HUMANISTIC–EXISTENTIAL PSYCHOTHERAPY
COMPETENCIES AND THE SUPERVISORY PROCESS

EUGENE W. FARBER
Emory University School of Medicine

There has been an increasing focus in recent years on articulating foundational and functional competencies for practice in professional psychology and how a competency-based approach might inform psychology training. With the aim of contributing to the dialogue in this area, the discussion herein explores psychotherapy competencies through the lens of a humanistic–existential perspective and describes implications for psychotherapy training and supervision. Specifically, competencies pertaining to facilitating the client’s experiential awareness and use of the psychotherapy relationship to engender client change are described. Next, the foundational and functional competencies within professional psychology that are particularly salient to a humanistic–existential psychotherapy framework are discussed. Finally, the ways in which a humanistic–existential supervision framework contributes to the development of psychotherapy competencies in trainees is considered. A brief vignette is presented to illustrate the supervision process.

Essential Components of Humanistic–Existential Psychotherapy Competency

The humanistic and existential psychotherapy approaches share a focus on helping clients make the most of their psychological potentialities, though the two approaches differ somewhat in how they conceptualize this focus. Humanistic psychotherapy tends to emphasize the creation of psychotherapeutic conditions for cultivating an innate actualizing tendency that is posited to propel psychological growth (Cain, 2002; Maslow, 1968; Rogers, 1961). Existential psychotherapy posits that psychological vitality and fullness in living spring from one’s willingness both to take responsibility for one’s freedom to choose and to accept that one’s potentiality is bounded by one’s physical, social, and psychological contexts, as well as specific existential givens (e.g., the finiteness of life) with which one must reconcile oneself (May, 1983; Schneider & May, 1995; Yalom, 1980). In this way, existential psychotherapy emphasizes more than does humanistic psychotherapy the tension between possibility and limits, along with the tragic dimensions of the human condition (Bracke & Bugental, 2002; Cain, 2002; Yalom, 1980).
Even with these differences, the two psychotherapy traditions share key foundations based on their rich history of mutual influence and dialogue that, for the purposes of this discussion of psychotherapy competencies, will be referred to herein as humanistic–existential psychotherapy. Among these are a focus on experiential understanding as fundamental for growth and change, and a psychotherapist relational stance of openness, authenticity, and genuineness (Bracke & Bugental, 2002; Cain, 2002; Cooper, 2007). Core competencies that follow from these foundations are: (1) facilitating experiential awareness and (2) using the psychotherapy relationship to promote change. In the discussion that follows, examples from a variety of humanistic and existential psychotherapy approaches will be drawn on to illuminate these psychotherapy competencies within a broadly humanistic–existential framework.

Facilitating Experiential Awareness

Humanistic–existential psychotherapy assumes that experiential awareness is a primary catalyst for human growth (Cain, 2002; Perls, 1973; Rogers, 1961; Schneider & May, 1995; Yalom, 1980), and that an experiential focus can illuminate “in the immediate living moment the ways in which a client pursues or defeats fulfillment” (Bracke & Bugental, 2002, p. 266). As such, a fundamental psychotherapist competency encompasses a capacity to facilitate the client’s process of experiential self-exploration. Emphasis is placed on phenomenological inquiry into what the client is experiencing (Cain, 2002; Cooper, 2007; May, 1983). This involves a highly disciplined process in which the psychotherapist endeavors to set aside explanatory preconceptions, frameworks, assumptions, or biases as much as is feasible to arrive at a description that illuminates the client’s subjective world.

Although a phenomenologically based experiential emphasis is shared across humanistic–existential psychotherapy approaches, this focus is applied in varied ways. For instance, the client-centered psychotherapist strives to sense deeply the client’s experiential world and reflect back what is heard in a way that both empathically captures and deepens the client’s awareness. This process is presumed to facilitate expression of an actualizing tendency in that the client “comes to be—in awareness—what he is—in experience” (Rogers, 1961, pp. 104–105).

