

# Being-with the being-without : relational focusing with substance misusers<sup>1</sup> - Alan Tidmarsh<sup>2</sup>

Focusing-oriented therapy shows a great sensitivity towards a client's felt sense and the need to be with that 'something' in a special way. Yet where the therapeutic relationship fits in, so important in other therapies, is far less clear. Sometimes it seems as if focusing is merely a subjective process that could be done just as well alone.

I disagree. Using Gendlin's concept of 'interaffecting first' I am developing a focusing-oriented practice where the therapeutic relationship has a pivotal place. I work with 'addicts' and 'substance misusers', people who seem to absent themselves in so many ways. A strong 'being-with', an intersubjective felt sense, seems just the right way to address their 'being-without'.

This session builds on a presentation made in Awaji in 2009. Alan Tidmarsh is a focusing-oriented therapist in Norwich, UK, working with substance abusers. He is studying for a PhD on focusing-oriented therapy and 'addiction'.

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## 1. Introduction

Whenever I thought about my practice as a focusing-oriented therapist there were always two experiences that didn't seem to fit in. One was that many clients find it pretty uncomfortable to look inside for a felt sense. They would try for me, but often found it hard to get the hang of focusing, at least in the way it was supposed to be done. Also, I noticed that I was particularly known for the strength of relationships I made. Indeed my success stories seemed to be more about the quality of relationship I have with clients rather than the shifts arising from the felt sense.

So was I doing it all wrong? Should I give up my passion for focusing and be content to just do relationships? Why was it that focusing, therapy and relationships didn't quite fit together? Reluctantly I found myself agreeing with Germain Lietaer's view that somehow something is missing in what I get from Gendlin:

*"Another characteristic of Gendlin's recent work is his somewhat one-sided attention to the self-exploration process of the individual, almost at the expense of the interpersonal context. ... In contrast to Rogers, his attention is mainly directed to the intrapsychic process of focusing and to the (self-) instructions which can facilitate it." (Lietaer, 1990:24)*

This seems to say that Gendlin is all about process on the inside rather than relating outside. Yet immediately this seemed too simple. When I read the Process Model I was pleased to discover 'interaffecting first' at the heart of Gendlin's philosophy. This seemed to say that people begin from the influence of others and remain influencing and being influenced all through their lives. He tells a Navy story about Intermediate Frequency devices where a number of elements need to be tuned and retuned to relate to each other. This is an illustration of relating - how life is a constant tuning and retuning with others (Gendlin, 1997:\*41).

But then does this apply to focusing therapy and if so how?

Some of the fog cleared when I read Lynn Preston's paper that said that focusing and interactions were *two interwoven miracles* (Preston, 2005:\*) and even more fog cleared when I

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read Frans Depestele's clear analysis of the two miracles and his description of how in a therapy context the:

*"shared, implicit relational ground steers the interaction, and may lead to a change of the implicit relational knowing of both participants. This change occurs implicitly, and does not need to be made explicit."* (Depestele, 2008:\*6)

'Shared implicit relational ground' puts focusing and relationship in the same place and blew my mind! Later, in an interview Lynn Preston summed up what I had been yearning to hear:

*"I'm thinking back on the article that I wrote, the two interwoven miracles, and then recently Gene and I have been saying it's really not two miracles, there's one miracle, right! It's not two interwoven miracles but there's one miracle of what we would call focusing as relationality."* (Preston and Prengel, 2009:\*)

So I have gone back to my practice and worked though how therapeutic relationship and therapeutic focusing might live in the same space, speak the same language and support each other. I will set out the principles, relate these to my particular clients (alcohol and substance misusers) and describe some of the resulting practice.

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## 2. Principles

Here are some of the principles that have occurred so far:

### a. Experiencing is always being-with

Every human life is formed from an interaction, a baby is already pre-programmed to be-with his or her mother and finds a sense of self from her. I only discover myself through the reflected perceptions of others. As Madison says:

*"we begin life intersubjectively and we gradually discover ourselves through the other"...  
"Emotional ties between people are only possible because we continue to primarily live in the other's gestures and responses."* (Madison, 2001:\*)

Gendlin expresses this in terms of the felt sense:

*"What one feels at any moment is always interactional, it is a living in an infinite universe and in situations, a context of other people, of words, and signs, of physical surroundings, of events past, present and future. Experiencing is not 'subjective,' but interactional, not intrapsychic, but interactional. It is not inside, but inside-outside."* (Gendlin, 1973:324)

