Extend and make contact (with client, or other)¹⁹ (p. 222).

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This particular practice enhances the qualities of presence through pausing, clearing space and grounding oneself in the moment.

Cultivating and sustaining therapeutic presence requires internal training and an ongoing commitment to personal and professional growth. The practice of therapeutic presence involves fully attending to the experience of yourself and your client, while maintaining the same openness, curiosity, acceptance and love as in an ideal caregiver and infant bond. When this presence is offered, the therapeutic relationship grows into a deep connection that can result in a positive outcome. The ability to be present can be cultivated in students as well as in therapists. As I mentioned earlier, research shows that therapeutic presence brings about "greater well-being, emotional regulation, decreased anxiety, reduced burn-out, enhanced internal and external connections, and heightened vitality,"²⁰ (p. 180). Therefore, integrating mindfulness and phenomenological reflection practices into both academic settings and continuing education for therapists would deepen therapists' quality of presence and thus enhance the client-therapist relationship itself.



Biography

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