In the Gestalt approach, the psychotherapist makes use of active experiments and exercises aimed at intensifying the client’s here and now experience, including how the client avoids or interrupts aspects of experiencing (Perls, 1973). Examples include focusing the client on bodily expressions of experience (e.g., “Are you aware of your hand gestures right now as you talk about these feelings?”), inviting the client to describe the flow of immediate here-and-now experience using the orienting phrase “Now I am aware . . .”, and the two-chair dialogue for exploring conflicts between competing aspects of self experiencing. Each of these tasks aims to facilitate “a wider orientation and greater freedom of choice and action” (Perls, 1973, p. 73).

To facilitate a process called “invoking the actual” (Schneider, 2007; Schneider & May, 1995), existential–integrative psychotherapy uses queries to orient the client experientially to concerns and issues (e.g., “What feels most pressing for you in this moment?”), encourage elaboration of a particular experiential theme (e.g., “What else are you aware of right now?”), and point out discrepancies between what a client says and the process by which it is expressed (e.g., “You say you’re at peace with what happened, and yet you keep bringing it back up. What do you make of that?”). Existential psychotherapy also facilitates awareness of links between client problems and key existential dilemmas in living. For example, the psychotherapist may point out an observed reluctance by the client to avow existential freedom by avoiding responsibility for personal choice (e.g., “I hear you saying ‘I can’t decide,’ but might you really be saying ‘I won’t decide’ because you’re afraid of making a wrong choice?”; Yalom, 1980).

To facilitate experiential awareness, the psychotherapist also must heighten client awareness of avoidance, illuminate the adaptive functions of resistance, and facilitate a working through of resistance to experiential self-exploration (Bracke & Bugental, 2002; Schneider, 2007; Schneider & May, 1995). For example, the client-centered psychotherapist (Rogers, 1961) may empathically reflect a client’s reluctance to explore a particular aspect of experience (e.g., “So you don’t want to let yourself feel sad right now because you’re afraid it will overwhelm you.”). An existential–integrative psychotherapist may “vivify” (Schneider, 2007) avoidance of a given experiential theme by drawing attention to the
avoidance in the psychotherapy process (e.g., “I noticed that when you got in touch with your anger just now you quickly changed the subject.”). Within a Gestalt approach, the psychotherapist might direct the client in a two-chair dialogue that gives voice to a pattern of resistance to heighten awareness both of its adaptive significance and the ways in which it stifles growth (Perls, 1973; Yontef, 2007).

Using the Psychotherapy Relationship

The humanistic–existential approach emphasizes the growth-promoting potential of the psychotherapy relationship (Cain, 2002; Cooper, 2007; Yontef, 2007). Examples of this relational contextual perspective are found in the Gestalt notion that one exists within an environmental field that includes one’s relationships (Perls, 1973), and in the existential concept of a relational world, or *mitwelt* (May, 1983). Within a humanistic–existential framework, competency in using the psychotherapy relationship to engender change is based on the psychotherapist’s capacities for genuineness and acceptance as well as the psychotherapist’s presence in encountering the client.

Being genuine, or relating with what Rogers (1957) referred to as congruence, means that the psychotherapist is authentic and transparent with the client (Cain, 2002; Cooper, 2007). The psychotherapist’s genuineness facilitates “relational depth” (Cooper, 2007, p. 14) by encouraging open dialogue between the psychotherapist and client about both the psychotherapy process and their relationship. The psychotherapist may self-disclose in the context of this dialogue, though skillfully exercises discipline in this process to ensure that the disclosures do not harm the client, are offered only when they serve the client’s growth, and are timed in accordance with the client’s readiness to hear them (Cooper, 2007; Yalom, 1980).

In addition, the psychotherapist is accepting of the client, seeking to “meet” the client in the immediacy of the client’s experience without evaluative preconceptions (Yontef, 2007). Within the client-centered approach, Rogers (1957) articulated the concept of unconditional positive regard, which requires a sustained commitment to cultivating an attitude of deep respect for the client as a whole person, including an acceptance of the client as fundamentally worthy apart from the client’s specific patterns of thought, emotion, and/or action. Importantly, while communicating empathy for client desires for relief from problems, the psychotherapist also conveys respect for client struggles as meaningful efforts to adapt to life challenges (Cooper, 2007). By aspiring to “meet” clients experientially in this way, the psychotherapist creates a relational space that invites clients to view their struggles with compassion, and to accept who they are as a starting point for a process of considering who they want to become (Yontef, 2007).