I am used to the idea that a felt sense relates to a situation but here the inter-personal network that makes up the situation becomes clearer. To use Heidegger's term, being-in-the-world (Dasein) always has a characteristic of being-with, even when another person is not close at hand (Heidegger, 1967:\*156-7). When I connect with my felt sense and it carries forward, it is always connected with and toward another human being:

*"The concrete reality of humans is the experiential process, and this is no purely internal thing, but a feeling-toward others in situations."* (Gendlin, 1972:\*336)

The individualistic world in which we live likes to see humans as entirely separate entities, each with a hidden-away subjectivity that brews in its own dark corner. By contrast what if my experience of living always contained an implicit set of connections? What if I am always deploying an *'implicit relational knowing'* of my being-with. (Depestele, 2008:\*)

I start to see that all of my living, whether in company or alone, whether speaking or silent, takes place in a mesh of relationships. Consciously or not I am always implicitly responding to others and responding to their response to me. The notion of transference points to the overlapping nature of these relations. Every moment I am surrounded by tendrils of touching and missing, affirmation and abrasion, yearning and repulsion.

As a child I only discovered myself through the reflected perceptions of others and to this day I struggle to balance my sense of self with what they see. Nevertheless perhaps I only blossom and grow in the affirmation, illumination and contrast provided by other human beings. Rogers 'actualising tendency' now seems not some independent life force arising independently in each potato. Actualising always involves others and comes through them.

So experiencing is always being-with.

### **b. Pausing finds the space of forbearance**

It took me a long time to recognise clearly the first necessary condition for focusing – the pause. Everyday chattering and thinking must stop so that there can be space for something new to come. This space arises when a person attends to the unclear, implicit sense of a situation and puts aside predefined, explicit meanings and labels. Above all it requires me to have a forbearance, setting aside all I know so well for that which I have yet to encounter. In Process Model language the essential pause in 'Chapter VII' symbolising must take place so that focusing, 'Chapter VIII', symbolising can happen:

*"It is a new kind of bodily sense of the whole complexity itself. To have it one must pause the VII type of symboling."* (Gendlin, 1997:\*232)

I notice that this pause is precisely the one that a generous host offers to a guest. Someone new arrives in my home and it would be easy to not notice the difference, caught up in my own thoughts, my own stuff and preoccupations. Yet if I am to respect the uniqueness of another human being I need to move aside to create the space. There must be a forbearance, an attending. The quality of my welcome is in direct proportion to the pause I allow for them to be. Gendlin says "*when we meet someone's glance, someone is there looking back.*" (Gendlin, 1996:\*287) in that moment "*the client can look into my eyes and find me.*" (Gendlin, 1996:\*286)

I want to say that the pausing required for the felt sense is the same as the forbearance I offer to another person. (You may be aware that focusing work in Afghanistan makes use of a well know poem by Rumi which likens a person to a guest house (Lawrence, 2004:\*)). If experiencing is always being-with then this pause is discovering a particular quality of being-with – an open space that encompasses the other and myself. This I-Thou space is somehow big enough to allow all of me to sit across from all of them. As I encounter so also I am encountered. In that is great potential, yet also insecurity, and a sacredness (Buber, 1958). The space is not something either of us can manufacture or command, yet in pausing it may come.

As a therapist I am learning to put that pause first in how I am with myself and with my clients. It is not me sitting over here listening to you over there and prodding you to dig around in your felt sense. It is not me displaying a well burnished and professional empathy, congruence and unconditional positive regard. Opposite you will find there is just a person pausing. I do my best to forbear the babble of my existence, to enter "*the uncertainty, unpredictability and anxiety*" of "*unknowing*" (Spinelli, 2007:\*). You will see me and all of my frailties stumbling about trying to attend, to respond, to be there. With every breath, I breathe into the pause where in me, in you and between us, a felt sense can come.

So pausing finds the space of forbearance.

### **c. The focusing space is an implicit shared relational ground**

However much I may accept the space that arises in the counselling room and want to work with the richness often beyond my conscious understanding, I need also to understand what is going on. How does focusing space and relating space fit together without treading on each other's toes?.

