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Therapist experiences of congruence in school-based counselling

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Abstract: Congruence is a key counselling concept, perhaps the most important of the therapist provided conditions (Rogers, 1967). Whilst literature on congruence and its use within the therapeutic relationship is rich, there is a lack of research exploring *how* counsellors understand, experience and offer congruence with children in school-based counselling programmes – the focus of this study. Using hermeneutic phenomenology as a philosophical base, semi-structured interviews were conducted with three person-centred counsellors and one integrative counsellor who currently work with children in a school-based counselling service. The data was analysed using interpretative phenomenological analysis (IPA) resulting in two superordinate themes: *Intrapersonal Congruence* and *Navigating Multiple Terrains*. This study suggests that congruence with children in school-based counselling is best understood as an intrapersonal phenomenon. Key findings indicate that conscious non-disclosure of therapist process was central to work with children. This served to protect and enhance the therapeutic relationship. Other findings suggest that the presence of certain aspects of therapist *self* in the room can impact upon congruence. Therapist personal self-disclosure was essential in facilitating a strong therapeutic alliance with children for one research participant and a central aspect of his experience of congruence with children. Lack of clarity around the unique roles and responsibilities of working in a school setting as a counsellor affected the way therapists experience and offer congruence with children and young people. Implications for training and practice are considered.

Keywords: Congruence, core conditions, school-based counselling, therapist self-disclosure, therapeutic alliance

Why congruence?

Carl Rogers (1957) published what is one of his main theoretical assertions – 'The Necessary and Sufficient Conditions of Therapeutic Personality Change'. In this paper, he proposed that constructive personality change could be brought about in a client through the therapeutic relationship between the therapist and their client. This change, according to Rogers, occurs when six psychological conditions are present, which he determined as both necessary and sufficient. The third of these conditions relates to the therapist being "congruent or integrated in the relationship" (1957, p. 95). For Rogers, congruence described the therapist's genuineness within the relationship, therefore the therapist is "freely and deeply himself, with his actual experience accurately represented by his awareness of himself" (1957, p. 97). More contemporary definitions exist, for example Kolden et al. (2011, p. 65) state that "the therapist is mindfully genuine in the therapy relationship, underscoring present personal awareness, as well as genuineness or authenticity".

Therefore, whatever feeling or attitude the therapist is experiencing, it is matched by an awareness of that attitude (Rogers, 1957). Rogers stated that one of the main purposes of being congruent was to establish a relationship built on trust, arguing that authenticity will allow trust and communication to flow (Rogers, 1961; Greenberg & Geller, 2001).

The impact of the six conditions on other theoretical approaches has also been significant; congruence, as well as the other five conditions, are often cited as key aspects of any therapeutic relationship, which serve to alleviate distress and promote wellbeing (Tursi & Cochran, 2006; Carey et al., 2012), regardless of the orientation of the therapist (Norcross & Lambert, 2019). Similarly, therapists' congruence or authenticity is found to be "an essential element in psychotherapy relationships" (Kolden et al., 2018, p. 426).

Why school-based counselling?

School-based counselling is one of the most prevalent forms of psychological therapy offered to children (Cooper et al., 2021; Finning et al., 2021). It is estimated that in 2020, 66% of schools are buying in professional counselling services for their students (NAHT, n.d.). School-based counselling is a heavily researched area. However, the majority of existing studies either provide: overviews of counselling provisions (Cooper, 2009; Toth et al., 2020) and attempts to measure their effectiveness (Fox & Butler, 2007; Hanley et al., 2011; Pattison & Harris, 2006; Pearce et al., 2017; Rupani, 2012); or examination of helpful factors when working with young people (Westergaard, 2013; Kernaghan & Stewart, 2016; Knight et al, 2018; Verasammy & Cooper, 2021). Therapist congruence in school-based counselling is an under researched area.

Literature Review

What is therapists' congruence?

As a concept, congruence has evolved and developed over time and despite its magnitude, it is often suggested that it is the least clearly explained of the conditions (Cornelius-White, 2007b; Greenberg & Geller, 2001), and the most troublesome to understand and implement (Kirschenbaum et al., 2005), with various writers attempting to offer clarification on the subject (e.g., Wyatt, 2000). Despite being a central notion in psychotherapy, no primary definition of therapists' congruence exists. This may contribute towards the concept often appearing "abstract and elusive" (Kolden et al., 2011, p. 65); or "obscure and mysterious" (Kolden et al., 2018, p. 425). Haugh (2001) offers a comprehensive history of the development of congruence within psychotherapy highlighting

how even Rogers himself fluctuated in his descriptions of congruence throughout his career. In one of Rogers' earliest mentions of congruence, he states: "The likelihood of change in… perceptions and behavior would depend on certain qualities of this relationship. To the degree that the counselor is genuine, internally consistent, operating without façade, and with awareness of his own feelings" (1956, p. 117).

Rogers (1961) advanced his ideas to view congruence as the most basic of the six conditions, as without it, he believed, empathy and unconditional positive regard cannot be present. Certainly, Rogers' views on congruence shifted considerably throughout his career, from initially characterising it as the way in which the therapist is genuine, real and fully integrated in the relationship (1957) to later expanding his ideas and describing congruence as a coherence between the internal experience of the therapist – including their sense of self and experience in the relationship, and the expression of this to the client (Rogers, 1980; Ray et al., 2014).

Contemporary definitions of therapists' congruence have commonalities with Rogers' original descriptions. Kolden et al. (2011) contend that therapists' congruence, in therapeutic relationships, includes two fundamentally different qualities:

> [T]he first reflects a mindful genuineness on the part of the therapist, underscoring present personal awareness as well as authenticity. The second facet of congruence refers to the therapist's capacity to conscientiously communicate his or her experience with the client to the client (2011, p. 19)

This distinguishes congruence as a personal characteristic of the therapist and an experiential quality of the therapy relationship; arguably the former being intrapersonal, and the latter being interpersonal (Kolden et al., 2018). Rogers (1980) would describe this as the *experienced* versus *expressed* elements of congruence.