The psychotherapist also strives to maintain presence in the psychotherapy relationship, which refers to a concern with “understanding and experiencing as far as possible the being of the patient” (May, 1983, p. 156). Presence requires a sustained posture of focused attention, receptivity to the client’s expressions of experiencing (including a capacity to remain present with highly intense or painful emotion), and immersion in exploring the client’s subjective world (Bracke & Bugental, 2002; Cain, 2007). Presence creates a space for the psychotherapist to sense deeply the experiential world of the client, thereby facilitating empathic understanding, which Rogers (1957) regarded as a key condition of the change process. Presence helps the client feel supported and secure, and illuminates qualities of the client’s subjective world and the psychotherapy relationship. Importantly, the psychotherapist’s presence also enhances the client’s willingness to remain present with increasing degrees of depth in self-experiencing (Bracke & Bugental, 2002; Schneider, 2007; Schneider & May, 1995).

**Foundational and Functional Competencies Informing Humanistic–Existential Psychotherapy**

The foundational competencies representing elemental professional knowledge structures and skill sets for psychologists include reflective practice, professionalism, scientific knowledge, relationships, individual and cultural diversity, ethical/legal standards and policies, and interdisciplinary systems (Kaslow et al., 2008; Rodolfa et al., 2005). These undergird the development of functional competencies, which include assessment, intervention, consultation, research/evaluation, supervision/teaching, administration, and advocacy (Kaslow et al., 2008; Rodolfa et al.,
2005). Although all are important, the foundational competencies of reflective practice and relationships, and the functional competencies of assessment and intervention are especially salient within a humanistic–existential psychotherapy approach.

**Foundational Competencies**

Reflective practice refers to competency in professional self-reflection, including self-assessment of professional strengths and skill levels along with areas in need of further professional development (Kaslow et al., 2008). Within this broad concept of reflective practice, one can infer specific capacities for self-observation, self-monitoring, and self-awareness that are foundational to the psychotherapist’s effectiveness in facilitating the client’s experiential awareness in humanistic–existential psychotherapy. These capacities are essential because the psychotherapist’s subjectivity is considered a key resource for accurately grasping the client’s subjective world (Cain, 2002; Schneider & May, 1995). For instance, in conducting phenomenological inquiry the psychotherapist’s efforts to set aside explanatory biases and preconceptions must be guided by a self-reflective process. In addition, reflective practice provides an anchor so that the psychotherapist may become immersed in the client’s experiential world while simultaneously retaining awareness of separateness from the client so as not to overidentify with the client’s experience. Apropos of this point, Rogers (1957) conceptualized empathy as the capacity to capture “the client’s private world as if it were your own, but without ever losing the ‘as-if’ quality” (p. 99). The psychotherapist’s reflective capacity is critical to maintaining this “as if” quality in the empathic process, which if lost, results in a blurring of the boundary between the psychotherapist’s experience and that of the client. Reflective practice also helps to guide the psychotherapist’s decision making regarding expressions of authenticity with the client, including gauging if, how, and when to disclose impressions and experiences of the psychotherapy process (Cooper, 2007).

Relationships competency involves effective and adaptive interpersonal capacities, including respectfulness, caring, communication skills, and skills in managing feelings in interpersonal contexts (Kaslow et al., 2008). Reflecting both the philosophical and theoretical traditions from which the humanistic–existential framework developed, a cornerstone of relationship competency within the approach involves “engaging with people in a deeply valuing and respectful way” (Cooper, 2007, p. 11). The psychotherapist is skilled both in facilitating a working alliance based on interpersonal connection and trust and cultivating the conditions and qualities of the psychotherapy relationship itself that are facilitative of emotional healing (Bracke & Bugental, 2002; Cain, 2002; Cooper, 2007; May, 1983; Rogers, 1957; Yalom, 1980; Yontef, 2007). In being authentic, genuine, collaborative, open to mutuality and dialogue, and present in the relationship with the client, the psychotherapist “meets” or contacts the patient rather than aiming to get the patient to be different” (Yontef, 2007, p. 20). This relational competency in “meeting” the client and being open to the emotional impact of the client’s experience is itself viewed as facilitative of the client’s change process.