Frans Depestele uses the work of David Stern and his colleagues to explain how implicit relating connects to focusing in therapy (Depestele, 2008:\*). They draw a lovely picture of the richness that happens implicitly when people meet – the gestural and verbal backward and forward, the

sensing, shimmying and accommodating. They describe a process whereby the 'sloppiness' of missed interactions leads eventually to moments of meeting and 'fittedness'. This dialogue between our implicit relational knowing takes place very quickly, unpredictably and unconsciously. Between the participants a more or less satisfying 'shared relational ground' is developed and continually evolves.

Frans carefully distinguishes between this implicit relational space and the reflective space occupied by focusing. I think he is right to highlight the distinctive focusing relationship of the client with himself or herself. But when I try I find I cannot disentangle matters the way he suggests. In my practice the sloppiness leads to a shared implicit relational ground that sometimes is almost tangible in the room. The strength and quality of it, the foggy sensing and sparks of recognition ebb and flow in the tide of our touching and missing. I notice that it comes and goes to the degree that the 'I' can stand openly before the 'Thou' of the client and the wholeness of me can affirm and illuminate the wholeness of him or her. Gendlin said that

*"Personality change is the difference made by your responses in carrying forward my concrete experiencing. To be myself I need your responses, to the extent to which my own responses fail to carry my feelings forward. At first, in these respects, I am 'really myself' only when I am with you'." (Gendlin, 1964:\*)*

I want to say that the shared implicit relational ground is where focusing happens and interaffecting influences the business of focusing in each step that it happens. The forbearance offered by me to my client calls forth a forbearance they offer back to me. In that moment the folds and texture and tones of their 'I' can be distinguished by the contrast and reverence of my 'Thou'. As they respond to me I can shuffle in my chair, a little more comfortable and closer to this brief moment and where I am in it. So the pausing simultaneously opens the inter-psychoic and intra-psychoic felt sense together.

Before moving on I just want to notice my own concern that this may seem rather too neat and idealistic. Perhaps I am seeming to describe an interlocking encounter of 'I' and 'Thou' where two parts glide together with a satisfying 'kerching'! To counteract this I want to emphasise the hit and miss of much of my therapeutic work and my consequent enjoyment of Gendlin's description of getting it wrong. He speaks for my cack-handedness when he says:

*"I find that, on occasion, I can be quite visibly stupid, have done the wrong thing, made a fool of myself. I can let these sides of me be visible when they have occurred in the interaction. The therapist's being himself and expressing himself openly frees us of many encumbrances, artificialities and makes it possible for the schizophrenic (or any client) to come in touch with another human being as directly as possible." (Gendlin, 1963:110)*

So the focusing space is a shared space, an implicit shared relational ground.

#### **d. In encounter I let go the burden of being me**

My final principle perhaps was prompted by a strange way of speaking that I noticed in the Process Model. Early on he is describing 'interaffecting first' and he says

*"In the West people are accustomed to think in units and nouns, and to attribute causality to individuals. 'There is a boy over there' is an acceptable sentence; it is optional information whether he is running, or sitting. But one would not easily accept the sentence 'There is a running over there,' adding only later that the running is a boy." (Chapter IV, d-2, Gendlin, 1997:\*30)*

Something attracts me about this 'there is a running over there' as if the action, the experience is perhaps more significant or reliable than the attribution. When working with my focusing partner I notice the felt sense that comes and goes and I have a strong experience of the encounter – the being-there-with-her. When I am in that space I notice that the burden of my 'self' is much lighter. I have no doubt I am present, and in some way all of what I know of myself

is implicitly affirmed. Yet what is 'her' and what is 'me' doesn't matter. I am conscious of the carrying forward (i.e. "the running") but rather less of the 'me'.

I find myself wanting to say that the space of forbearance, the implicit shared relational ground, allows me to relate to the intricacy of my experience whilst letting go of the burden of being me. This seems to be what Judy Moore is talking about in her paper *'Letting go of who I think I am'*. She describes a client sessions where she felt that to respond from a deeper part of herself was more helpful than her empathetic reflections:

*"In many ways I was driven there by finding myself so often getting it wrong and by giving up on anything other than being myself as fully as I could be. 'I' as an ego-bound therapist, trying to be skilful, didn't work, but dropping my sense of 'me' as far as I could and trying to access that 'not-me' place made me trustworthy — even if only fleetingly and partially at times — to a client whose sense of self was unbearably raw and fragile." (Moore, 2003:\*)*

Suddenly this chimes in with material from all sorts of directions. Buber distinguishes a person from a thing (an 'it') and emphasises a more physical quality of encounter:

*"When Thou is spoken, the speaker has no thing; he has indeed nothing. But he takes his stand in relation" ... "I do not meet my idea of the other, but confront him or her directly". (Buber, 1958:12)*

Cooper shows how this 'I-Thou' can apply inter-subjectively to 'I-Me' so that the established pictures of who I think I am must stand in relation to the unclear sense of self. (Cooper, 2003:\*) The space created also seems to be what Chögyam Trungpa describes in the context of meditation – the ability to 'touch and go' (Wegela, 1988:\*), touching the a sense of self and letting go.