Some commentators argue that it is too difficult to distinguish *between* Rogers' conditions. For example, Bozarth (1998) proposes that the therapist provided conditions of empathy, congruence, and unconditional positive regard cannot be considered individually; arguing that they are all, in effect, "functionally one condition" (Bozarth, 1998, p. 80). In contrast, others argue that therapists' congruence is much more nuanced than this and distinctive from the other conditions. For example, Cornelius-White (2007b) proposes a dimensional model of congruence which examines different aspects of congruence and their relationships with each other.

Congruence, genuineness, and authenticity are often used interchangeably in research and theory (Gelso, 2002; Kolden et al., 2018). Whilst some authors link congruence with

concepts such as genuineness and authenticity, others argue that the terms are distinct from one another. Genuineness can be defined as "the ability to be who one truly is, to be nonphoney, to be authentic in the here and now" (Gelso, 2002, p. 37), and is, arguably, "a much broader and more inclusive construct than congruence" (Kolden et al., 2018, p. 425). Whereas authenticity requires a person to fully understand themselves and their individual emotional state, it also means they can express this to others. To be authentic is to be fully in control, to know yourself and to act according to this (Wood et al., 2008; Joseph, 2016).

Researching congruence

The majority of the empirical research into therapists' congruence (or genuineness) relates to understanding its impact on client outcomes (Kiesler, 1973; Kolden et al., 2011; Kolden at al., 2018; Luborsky et al., 1971; Meltzoff & Kornreich, 1971; Orlinsky et al., 1994; Saunders et al., 1989; Truax & Mitchell, 1971). Overall, the results from these studies are mixed, but positively inclined, when considering the impact that congruence has on improvements made in psychotherapy (Kolden et al., 2018). Attempts have also been made to measure congruence (or genuineness) via various inventories, including the Barrett-Lennard Relationship Inventory (Barrett-Lennard, 1962) and the Real Relationship Inventory (Kelley et al., 2010). Arguably, however, these measuring tools act as an unhelpful abstraction, moving discussions away from real life examples and therefore a deeper understanding of congruence as a therapeutic process rather than a product (Grafanaki, 2013).

There have been some studies which have explored therapists' genuineness from the clients' perspective. For example, Schnellbacher and Leijssen (2009) explored the overall significance of clients' experiences of therapists' genuineness in their therapy. They found that it could be a crucial process for therapeutic change but not exclusively, other processes were also influential, and this was dependent on individual differences between clients. In their meta-analysis, completed for the American Psychological Association, Kolden et al., (2018) found that client outcomes improve the more that therapists are viewed as genuine by their clients (i.e., therapists are seen as human beings rather than experts or authority figures). If client perceptions of congruence are of paramount concern in understanding the therapeutic relationship, then therapists' perceptions must also be of value, without them we are only seeing one side of the coin.

It is perhaps surprising that research into congruence has decreased (Kolden et al., 2011) given its importance in counselling and psychotherapy relationships (Kolden et al., 2018; Nienhuis et al., 2018). Congruence may be especially important in therapeutic relationships with young clients;

children, in particular, are experts in detecting inconsistencies in a therapist's attitudes or behaviour (Axline, 1989). Further, research into therapists' lived experience of congruence in therapeutic relationships has been relatively unexplored. Therefore, it is difficult to establish if the wealth of theoretical posturing about congruence made within the literature, is meaningful to counselling practice. However, there are some contemporary researchers who have attempted to explore this concept from the therapist's perspective.

Grafanaki and McLeod (2002) studied counsellor and client experiences of congruence through analysis of interviews at various stages of the therapy relationship. They found that both counsellor and client experienced congruence (and incongruence) in multiple ways, highlighting that congruence is not a singular phenomenon. For the counsellor-participants there were four different ways they experienced congruence: (1) as empathic experiential presence; (2) as part of directing/focusing the counselling process; (3) covert use of their own material; and (4) disclosure of their personal material in sessions.

Congruence in school-based counselling

Within person-centred research and literature, there is very little written specifically about congruence (or empathy and unconditional positive regard) with children in school-based counselling. There are, however, several studies which attempt to examine the factors that are helpful when working with young people in school-based counselling from the perspective of those directly involved in counselling, i.e., clients *and* therapists (Lynass at al., 2012; Westergaard, 2013; Knight et al., 2018; Verasammy & Cooper, 2021). Studies of this nature are useful as they provide a framework for understanding what makes effective school-based counselling, and how services can be closely matched to the needs of clients (Hamilton-Roberts, 2012). Much of the research cites the relationship as a key aspect of helpful encounters, with counsellor qualities being top of the list for many young people when they consider what makes their experience of counselling a positive one (Lynass et al., 2012) - of which, congruence (along with empathy and unconditional positive regard) is an essential part of (Jayne, 2013; Westergaard, 2013; Ray et al., 2014).

In a recent study, Verasammy and Cooper (2021) examined what is helpful in school-based counselling from the perspective of clients who have been bullied. Five helpful aspects were identified, with the first of these being: (a) counsellors' way of relating in terms of offering the core conditions. As a result of the client experiencing these conditions, their self-worth increased.

Similarly, Knight et al. (2018) looked at the experiences of school-based counselling from the perspective of the client. They sought to understand young people's perceptions of the counselling relationship and found five themes concerned with positive aspects of their relationship with the school counsellor. The first two of these are as follows: "young people's experience of a genuine connection with a counsellor", and "the experience of being listened to" (2018, p. 377). Within this, participants described their negative experiences of counsellors who adopted a more "professional persona" compared with those who showed warmth and the ability to relate in a relaxed and informal manner – acknowledging the fact that their counsellors were "real people" (2018, p. 380). Self-disclosure was an important aspect within this – something which is cited within the person-centred literature as an aspect of congruence (Savic-Jabrow, 2015) and important in building a therapeutic relationship (Pinto-Coelho et al., 2018).

Westergaard (2013) examined what is helpful when working with young people from the perspective of the therapist. Again, "building the therapeutic alliance" (2013, p. 99) was key, with each participant "…regardless of theoretical orientation, cit[ing] the core conditions of the person-centred approach as central to building an effective therapeutic relationship" (2013, p. 101).