**Functional Competencies**

Assessment competency requires skill in evaluation, diagnosis, and conceptualization of problems and concerns (Kaslow et al., 2008; Rodolfa et al., 2005). In humanistic–existential psychotherapy, assessment is guided by a conceptualization of the client as an integrated organism (Cain, 2002; Perls, 1973; Rogers, 1961; Schneider & May, 1995); “an irreducible whole: a complex gestalt that cannot be broken down into the sum of its individual parts without losing its essence” (Cooper, 2008, p. 243). In assessing a client’s problems, the psychotherapist explores the client’s life circumstances and attends to the multiple modes through which the client communicates experience (cognitions, emotions, actions, bodily expressions). The psychotherapist then integrates these observations into a coherent conceptualization of the client’s experiential world. Assessment competency, therefore, emphasizes the clinician’s skill in developing a phenomenological description of the client’s experience to grasp the client as a whole person. Because of its primarily subjective orientation, humanistic–existential psychotherapy places less emphasis than do many other psychotherapy approaches on traditional assessment of clinical history and formulation of a categorical diagnosis (Bracke &
Bugental, 2002; May, 1983; Schneider & May, 1995; Yalom, 1980). For instance, although a humanistic–existential psychotherapist may find it useful to know that a client has a depression diagnosis, the heart of the assessment process focuses on efforts to comprehend what the depression is like for this client in this moment within the client’s overall experiential world.

Intervention competency refers to the effective use of psychological methods to ameliorate problems and promote growth (Kaslow et al., 2008; Rodolfa et al., 2005). Central to the humanistic–existential psychotherapist’s effectiveness in promoting change through facilitating experiential awareness and using the relationship is a capacity for attunement to the client’s needs. For example, the psychotherapist meets the client by matching intervention strategies to the client’s needs and readiness for experiential work at a given moment in the psychotherapy process (Bracke & Bugental, 2002; Schneider & May, 1995; Yontef, 2007). In a related vein, the psychotherapist is aware of the themes that matter most for the client in the moment-to-moment psychotherapeutic exchange. Cain (2007) suggested that this capacity hinges on the psychotherapist’s skill in tracking the client’s repetition of specific concerns, spontaneous expressions of emotion, evocative or intense communications, and expressions reflecting views of self. The psychotherapist also attends to the client’s experience of the psychotherapy relationship, solicits client input on the impact of the psychotherapy process, carefully observes client responses to the psychotherapist’s input or feedback, and is alert to signs of strain or ruptures in the psychotherapy alliance (Cain, 2007).

Humanistic–Existential Psychotherapy Competencies in the Supervisory Process

To support the trainee in developing competencies in facilitating experiential awareness and using the psychotherapy relationship to promote change, humanistic–existential psychotherapy supervision aims to expand the trainee’s knowledge of theory and technique, facilitate exploration of the person of the psychotherapist, and cultivate skills in the use of self as a change agent. The supervisor takes care to ensure that the degree of emphasis given to each of these supervisory aims matches the training needs of the supervisee, including the trainee’s level of experience and development as a psychotherapist. For instance, a novice trainee may benefit most from a primary focus on basic practice both in developing clinical conceptualizations based on humanistic–existential concepts and using psychotherapy strategies for facilitating client self-awareness. As the trainee gains experience and confidence in applying basic aspects of humanistic–existential psychotherapy theory and methods, supervision may increasingly focus on the person of the psychotherapist and use of self to facilitate change.

In developing the trainee’s knowledge of theory and technique, the supervisor guides the trainee in developing assessment and intervention competencies using humanistic–existential concepts. For instance, to cultivate experiential case conceptualization skills, the supervisee may be invited to articulate clinical impressions that integrate observations of both verbal and nonverbal aspects of the client’s expressions (e.g., quality of emotion, voice tone, facial expression, body posture, and/or hand gestures). To develop intervention skills, the supervision may focus on developing the trainee’s capacities to track the moment-to-moment expressions of the client, formulate questions aimed at deepening the client’s experiential awareness, and provide feedback that encapsulates the essence of the client’s experiential expressions.