As with mindfulness meditation the quality is not attained by grasping or straining but by clear and accurate attention to the immediate experiencing, the contingency of the interaction. Just now the 'me' is like this and in a while it will be different. The sense of self is always mediated by some 'thing' that is preoccupying us, some 'content' that displays one facet as it obscures another, as figure stands distinct from ground. This transient content is not to be disdained or dismissed, its qualities and richness need close attention. But as Gendlin says, when you look across the room at a client,

*"Who looks back is not the person's traits or experiences, not the felt sense either. ... The person looking at you is none of the content. Content does not look at you." (Gendlin, 1996:\*287)*

So in the focusing/relating encounter I let go the burden of being me. Before explaining how they influence practice I will mention how my client group might be seen in these terms.

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### **3. Substance misuse as a being-without**

For some time now I have worked with clients who have difficulty with alcohol and substance misuse, either their own use or a family member. If I think of therapeutic health as coming from a being-with, then these clients seem to demonstrate a being-without in so many ways.

The most obvious being-without occurs with monotonous regularity – we make appointments for counselling and they fail to arrive. The early stages of engagement are also those where the substance abuse is strongest and life can be chaotic. Getting out of your head on heroin or alcohol or even cannabis doesn't have room for diaries, alarm-clocks and punctuality. Any remonstrations from me would produce a tongue-in-cheek lame excuse or just a shrug. Even when a client is physically present their recent substance abuse may make them mentally absent.

I needed to learn very quickly that there is nothing personal here. This is not a statement about not wanting to be with me. The being-without being practiced is a much bigger thing. One of my clients arrived at heroin after a long path that included eating disorders, masochism and self harm. She describes heroin as the *'best form of running away'* she could find. Another speaks of his drug as a *'cloak'* and a pair of *'protective metal wings'*. So being-without is perhaps at the heart of a substance abuse, a way of coping with the intolerable burden of existence.

Another sense of being-without is implied from this – a significant proportion of my clients have suffered neglect, abuse or trauma in early life. Always when listening to these childhood stories I am struck by the painful ambivalence of relationships involved. During moments of neglect the child is torn between rejecting the wrong and desiring the contact, backwards and forwards, touching and withdrawing, neither being right.

These clients can be fundamentally disconnected from self, from society and from relationships. They can be casually neglectful of their family or aggressive to loved ones trying to help. The substance can appear to be the strongest relationship in their lives, with all others dependent upon it. In this way substance abuse is fundamentally an attachment disorder, a misguided attempt to self-repair the emotional vulnerability induced by preoccupied, fearful, dismissing relationships (Flores, 2004:\*). I am reminded of Gendlin's description of schizophrenia as also being about interpersonal relationships:

*"My conception of the illness: It is not so much what is there as what is not there. The interactive experiential process is lacking, stuck, deadened in old hurt stoppages and in disconnection from the world. It cannot be ongoing, except in and toward someone and in the world. If a toaster is unplugged, would you take it apart to find out what is wrong inside of it?"* (Gendlin, 1972:\*336)

You may have noticed that I have avoided the word 'addiction' so far. This label is used to systematise a being-without. Repeated failures to fill the void of human contact leads to a substitute attachment which relieves a person of the intolerable responsibility for failure. *'It is not me that cannot relate, it's this stuff that gets in the way!'* Back in 1942 Carl Rogers made a footnote observation about his client Herbert Bryan, which he said was typical of the the way a neurotic thinks: *"My life would be noteworthy," says the neurotic, "were it not for the fact that my neurosis prevents me and excuses me from attempting to live it".* (Rogers, 1942:\*283) It does not take much for me to substitute the word 'addict' for 'neurotic' - *"My life would be noteworthy," says the addict, "were it not for the fact that my addiction prevents me and excuses me from attempting to live it".*

Here is the structure-bound behaviour that we fall into when we lose the spontaneity of being-with. Ton Coffeng describes it well