Whilst there is an absence of research surrounding the use of congruence, empathy and unconditional positive regard in the context of working with children within the person-centred literature, this is a much-explored area within child-centred play therapy (CCPT) (Axline, 1947; Axline, 1989). In line with the person-centred approach, CCPT is based on the theory of the actualising tendency and the principles of non-directiveness; with the relationship viewed as central in healing children who have experienced difficulties (Axline, 1947; Rogers, 1957; Axline, 1989; Jayne & Ray, 2016).

In attempting to define congruence within CCPT, Robinson (2011) states that: "Congruence means that the therapist is genuine and sincere about believing in the client's innate potential to self-direct and achieve insight into their own problems" (2011, p. 210) – this description represents a departure from established definitions within person-centred theory which focus on the internally experienced and externally expressed aspects of congruence (Cornelius-White, 2007a; Cornelius-White, 2007b; Kolden et al., 2018).

Schottelkorb et al. (2014) examined therapists' perceptions of the relationship conditions in CCPT by employing a single case design with two child-therapist dyads. The researchers concluded that therapist perceived level of genuineness increased over the course of therapy – as the therapeutic relationship unfolds and strengthens, so did the therapist's level of congruence. This has the effect of enabling children to

"share their own experiences more deeply" (Ryan & Courtney, 2009, p. 119). These findings support the notion that congruence is an important factor in building the therapeutic relationship, which in turn impacts positively upon change processes.

For the purposes of the above study, congruence was defined as follows: "in the realm of play therapy, therapists congruently attune to their clients in a manner that increases connection and contact. For child therapists using CCPT, congruence is exhibited by matching internal dialogue and feelings with verbal communications with child clients" (Schottelkorb et al., 2014, p. 2). This return to an understanding of congruence as having internal and external facets is shared by Jayne and Ray (2016) who state that congruence in CCPT is: "being aware and open to one's moment-to-moment experience, thoughts, and feelings and expressing one's self in a real, natural, and free-flowing way in relationship with the child" (2016, p. 92).

Summary

Given the central importance placed on congruence within therapeutic relationships (Jayne, 2013; Ray et al., 2014), and the extensive research on congruence in adult counselling, it is perhaps surprising that there is no research which explores this concept from the perspective of school-based person-centred counsellors. The strength of the relationship is associated with positive outcomes in therapy (Geldard et al. 2017; Karver et al., 2006). As Rogers states "In the emotional warmth of the relationship with the therapist, the client begins to experience a feeling of safety. …In this safe relationship he can perceive for the first time the hostile meaning and purpose of certain aspects of his behavior" (1951, p. 41). Therefore, it is the role of the therapist to create the ideal relationship (Rogers, 1957). Therapist provided congruence (along with unconditional positive regard and empathetic understanding) lie at the heart of a solid relationship between client and therapist particularly in person-centred counselling (Jayne & Ray, 2016; Rogers, 1957, 1961, 1965). A relationship characterised by intimacy and trust, in which the attitudinal conditions of empathy, understanding, respect and acceptance are consistently present, is considered essential in allowing the client the emotional stability and safety to share personal issues (Westergaard, 2012; Gilat & Rosenau, 2012). Therefore, understanding how these conditions are defined, experienced and conveyed by counsellors in school-based counselling is fundamental in offering effective therapy to children. Therefore, this study aimed to address this gap within the research literature by examining the concept of congruence from the perspective of person-centred school-based counsellors.

Methodology

This study explored how person-centred school-based counsellors experienced the concept of congruence in their counselling practice. Congruence was defined, for the purposes of this study, as: (1) the counsellor is sensitive and open to their own feelings and experiences and neither alters or rejects them; and (2) the counsellor articulates their experience, feelings, and awareness of being in the relationship with the client and communicates to the client what is conjured up in him/her only when they are perceived to be relevant to the client. This two-part definition aimed to acknowledge both the internal and external aspects of congruence discussed in the literature.

This qualitative study utilised a phenomenological methodology, as its holistic approach is suited to exploring both internal emotions, thoughts, and bodily sensations in addition to experiences of interpersonal processes (Finlay, 2011).

All authors are qualified and practising person-centred therapists, with the second and third authors working in Higher Education and involved in training person-centred therapists. This research was conducted as part of the first author's master's degree and reflexive comments by her are offered in text boxes.

> At the time of undertaking the research, I (Krystal Scott) self-identified as an "outsider" (Pietkiewicz & Smith, 2012) with no experience, but a keen interest in counselling children and young people. The concept of congruence held personal significance for me as it is something that as a trainee therapist, I struggled to offer my clients. Honestly communicating what was persistent and striking within me was met with anxiety as I feared the risk taking involved would rupture the relationship. However, I have experienced deep moments of connection when offering congruence to clients. The desire to study congruence with children was rooted in these experiences (Scott, 2020).

Phenomenology's distinctive emphasis on reflectively studying, analysing and characterising a reality that is based on lived experience made it an appropriate methodological approach for this research study (Reeder, 2010); the aim was to study one element of lived experience - the way in which therapists make sense of and experience congruence with children in school-based counselling. Researchers acknowledged and embraced the notion that any understandings formulated are a product of the interactions and relationships between researcher and participants in the particular framework of the study (Carter & Little, 2007). As such, the aim was not to uncover objective truths (Goss & Mearns, 1997) but rather to study the natural attitude, perceptions, and subjective experiences of everyday life (Finlay, 2011; Taylor-Jones, 2017). The authors acknowledged the importance of developing a phenomenological attitude towards the participants' experiences and the research process itself. Finlay (2014) identifies this as a key ethical consideration of phenomenological research.

Interpretative Phenomenological Analysis (IPA) was chosen for its accessible, flexible, and supportive structure (Smith et al., 2022). Moreover, IPA is aligned with the epistemological basis of the study as it is dedicated to investigating the way in which people give meaning to their lives based on important and meaningful lived experiences (Eatough & Smith, 2006; Smith et al., 2022) The experience of the participant is key in IPA, and central to this is the importance of developing a rich understanding of the perspectives of each participant (Eatough & Smith, 2006). IPA involves interpretation on the part of the researcher as they try to make sense of what has been shared by the participant. Researchers bring with them their own understandings and ways of seeing the world, which inevitably influence the findings including any interpretations made (Smith et al., 2022).