A focus on the person of the psychotherapist involves development of reflective practice competency in that the trainee is cultivating capacities to utilize self-reflection and self-knowledge in the service of the client. As Cain (2007) observed, the psychotherapist’s self-knowledge is important because “each of us functions best as therapists when we find our distinctive voices” (p. 6). Supervision focuses on helping the trainee to reflect on subjective experiences of being with a client, or where needed, to become aware of instances where the trainee’s own unresolved psychological issues may be adversely affecting the psychotherapy relationship and/or the psychotherapy process. Although exploring these issues as they relate to the trainee’s performance as a psychotherapist can be valuable, it is important that the supervisor be mindful of the boundaries and purposes of the supervisory relationship and refer the trainee to outside resources when persistent concerns affecting the trainee’s work as a psychotherapist are identified in supervision (Lambers, 2007).
Closely related to the focus on the person of the psychotherapist in supervision is the cultivation of the trainee’s use of self as a change agent, including capacities for genuineness, basic acceptance, and presence in the psychotherapy encounter as part of relationships competency. In this aspect of the supervisory process, the supervisor and trainee explore how to create a psychotherapy relationship that is conducive to change, track the nuance of in-session relationship process, discuss decision making regarding psychotherapist self-disclosure to clients, and focus on the process of empathic responding. To the extent that the supervisor models genuineness, acceptance, and presence in the supervisory relationship, the trainee not only is likely to feel at ease in exploring self, ideas, concerns, and questions critical to the training process, but also learns experientially how this quality of relating supports a process of growth.

**Illustrative Supervisory Vignette**

In the following brief vignette, a supervisor and trainee are discussing a session in which the trainee describes uncertainty about how to move the client forward in understanding her anxiety.

Trainee (T): She’s feeling very anxious, and we got really stuck trying figure out what it’s about.

Supervisor (S): Okay, so you both felt stuck trying to get a deeper grasp of her anxiety. Sometimes searching your own experience of a client can help you generate ideas about what a client’s struggles might be. What did it feel like to be with her in this particular moment of the session?

T: Closed in, overwhelmed, paralyzed, like I couldn’t help her.

S: Hmm, does this provide you with any ideas about how she might be feeling?

T: I’m not sure, maybe that she feels trapped? Like she doesn’t have options?

S: Okay, let’s keep that in mind and see what else we can find out. Sometimes when clients feel blocked like this it’s helpful to see if the experience is being expressed physically somewhere in the body. Did you happen to ask about any body sensations that accompany her anxiety?

T: Yeah, I remember you suggesting that before so I asked her. She said her chest felt tight, like she was suffocating, like she couldn’t get out from under the weight of all she must accomplish.

S: *Must* accomplish? It’s really important to be aware of the language she uses because it may give us further clues about her experience of the anxiety. What might she be conveying by using the word *must* here?

T: Maybe she feels compelled in some way to live up to some sort of expectation?

S: Yes, I’m wondering the same thing. While it’s too early to know for sure, I’m wondering if her anxiety is related to a struggle with choosing, that somehow she feels as though she “can’t” choose a different way of living than the path she is pursuing now, even if she’s not satisfied with her current life as it is. One way to begin exploring this possibility would be to start with noticing when she uses words like *must* or *should* and maybe ask her to say more about what she means when she says them. What would you think about trying this in the next session?

This vignette illustrates the use of an experiential focus to help the trainee develop an approach to moving through uncertainty in working with the client. To enhance knowledge of theory and technique, the supervisor both educated the trainee about relevant concepts and principles (e.g., learning to think holistically about possible physical expressions of the client’s anxiety) and demonstrated their application in developing a working clinical conceptualization. A person of the psychotherapist focus, along with a focus on use of self in the psychotherapy process also was illustrated by the supervisor’s suggestions that the trainee attend to internal experience as a tool to help develop clues as to what the client’s expressions may signify.

**Conclusions**

Key competencies in the practice of humanistic–existential psychotherapy involve skills in facilitating experiential awareness and use of the relationship to help the client change. The foundational and functional competencies of reflective practice, relationships, assessment, and intervention are particularly relevant to the development of these core humanistic–existential psychotherapy competencies. Psychotherapy supervision aims to cultivate these competencies via a focus on knowledge of humanistic–existential concepts and methods, the person of the psychotherapist, and use of the psychotherapist’s self to facilitate client change.

**References**


Cain, D. J. (2002). Defining characteristics, history, and
Farber