*"When people lose contact, their 'experiencing\*' stops. It happens to prisoners when they are isolated from people and the outside world. Many become 'crazy'. They lose contact with themselves, their feelings and bodily felt awareness of experience. (Coffeng, 2002:155)*

The being-without person needs to re-connect to a being-with. Reconnection with self and others is the same business. This

*"experiencing needs contact (a) with oneself, to relate to feelings, to give words to feelings, and (b) to communicate with others. Contact with a person carries experiencing forward so that the process can move. Responses from a person interrupt the 'structure bound' functioning of individuals, removing their isolation and bringing them back to themselves."* (Coffeng, 2002:155)

## **4. Relational focusing: being-with the being-without**

In this final section I would like to sketch out some practical examples of how my principles influence work with substance abusers.

### **a. Touching the being-with**

A substance abuse client brings into the room the distracting presence of a third person - the substance itself. It is the substance that causes the problems, the substance that does not respond to treatment, the substance that holds the client in chains. I am sometimes tempted to pull up a third chair for this character, this disruptive alter-ego. Yet he is a frozen whole, the hollow sound of a being-without, institutionalised into structure bound behaving. Gendlin's law of reconstitution suggests that a frozen whole is carried forward always by new experiencing (Gendlin, 1964:\*)).

His description of his practical work with schizophrenic patients shows him doing this by responding to human beings trapped in structure bound behaving (Gendlin, 1972:\*). In his initial meetings he faces a wall of silence, non-responsiveness and apparent indifference. In many ways we see him always presuming the presence of a human being in there and the implicit presence of a relationship. He uses his felt sense to offer both sides of the missing dialogue to his silent companion, always tentative and respectful. Undaunted he attempts to check understanding at each step and never pushes or cajoles.

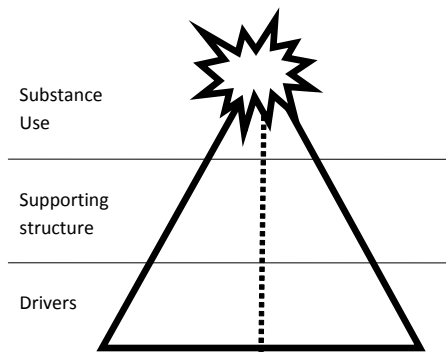
In a similar way I have learned to foreground the interaction that takes place with a substance abuser, knowing it may be the most tenuous part of the process for them. I concentrate on being present in the room and sensing their presence – noticing nuances and checking my understanding. Whilst the content of the conversations may often start in a very distant place, it often comes back to us, where we are and what can be allowed into the room and found a safe lodging.

This does not imply a good relationship at all times and sometimes it is useful when it is not. There is a lot of what Depestele would call 'sloppiness', stumbling about connecting and missing. I am far more open about myself than I used to be in therapy. It seems very important that I am tangibly in the room, at times confused or concerned, excited or moved. We have all experienced the client who rambles on in an endless narrative, speaking more to the fireplace than the person across the room. I think I am stronger now in metaphorically sticking out my foot to engage them with the sense of a person on my side of the room and the need to hear that I have (or have not) got the sense of it right.

So different senses arise of the ground that is created between us – perhaps clunky or abrasive, sometimes kindly and accepting, always trying to sense a being-with. Sensing and comparing perceptions of the shared space between us today is a valid way of opening up. If we can touch and be touched, I with thou and thou with I, a space is created for the next step.

### **b. Ways of pausing**

I have learned that the necessary and sufficient pause needs robust attention as it seems like a move my clients may be reluctant to take. From the start I use a volcano metaphor as an outline agenda that we do not follow rigorously but can return to regularly. My aim is to repeatedly generate pauses at each layer, consulting the sense of what is there for the client and '*What is a good small step in the right direction for this thing?*'



At the top level the substance abuse demands attention as it erupts with explosive heat. Listening to what that is all about allows a pause in the preoccupation of 'addiction'.

The middle layer represents the habits supporting an 'addictive' lifestyle. Many will be longstanding.

The crux of things is the powerful something welling up from below, unclear, half felt in the stomach, ignored and rejected. What is that all about?

Within this structure I am straightforward and open about listening for the felt sense on a regular basis.

As if with a video remote control we put the narrative 'on pause' for a moment, setting aside thoughts and explanations on the desk and providing a space on the coffee table for the 'something' we have just touched. Clients are invited to step, one by one, across lily pads or stepping stones, checking out each step before becoming aware of the next.