Participants and data collection

Participants were recruited through a variety of professional networks, including a national charity which delivers therapeutic interventions to children in primary schools and secondary schools, and a closed social media group dedicated to the professional development of school counsellors. Participants self-included based on the inclusion criteria requiring them to be a person-centred or integrative counsellor who had been qualified for at least a year and who worked with children or young people. A total of four school-based counsellors participated in the study. All participants were fully qualified and had been practicing for between 3 and 6 years. Three counsellors described their orientation as person-centred, and one participant as an integrative counsellor (who had received training in person-centred therapy). Two counsellors worked in primary school, and two in secondary school.

Semi-structured interviews were chosen as the method of data collection. We were concerned with the everyday experiences of counsellors, and so to study, analyse and characterise the individual realities of the participants, it was essential that direct conversations were had with those individuals (Reeder, 2010). The interview schedule (including prompts) was devised prior to interviews and set out a schedule of open-ended

questions to give pace and flexibility for meaningful experiences to be explored in real time. Interviews lasted between 35 and 75 minutes and were audio recorded then transcribed verbatim.

Ethical considerations

Voluntary participation was requested in this study, with no deception or offer of reward to take part. Informed consent was requested, which involved potential participants receiving information about the study before taking part. Participants received copies of the proposed questions before the interview. Participants could withdraw consent to the study any time up until the analysis of the transcripts. Pseudonyms have been used to protect participant's anonymity and the identities of any children and young people referred to in this study have been protected. This research was approved by the relevant research ethics board and adhered to the Ethical Guidelines for Research in the Counselling Professions (BACP, 2019). Participants were school-based counsellors and therefore had access to professional supervision to discuss any ethical or emotional issues which arose through the research process.

Data analysis

The data was analysed using IPA as described by Smith et al. (2009). The first author completed the initial stages of the data analysis process independently, following the steps detailed in the key text (Smith et al., 2009). The insights of the second and third authors were employed in the final stage of the analysis process, where all themes were discussed and agreed prior to inclusion.

The analysis began with the first author transcribing each interview verbatim. An initial readthrough of each transcript was undertaken. During the second readthrough, brief exploratory notes were made regarding thoughts, feelings, ideas and things that stood out at this stage. The first author then began to make notes on any descriptive content – the aim of this stage of the analysis process was to simply describe the content of the data, in the words of the participant. It was also an important stage in the process of getting to know the data, and becoming immersed in the transcript. The linguistic stage of noting then began, here the first author looked for the 'how' of the data – *how* was the participant expressing themselves; metaphor, repetitions, pauses, laughter, use of pronouns were all noted. Finally, conceptual notes were made, where evidence of meaning for the participant was examined. It was here that tentative ideas about the lived experience of the participant were formed, and initial themes were identified.

A total of sixteen themes were found through the analytic process, some were recurrent, and some stood independently

of others. These themes were eventually reduced to two superordinate themes. This process involved a cycle moving and clustering themes into groups which appeared similar and connected. Transcripts were reviewed to ensure that there was evidence of the proposed themes. Finally, themes were discussed with the second and third authors, this process offered a critical examination of proposed themes, supporting validity of findings (Smith et al., 2009).

Findings

Data analysis found two superordinate themes: *Intrapersonal Congruence* and *Navigating Multiple Terrains* (See Table 1). The theme of Intrapersonal Congruence is divided into four subordinate themes: Insightful Non-disclosure; Being Your True Self; The Importance of Personal Self-Disclosure; and Barriers to Intrapersonal Congruence. The theme of Navigating Multiple Terrains was broken down into two subthemes which are: Congruence in my Role and Limits to Congruence in School-Based Counselling.

Theme 1: Intrapersonal Congruence	Theme 2: Navigating Multiple Terrains
Insightful non-disclosure	Congruence in my Role
Being Your True Self	Limits to Congruence in School-Based Counselling
The Importance of Personal Self-Disclosure	
Barriers to Intrapersonal Congruence	

Table 1 – Two superordinate themes and corresponding subthemes

Theme 1: Intrapersonal congruence

"The congruence is within me", says Angela. All participants emphasised the internal aspects of congruence as important for their practice. "I think that thing about congruence, especially with children, that thing of…it's not always about saying and expressing what is going on in you" (Angela). Whilst participants compared their experience of this aspect of congruence in their work with adults and their work with children, all expressed a notable difference in what is termed outer congruence (Embleton-Tudor et al., 2004, Lietaer, 2001) or transparency (Greenberg & Geller, 2001) - the degree to which they articulate their experience, feelings, and awareness of being in the relationship with the client.

Subtheme: Insightful non-disclosure

Participants described consciously not disclosing to their young clients what they were experiencing within (their process). It was described, quite poetically, by one participant as a "knowing incongruence" (Angela). All participants described situations where they had felt something in the room, whether it be an awkwardness or uncomfortableness around the activity that they were engaged in with the child, or an emotion regarded as unhelpful to their client, and withholding this. "I got really uncomfortable working with puppets and I was sort of thinking I don't know if I can do this" (Mike). This insightful non-disclosure allows deeper intrapersonal congruence as therapists recognise and accept their experiences and feelings, and their reasons for choosing to hold them back:

> I might be working with two students who know each other, and erm…I know both their stories. And then, there might be a fight and one of them really hurts one of the others, and that's a really damaging and upsetting experience for that other client. And I will know that it's information that I can't stop myself from hearing in the school environment. There has been an occasion where I've brought that to a session with a client that hurt another client, because it felt like it was gonna be helpful. And actually a more recent situation I really, I decided to leave it out the room, but I felt, every now and again in the session, I was really aware that I felt for my other client. (Angela)

Participants also described feeling a strong desire to do more to help their young clients to heal, but knowing that they cannot outwardly express this, "In that situation you try and be congruent but in that situation there's lots of emotions that come into it, even my anger you know" (Sarah).