The pausing is something the client sees me doing and they get used to checking out the validity of the results for themselves. My pausing can often be about the quality of being in the room with them in that moment, wondering if this is a particular thing today or something more ongoing. A few weeks ago I noticed the 'sparky' quality of a client who was describing the combative relations she had with men and the need to have the last word in an argument. This led her to pause and check out the feel. Was it just my imagination, did it resonate with her? From this an inter-psychic and intra-psychic pause arose which led easily to a shift. In time gone by I would have been restrained about offering this, chastising myself about '*staying in the client frame of reference*'. Now, so long as there is a pause, I am easy. Sanders and Wyatt say:

*"Within experiential therapy theory and practice, contact is not assumed, it is assured. Intra-psychic contact and inter-psychic contact and perception are required and relentlessly checked for accuracy."* (Sanders and Wyatt, 2002:19)

### c. **Playing with letting go of myself**

A defining perception among substance abusing clients is the impossibility of change. The label of '*alcoholic*' or '*addict*' takes on a pathological identity with an inescapable perversity. A fetishist relationship is produced where human power is projected onto the external object – the substance. So long as I am an '*addict*' it is impossible for me to change (Cole, 1998:\*, Derrida, 1995:\*, Foucault, 1980). A substance abuser needs to discover themselves as not who they think they are and there is almost artifice and trickery in doing this.

The most obvious way of doing this is to notice tiny differences. Addiction presumes an unchangeable, frozen whole – yesterday, today and tomorrow will be fundamentally the same. Yet in making a pause we can sometimes notice and revel in the discontinuities of experiencing '*Oh, so last week it was like this but now it is just a bit different! I wonder if I can really get a feel for something that's a little bit different just now?*' Such variations are the vectors of change, the moments when a fixed course notches onto a different bearing.

I like to take whatever opportunities present themselves to get to know other aspects of the client than they present in therapy and to enjoy the variety of perspectives offered. I notice the smirky smile and cheeky mutter of one client, the engrossing precision of another. Neither fits in with the '*addict*' self that preoccupies us. What might this fragmentary '*capable Peter*' say to the hopeless '*alcoholic Peter*'. Isn't it interesting how someone can be both things at the same time? It feels as if I am catching a person out being different, allowing the another side to be in the room.

From time to time clients make jumpy attempts to give up their substance. Unprepared haphazard abstinence may be painful and chaotic and only last for a few days. Clients may go on



a roller-coaster ride of withdrawal and feel raw, confused and decidedly not themselves. Such an attempt provides a magnificent opportunity to experience a 'me' that is not 'me'. Clients notice that whilst cravings come, they are not consistent and predictable. If they can notice their feelings they can play a little with behaviour, varying what they do and seeing the differences. Repeated attempts at abstinence give a person the perspective to sense their living and see what difference feels like.

Once or twice I have found myself swapping seats with the client in the middle of the session. He or she has presented a challenging issue and asked for a definitive answer from the counsellor. 'Tell me what I should do?' I found myself recognising the validity and difficulty of the question and enquiring how they would answer it if they were the counsellor? The process of swapping chairs allows the client to experience what it might be like to be the other side of the fence and this gives them access to resources they would not have acknowledged. Invariably they give both a valid response to the issue in hand and the conversation carries us forward to a different place. Recently I can recall a longstanding client seizing the opportunity to continue in the counselling role, offering to help me out with my problems!

In all of these examples the emphasis is not about argument and logic but briefly allowing a different feel to touch us. The 'touch and go' principle applies. If it is not grasped and strangled this feel will occur again and next time carry us forward again. Having an 'addict self' is a huge burden to bear. It only shifts slowly and with patience. I said 'allowing a different feel to touch us' because it is 'us' – each step changes the shared, implicit, relational ground and changes us both.

## 5. Conclusion

This paper is necessarily a work in progress. I started to relate focusing-oriented therapy, relationships and 'addiction' in a paper to last year's conference and I will continue to work it through in my own therapeutic work with substance abusers. I would be very grateful to hear your reactions, disagreements and observations.