Participants discussed the ineffectiveness of being completely honest and outwardly congruent when working with children and the importance of recognising when it was important to hold onto thoughts and emotions. This often meant being aware of their non-disclosures and understanding their motivation for doing this. Angela states, "It's about having a real self-knowing" and "I needed to find a way of just sitting with that, but knowing it was there. So, the congruence in that situation was with me".

Subtheme: Being your true self

Congruence is often described as the therapist being themselves, freely, and bringing their genuine self into the room with the client (Greenberg & Geller, 2001; Rogers, 1957, 1961; Wyatt, 2000). As Kev put it: "congruence is more about the naturalness, the honesty, the openness, the kind of being present, being yourself".

> Was I selfish? During our interview, Sarah commented to me:
>
> > Yeah, if you see something and you don't say it then you're not really being congruent are you, you're meeting your own needs aren't you, you're trying to protect yourself from any suffering they may give you as a result of you saying what you are seeing. You're being quite selfish really aren't you if you don't say it. Do you see what I'm saying?
>
> It hit me like a ton of bricks. Did all this time spent struggling to communicate to my clients what I felt and what I saw equate to me being a selfish person, a terrible counsellor who had to have her own needs met first. These thoughts circled as I tried to gently acknowledge them, and then bracket the emotions that they evoked so that I could move back to my participant.
> I did share with my participant that her words had touched me. I felt it was important to acknowledge that her words had touched me, before we continued with the interview.

All participants described this quality as crucial for working with children because of the intuitiveness of children and their ability to recognise when someone is being disingenuous. "Children see through things, they know when you're being false" (Mike). For one participant, being your true self meant more than a presence and a naturalness, it had to be explicit; he argued for the importance of self-disclosure when counselling children.

Subtheme: The Importance of personal self-disclosure

Whilst all participants shared the importance of withholding their process from clients, for one participant, self-disclosure of personal information and facts was an integral aspect of his experience of congruence with children. For this reason, it was important to include. Kev explained: "I think the relationship is always key and if they don't feel like they can trust you, or they don't know anything about you, I feel that children, more than with adults, children need small self-disclosures". For Kev,

revealing personal information to children was essential as it helped to build trust, strengthen the relationship, and humanise him as a therapist. He described a situation where he had disclosed something about himself to a child and this had not only helped to build a bond but had also helped the young client to develop attitudes around difference, as well as their own sense of self and their place in society. Kev works in a religious school.

One of the children came to me with a crisis of faith…I don't have a religion…so we were having the conversation and I told her I don't have a religion but I can see why some people have a religion…I can see how some people might use religion as a kind of coping strategy to kind of look for answers…she was quite happy for that because she then realised that she could come and talk to me about not having this religion but at the same time but being aware that her views and other people's views might not always align

He went on to explain that the level and nature of self-disclosure when working with children differs to when working with adults, owing to its centrality in building up a meaningful and trusting relationship. Kev believed that adults do not need this subtle, yet valuable, aspect of congruence to be able to trust him, and feel comfortable enough to work with him.

Subtheme: Barriers to congruence

Participants also identified various barriers to congruence, times when they felt that something just was not right. These barriers came in two forms, feelings of uneasiness and different parts of "self" coming into the therapy room.

Mike described feeling awkward, uncomfortable, and embarrassed when in the room with a child and experienced doubt over whether to voice this or not. For him, by not voicing his feelings, he was being incongruent, but he also recognised that if he did communicate his true feelings, he may interrupt the child's process and in turn hinder therapeutic progress.

And I've been in that situation with children and I'm thinking okay am I going to be honest here and say actually I don't like that; it's making me feel uncomfortable? But at the same time thinking okay well, but this is the child's frame of reference, this is where, if I kind of say something about how I am feeling uncomfortable, it's going to stop them from releasing whatever they need to release.

He wondered whether he needed to learn to be more outwardly congruent with children, as not doing so may result in the children questioning his genuineness, because he was not being his true self. He described the process as a "contradiction" (Mike). What this therapist appears to be describing here is the incongruence detailed in subtheme one (Insightful Incongruence). However, whilst some therapists are well versed in recognising and accepting this aspect of congruence when working with children, this participant isn't quite so comfortable with it and therefore it effectively acted as a barrier.

Two participants explored the impact of other parts of "self" coming in to play, and how this impacted on their ability to be congruent. They were both mothers to teenagers, and because of this, they described the unwanted presence of themselves as 'mother' in the therapy room. Intrapersonal congruence, and an acknowledgement of their own thoughts and feelings, was cited as a vehicle for moving away from their own emotions and back to the client.

I just need to know that I'm feeling for the mum in the situation and that awareness almost helps me shut it away. Or maybe it doesn't, and I bring it to the session, but actually if I'm honest usually they are quite inappropriate, and I need to get them out the way (Angela)

Angela's role as a mother quite often led her to communicating with her client in an incongruent way, as she carefully navigated and unravelled her own emotions at the same time as trying to ensure that she stays within her role.

I wouldn't say to a child, well I can see where your Mum's coming from, because that's not my role, that's another role. My role is to be here for you. So I wouldn't put it that way, maybe that's incongruence. But the element of Mum in this story is important, but it's how I bring that in without taking the other role, without shifting my allegiance with this client. Yeah, in that sense, I guess I'm not fully congruent (Angela).

Similarly, Sarah spoke of her own anger when dealing with children who have been abused by their parents. "So, in that situation you try and be congruent but in that situation there's lots of emotions that come into it, even my anger you know. And I might be thinking how can somebody do that?" (Sarah). The challenge here appears to be her difficulty in being fully congruent with the client by communicating her feelings versus holding onto her anger, acknowledging that it was hers.

Theme 2: Navigating multiple terrains

Participants acknowledged that because they held a position in a school, they had to carefully define and characterise their role as school counsellor. Critically, this meant differentiating themselves and their role from that of the teaching staff within the school, because, as Kev explained "my boundaries are a little bit different to what the rest of the schools are". Ultimately, this impacted on the way that they used congruence with their clients as the counsellors navigated the multiple terrains of counselling and education.

Subtheme: Congruence in my role

Participants indicated that the distinctive role of the counsellor in school often altered the way in which they were outwardly congruent with their clients. A conflict between these two roles was evident. It has been proposed that school-based counselling is limited in what it draws from the traditional school experience and what traditionally happens in school (Law, 2007); this can mean that children and young people entering school-based counselling for the first time can feel unprepared. Sarah states that "they probably think it's gonna be like a lesson and it's not like that at all".

For Angela, pupils in school can feel chastised for their 'way of being', and so she is very aware of this when being congruent with her clients. She refers to the centrality of intrapersonal congruence and insightful incongruence in this situation; "So I'm really always aware of that with congruence. Aware of being really out there with it, what's going on in me, because I think sometimes, they can feel really corrected". She goes on to describe how she takes note of what she is feeling in this situation, and carefully chooses how she voices it to maintain the ever-vital relationship.

> I would find other ways of like, communicating it, I might not suggest that that's about them, but keep it very much about me, when sometimes it's not always about me. But I think that young people sometimes would misunderstand how you put it, put there as a two-way thing. (Angela)

Subtheme: Limits to congruence in school-based counselling

Participants described limitations when working as a school-based counsellor. These limits take many forms: the length of therapy and the impact this has, the nature of confidentiality, and the counsellor's responsibility in terms of safeguarding. These limitations influenced how participants experienced and communicated congruence in their practice.

When describing the limitations placed on the number of sessions available to clients, Sarah explained how she felt that she often moved away from a purely person-centred approach and towards a more directive one in her use of congruence. This approach was to support a speedier change process for the client.

> Someone who is fully person centred would just leave them and wait for them to tell them, they wouldn't push anyone towards that particular emotion... But that's not really being the best asset for them I suppose, they need that prompt, otherwise they are not going to get any further.

What Sarah appears to be describing is what Grant (1990) has termed *instrumental non-directiveness*. Ultimately, Sarah's aim was to enable growth in her client, and in this instance, she felt that by maintaining a purely nondirective attitude she would not have achieved this aim. She therefore acted pragmatically in recognising that her client required something different. As Grant describes it: "If being nondirective facilitates growth for a client in a particular instance, then it is valuable; if it does not, then the therapist decides whether continuing to be nondirective or adopting a different approach would be more effective" (1990, p. 77).

Similarly, the structures and frameworks within which the participants were working also influenced their use of congruence. One therapist detailed the delicate balance of maintaining presence with the client, whilst also rationalising her safeguarding responsibilities.

> Is this something that we need to share? When do I tell the student that? How do I bring this up? Oh, this really is something that we are going to share, okay here we go. How so I share this? If I don't bring it up, should we share it? How am I gonna do this? And all that's going on internally even before I bring it to the child. (Angela)

Discussion

The findings presented in this article focus on therapist experiences of congruence in their work with children in school-based counselling. The findings not only validate the existing literature in the field, but also offer some important elements and distinctions based on participants lived experience, that are not specifically focussed on in current literature. Key findings indicate that congruence with children is experienced largely *intra*personally – a focus on personal awareness around therapist process was key. For participants of this study, congruence did not always equate with disclosure of this process to their young clients.

This study describes intrapersonal congruence as the ways that participants were internally congruent regarding the thoughts and emotions that arise during therapy. It was a particularly prevalent throughout the accounts of both Angela and Mike, who made repeated first-person references to being inside or within. As Angela states: "I'm just aware of that for myself, within myself, congruent to myself". This state of intrapersonal congruence conjures impressions of privacy or secrecy, with higher levels of awareness of their privately felt internal states leading to a sense of stability, reliability and reassurance – Mike emphasises the importance of this when he states "we have got to protect ourselves"; as if intrapersonal congruence

is the security blanket needed when therapists are deciding in the moment if and how to act upon their internal states.

These lived experiences contribute to existing debates around the communication aspect of congruence. For several writers, congruence involves the therapist being active and spontaneous in the flow of their communication, outwardly voicing what is happening inwardly (Embleton-Tudor et al.; 2004; Lietaer, 2001; Mearns & Thorne, 2013). However, this was not the case for participants of this study. Whilst intrapersonal congruence was paramount, they often deemed it inappropriate to be outwardly congruent when working with children.

The understanding of congruence as being aware of internal states but withholding and restricting what is outwardly communicated to children (when deemed not useful for them) is closely matched with existing definitions of congruence which place emphasis on the *experienced* elements of congruence i.e., therapist personal awareness and availability of feelings (Frankel et al., 2016; Kolden et al., 2011; Rogers, 1957, 1961).

Closely related to this aspect of congruence with children in school-based counselling, is the notion of insightful non-disclosure of therapist process. Therapists described a variety of situations whereby there was a mismatch between what they chose to communicate outwardly, and what they felt inwardly. Participant descriptions of this element of congruence connote images of weight and the heaviness of what is held vs what is shared: "I have to really think about what I'm holding, why I'm holding something and what I'm not gonna hold" (Angela).

"The room" – repeatedly referenced by all participants - takes on a life of its own and is an embodiment of the fortified therapy space where therapist thoughts, feelings and emotions are either invited in or ejected, with those that are ejected bearing down on the therapist as they hold their full weight.

Participants explored the challenges they face when deciding whether or not to communicate explicitly to their clients what was happening internally. Mike's use of metaphor "biting at me, inside of me" evokes notions of the intrusion of his own personal monster. The concept of encroachment is echoed by Angela: "shut it away", "I need to get them out of the way" and is interpreted as evidence of their internally fought battles. Several reasons for insightful non-disclosure were cited, including protecting the relationship, being triggered by the client, and feeling awkward and embarrassed when with the client.

Several writers suggest that higher instances of disparity between internal states and outward expressions (either verbally or non-verbally) in the therapeutic relationship serve to weaken it as discrepancies of this kind can lead to unsatisfactory, unproductive and even harmful therapeutic relationships (Haugh, 2012; Grafanaki & McLeod, 1995, 2002).