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## References

- Buber, M. (1958) *I and Thou*. London: Continuum.
- Coffeng, T. (2002) Contact in the Therapy of Trauma and Dissociation. IN Wyatt, G. & Sanders, P. (Eds.) *Rogers' therapeutic conditions : evolution, theory and practice. Vol. 4, Contact and Perception*. Ross-on-Wye, PCCS Books. 153-167
- Cole, C. L. \* (1998) Addiction, exercise, and cyborgs: Technologies of deviant bodies. IN Rail, G. (Ed.) *Sport and postmodern times*. Albany, NY, State University of New York. 261-275
- Cooper, M. \* (2003) "I-I" and "I-Me": Transposing Buber's interpersonal attitudes to the intrapersonal plane. *Journal of Constructivist Psychology*, 16,2, 131-153.
- Depestele, F. \* (2008) Some thoughts about 'relationality' and 'reflectivity' in psychotherapy: How each effects change, and how they relate to each. *20th International Focusing Conference (May 15th 2008)*. Bromont, Canada.
- Derrida, J. \* (1995) The rhetoric of drugs: An interview (Michael Israel translator). IN Weber, E. (Ed.) *Points... Interviews, 1974-1994*. Stanford, CA, Stanford University Press. 228-254
- Flores, P. J. \* (2004) *Addiction as an attachment disorder*. London: Jason Aronson.
- Foucault, M. (1980) *The history of sexuality, Volume 1: An introduction*. New York: Vintage Books.

- Gendlin, E. T. (1963) Subverbal communication and therapist expressivity: Trends in client-centered therapy with schizophrenics. *Journal of Existential Psychiatry*, 4,14, 105-120.
- \* (1964) A theory of personality change. IN Worchel, P. & Byrne, D. (Eds.) *Personality change*. New York, Wiley. 100-148
- \* (1972) Therapeutic procedures with schizophrenic patients. IN Hammer, M. (Ed.) *The theory and practice of psychotherapy with specific disorders*. Springfield Il, Charles C. Thomas. 333-375
- (1973) Experiential psychotherapy. IN Corsini, R. J. (Ed.) *Current psychotherapies*. Itasca, Illinois Peacock. 317-352
- \* (1996) *Focusing-oriented psychotherapy: a manual of the experiential method*. New York: Guilford Press.
- \* (1997) *A Process Model*. New York: The Focusing Institute.
- Heidegger, M. \* (1967) *Being and time*. Oxford: Blackwell.
- Lawrence, N. J. \* (2004) Focusing in Afghanistan. *Staying in Focus - Focussing Institute Newsletter*, 4,2.
- Lietaer, G. (1990) The client-centered approach after the Wisconsin project: a personal view on its evolution. IN Lietaer, G., Rombauts, J. & Van Balen, R. (Eds.) *Client-centered and experiential psychotherapy in the nineties*. Leuven, Belgium, Leuven University Press. 19-46
- Madison, G. \* (2001) Focusing, Intersubjectivity, and Therapeutic Intersubjectivity. *Review of Existential Psychology and Psychiatry*, 26,1, 3-16.
- Moore, J. \* (2003) Letting go of what I think I am. *PCEPC-Kongress 7/2003*. Egmond, Netherlands.
- Preston, L. \* (2005) Two Interwoven Miracles: The Relational Dimension of Focusing Oriented Psychotherapy. [Online]. Available at: [http://www.focusing.org/fot/fot\\_articles.html](http://www.focusing.org/fot/fot_articles.html) [Accessed: 22nd February 2010]
- Preston, L. & Prengel, S. \* (2009) Focusing Oriented Relational Psychotherapy. [Online] Spring Valley, NY, Focusing Institute. Available at: [http://www.focusing.org/conversations/2009\\_04\\_lynn\\_preston.htm](http://www.focusing.org/conversations/2009_04_lynn_preston.htm) [Accessed: 5th March 2010]
- Rogers, C. R. \* (1942) *Counselling and psychotherapy: newer concepts in practice*. Boston: Houghton Mifflin.
- Sanders, P. & Wyatt, G. (2002) The History of Conditions One and Six. IN Wyatt, G. & Sanders, P. (Eds.) *Rogers' therapeutic conditions : evolution, theory and practice. Vol. 4, Contact and Perception*. Ross-on-Wye, PCCS Books. 1-24
- Spinelli, E. \* (2007) The therapeutic relationship: a view from existential psychotherapy (Part of a keynote address to BACP's Annual Conference, 2006). *Therapy Today*, 18,1, 11-14.
- Wegela, K. K. \* (1988) Touch and go in clinical practice: Some implications of the view of intrinsic health for psychotherapy. *Journal of Contemplative Psychotherapy*, 5, 3-23.