Arguably then, if disparities of this kind occur in the relationship, then they must be resolved as without this no therapeutic change will occur (Mearns & Thorne, 2013). However, this study suggests that insightful non-disclosure is not only unavoidable when working with children because of its importance in maintaining a therapeutic alliance, but also that it serves to enhance the therapeutic relationship rather than damage it.

The key word here is *insightful* – an awareness is imperative when contemplating non-disclosure and congruence (Brazier, 2001). All participants explained in detail how they were aware of their feelings and emotions - they were not denying or avoiding them - but rather were accepting their emotions and actively choosing to put them to one side, for the benefit of their client and maintenance of the relationship. This conscious action arose from participants intentions to "do[ing] no harm to clients and to facilitate their development" (Greenberg & Geller, 2001, p. 149). Participants described the factors that were taken into consideration when they chose not to disclose, including the nature of the work and the age and developmental stage of the client. In this sense, therapists were not only considering their 'self' and their client in relation to congruence, but also the context and realities of the institution within which they are working. Congruence "does not require that one's behaviour correspond at any given time with his/her privately known or unknown feelings" (Frankel et al., 2016, p. 159). These findings are supported by Jayne's (2013) definition of congruence in child-centred play therapy, where congruence is described as "being aware and open to one's moment-to-moment experience, thoughts, and feelings and expressing one's self in a real, natural, and free-flowing way in relationship with the child" (p. 121).

The subtheme "being your true self" resonates with Cornelius-White's (2007b) five-dimensional model of congruence, in which he cites being "internally consistent" (2007b, p. 234) and being "real or genuine…not playing a role" (2007b, p. 232) as two of the five dimensions. Rogers also describes how a congruent therapist is one who is "without façade" (1965, p. 185).

Participant accounts of this aspect of congruence appear to imply feelings of exposure and allude to the revealing nature of being laid bare in their interactions with children, as Sarah explains: "you have to really be quite vulnerable yourself I suppose" and then "I have to be quite vulnerable". Sarah's switch from third person to first person language is notable, as if she has attempted to create a barrier but realised that she cannot. The idea of exposure is also evident in Kev's account; he reflects on his perception of bravado: "I always find that if

you're not yourself and you put on a kind of bravado" – suggesting that whilst shielding behind a grandiose front may feel safer for him than being his true self, there really is no protection to be had when working with children – "They might not know who you are but if something doesn't feel natural to them, they're not gonna talk to you, they're not gonna build up that relationship".

Knox & Cooper (2011) note the importance of lack of a professional mask or role in facilitating moments of relational depth in therapy – a therapeutic state characterised by intense contact and engagement, in which each individual is entirely real with the other (Zarzycka et al., 2022).

Adamczyk (2018) examines the link between working at depth and the therapist's ability to offer multiple configurations of their true self in the counselling room. Describing how her ability to contact and offer a particular configuration of self (her vulnerable child) enabled her to connect with her client's configuration of a vulnerable boy, she names congruence as the "leading facet of an effective therapist" (p. 53). This example highlights the significance of a therapist being in touch with various configurations of their true self in enhancing congruence within the therapeutic relationship. As Adamczyk explains, "[h]ad I not accurately symbolised my experiences of childhood abuse, I would not have been able to include this part of my self-experiencing into my work, hence I would have not been fully congruent" (2018, p. 53).

Here, the presence of multiple configurations of the therapist's self are considered a positive aspect of the counselling relationship, however participants in this study described occasions where an aspect of "self" had acted as an unwanted barrier to congruence. At present, this is an underexplored area within the person-centred literature. Rowan & Jacobs (2008) highlight what they consider two key therapeutic questions; who is the therapist? and, how does this play out in the therapeutic relationship? Both Angela and Sarah described how an aspect of self (mother) had arrived, uninvited, in the therapy room and threatened to thwart the process. For Angela this led to an internal conflict, as she battled with her feelings of allegiance to her client's own mother. She returns to the idea of shutting away - "I just need to know that I'm feeling for the mum in the situation and that awareness almost helps me shut it away", a heavy weight being temporarily banished into a holding place that exists within her mind. She questions "so how do we navigate those different terrains?", referencing the self-guided and autonomous journey that is taken with clients in the therapy room, over what can be a rocky and uneven landscape. Angela names "awareness" as a helpful factor - her compass helping to guide her through situations of uncertainty.

Sleater & Scheiner (2019) outline the importance of developing a strong internal supervisor who objectively

notices and reflects on what is happening in the room – participants described how their internal supervisor had picked up on themselves as "mother" entering the room and so were able to put this to one side – yet this did impact upon their congruent responses.

For Kev, personal self-disclosure was identified as an important feature of congruence and of therapeutic relationship building with children. Personal self-disclosure was one way in which he attempted to remove any existing barriers between him and the client. He alludes to his attempts to maintain a real and honest relationship with children- "you kind of try not to put on that professional mask", which may link to the idea of "bravado" – a professional mask offering disguise and protection of the real him. He later states "you're gonna get me the way that I feel I am". There is a sense of boldness and courage in this candid statement – Kev knows who he is and is confident in presenting this to children, and personal self-disclosure is a conduit to this.

Personal self-disclosure within the person-centred and experiential therapies is a contentious issue and therapists are urged to proceed with caution as it can be used inappropriately (Sheperis et al., 2017; Tolan, 2016) and can shift the focus of therapy away from the client (Simonds & Spokes, 2017). Yet it has also been suggested that disclosure by experienced therapists can be extremely helpful (Pinto-Coelho et al., 2018) and can strengthen the therapeutic alliance (Sprecher & Treger, 2015; Sheperis et al., 2017) as it humanises the therapist and normalises experiences of the client (Simonds & Spokes, 2017). Literature relating specifically to therapist self-disclosure when working with children is extremely scarce (Gaines, 2003).

Gaines (2003) contends that many therapists working with children and young people make considerable use of personal self-disclosure. He describes a relational approach as central to his work, and from this perspective "therapist self-disclosure is a natural part of the therapeutic interaction" (2003, p. 570). He notes that often it is not the content of the disclosure that is important, but rather the willingness on the part of the therapist to share aspects of self in the same way that children are asked to.

Despite the relatively large amount of research on counsellors in school, there remains little research which looks at the management of the role of counsellor in an educational institution, and the challenges that this may bring. Evidence from this study indicates that working in a school environment has an impact upon therapists' experience of congruence – participants thought carefully about how they were going to voice something, and they felt a perpetual pressure to ensure they were working within the school's rigorous structures.

The constant and unrelenting nature of work in school is directly referenced by Angela: "The frameworks just exhaust me" – the frameworks appear domineering and dictatorial. This is echoed in her next statement "So, is this something that we need to share? When do I tell the student that? How do I bring this up? Oh, this really is something that we are going to share, okay here we go. How so I share this? If I don't bring it up, should we share it? How am I gonna do this?" Her repeated and fast-paced questions are understood as evidence of the quick thinking that is required when working within these structures, and how depleting this can feel.

Being a counsellor in a school is an ever changing and progressive role, and as well as the therapeutic responsibilities of a counsellor, it is also important to have current knowledge on the organisational practices within the school (Pellitteri et al., 2005). Smyth (2013) notes "It is incumbent upon child-centred practitioners to openly accept the operating frameworks of professionals in other groups, even if there may appear to be philosophical differences" (2013, p. 169). There is a distinct lack of research into the perceptions, roles, and expectations of school counsellors within the United Kingdom, however research from further afield has found that role conflict is associated with high levels of counsellor burnout and job dissatisfaction (Alghamadi & Riddick, 2017; Andronic et al., 2013; Bryant & Constantine, 2006; Sim Huat et al., 2018). Therefore, we propose that further research is required to understand the lived experiences of counsellors working in primary or secondary schools, in order that better support be offered to them.

Limitations

An obvious limitation of this study is its scope given that it explores only one of three therapist provided conditions, and one of the six conditions which are the foundation of person-centred counselling practice (Rogers, 1957). This study was needed because congruence is, arguably, *the* most important of the therapist conditions (Gillion, 2007; Rogers, 1961). However, until congruence is studied alongside the other conditions, we are left with only a partial view of how these conditions interlink with one another in the therapeutic process of school-based counsellors. Further research, therefore, could consider therapist experience of congruence, empathy and unconditional positive regard with children and young people in school-based counselling.

The themes and their corresponding subthemes were uncovered through a process of interpretation which, until the final stages of analysis, involved only the first author. It is noted that the two key concerns of IPA – to *give voice* to and *make sense* of participant stories, are best achieved in the context of peer support (Larkin & Thompson, 2012). The authors are satisfied that the IPA analysis was completed in an

attentive and gradual manner in which the first author spent time dwelling with the data (Finlay & Hewitt Evans, 2022), in order to access interpretation that was close to the participants' words and therefore based in a phenomenological understanding of them. However, it must be acknowledged that as this process was largely an independent one, some of the nuances achieved through deeper and more sustained discussions may have been lost (Larkin & Thompson, 2012).

Two of the research participants in this research were secondary school counsellors, and two were primary school counsellors. It was not considered how this diversity amongst the participants has impacted the research findings, and whether there were differences in participant experiences of congruence based on the age group worked with. Future research may consider a more homogenous sample, for instance, studying participants who work with just primary or secondary school clients, rather than a combination of the two.

Another impact on the research process and findings of this study, is the first author's position as an "outsider" (i.e., not part of the "researched"). Whilst researching the unfamiliar has many advantages, such as empowering the participants as "experts" due to the researcher's inexperience with the research area, it also has drawbacks. It may act as a barrier to recognising concealed or subtle nuances within themes (Berger, 2013) – this is evident in the researcher's surprise at her identification of the first theme. The authors have considered that, were the researcher familiar with the area of counselling children and young people, a different interpretation may have been produced.

I noted a feeling of curiosity during the data collection phase. For me, congruence had always been about risk-taking, challenging and voicing that which was difficult. But my participants seemed to be suggesting something different in their interviews.
Curiosity turned to wonder when I began to realise that this is not what congruence meant for therapists working with children and young people – Krystal.

It is important to note that both the terminology and literature of IPA has evolved since this study was completed (Smith & Nizza, 2022; Smith et al., 2022). However, this study has been written up using the original concepts and phrases used within traditional IPA (Smith et al., 2009) in an attempt to remain congruent in our account of this research process.

This study aimed to bring to light therapist perceptions of the use of congruence with children in school-based counselling. In this sense, the study achieved its aims. However,

throughout the process the perspective of the children and young people themselves was missing. Further research could explore this topic further with clients of school-based counsellors.

Conclusions and Implications for Training and Practice

This research has uncovered new and interesting ideas about how therapists working with children in school-based counselling services experience and convey congruence with their clients.

Key findings from this study emphasise the significance of intrapersonal congruence - participants were consistently inwardly congruent regarding their inner organismic experience and emphasised this as central to their practice; however, participants found it was not always appropriate to disclose this to children and young people.

The debate around what congruence involves in terms of therapeutic practice remains lively amongst person-centred theorists, and perhaps the most interesting element of this debate has been identified by participants in this research study - the extent to which the therapist outwardly communicates what is happening for them inwardly (Gillion, 2007; Purton, 2013).

Emerging from this, is the importance of exercising caution in deciding when and how to communicate inner experience to children, along with an element of insightful non-disclosure. Whilst participants were often aware of their inner organismic experience, they purposefully chose to withhold strong feelings and emotions, or communicate them in a way which was perhaps not entirely congruent, owing to the nature of the relationship and the counsellor's role within it, influencing factors also included the age and developmental stage of the client. Participants discussed how the presence of certain aspects of self in the therapy room had an impact upon how they communicated with their clients.

The central findings from this research have the potential to change how counsellors are trained. It is important to inform trainee counsellors about how the therapist provided conditions are experienced and conveyed to children as congruence may be different in work with children and young people compared to work with adults.

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