Humanistic Psychological Accompaniment Model: A Contribution to the

Teaching of Humanistic Psychotherapy

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Abstract
A model of psychological accompaniment designed and applied at the Human Development Center for the Community (CEDEHC in Spanish) of De La Salle Bajío University. It's conceptually based on five theoretical approximations: Human Potential Development, The Person Centered Approach, Existential Psychotherapy, Gestalt and Transactional Analysis. It's implemented by young psychology practitioners under a brief therapy approach of approximately twelve sessions. This study shows the pretest-posttest of the Personal Orientation Inventory (POI) results in 36 persons that received psychological accompaniment under this model. Significant differences were found in the 12 scales, supporting the hypothesis that the psychological accompaniment model had a positive effect in the participants' POI profile; moreover, the probabilities that the proposed model would meet it's two main objectives, which are educating students in a humanistic standpoint and providing an effective support to those who go to the center seeking psychological help, are strengthened.

Keywords: Psychological Accompaniment, Humanistic Psychotherapy, Personal Orientation Inventory (POI)

Introduction

In this work we show the results of an effectiveness evaluation of the process of psychological accompaniment that the practitioners majoring in Psychology at the School of Education and Human Development from Universidad De La Salle Bajío offer to the community. The accompaniment model has been structured based on humanistic psychology, and on the Authors' experience during the supervision of this process, which is why it can be considered a model developed within the Lasallian institution, with two fundamental objectives: A professional education of the students in this field, and being a process of effective help for the people that receive this service. We consider that the model is completely fulfilling both goals, as its continuous revision and evaluation presented in this report shows. The objectives of the psychotherapy and its relation with personal growth, from the self-determination humanistic point of view are briefly exposed in the theoretical fundaments, as well as the concept of accompaniment and the basis and operatively of the model.

The objective of psychotherapy: Personal growth

Generally one can say that the objective of every therapeutical process is the person's psychological health, given that the person is sick in a way. Nevertheless, from a humanistic perspective, psychotherapy has a different meaning, given that it conceives most of emotional problems that human beings suffer, not as a sickness but as part of their nature. Thus, the objective of a therapeutical or accompaniment model is fundamentally personal growth or human potential development. This idea is inserted in the first works by Maslow, Rogers, Goldstein and other pioneers of the humanistic approach in psychology, and has been a concern for contemporary researchers and theorists to try to give a scientific basis to this idea; this may be one of the weaknesses the humanistic approach has had, which has been greatly criticized, like in the case of Abraham H. Maslow's theory of needs and self-realization, that at the same time turned into a common reference of other following Works, its scientific principles were not completely satisfactory, and even the author himself recognized that much had to be done in order to empirically validate its essential concepts.

Regarding this, one of the most serious and exemplary proposals that state personal growth as the fundamental objective of the therapy or accompaniment process, is the Self-determination theory, developed by Deci and Ryan (2000 y 2002). Self-determination theory (SDT), can be considered a macro theory of human motivation, related to personality

development and its functioning under the social context. It analyses the degree by which behavior is either volitional or self-determined, or the quality of people's actions, considering a level of reflection and involve themselves in activities, starting from a choice (Deci, Connell & Ryan, 1989). It is based on an organismic and dialectic approach, which starts from the idea that people are active organisms, with natural tendencies towards psychological growth in a continuous effort to integrate their experiences in a manner coherent with their will.

Deci, Connell & Ryan (1989) define Self-determination as an individual's capability to choose and perform actions based on his decisions. Self- determined people see themselves as starters of their own conduct; they select results and choose a line of action that helps them achieve those results. Competence and self-determination are linked, meaning that competence has to be given within the context of Self-determination, so it can influence intrinsic motivational processes (Reeve, 1998). Deci and Ryan mention that experience gathered through life influences the way in which the individual regulates his or her actions, allows them to manifest their initiative (self-determination) and their capability to decide over their own conduct (Deci, Connell & Ryan, 1989). This is just one of the components of the subject's personal structure, but it also includes personality and emotions, which are also internal factors that determine if a person is self-determined or not.

As the process of accompaniment provides an environment that favors these human needs, the greater the development of the person, client or patient's potential will be, thus improving their well-being.

The concept of Accompaniment

From a psychological humanistic approach, human beings have the capability to solve their problems if they find the conditions that allow them to focus on them and develop their creative potential. Moreover, for most of the humanistic authors, the great majority of human problems do not concern psychopathology (as with different types of psychosis and severe personality disorders), but the field of human relations, communication, and the way a person handles his or her feelings and emotions. For example, mourning over the loss of a loved one, conflicts in their conjugal relationship, and a feeling of low self-esteem shouldn't be seen as "pathologies" that require psychotherapeutic intervention, but experiment instead a reflexive process, of emotional contact and to dare experimenting certain life experiences, which are situations that don't necessarily concern the clinical field.

For the humanistic model here developed, we consider that the term accompaniment is the most appropriate one for the psychological support awarded, given that its meaning is very punctual: to be or to go in the company of another; to follow-to conduct-to escort-to add-to join-to associate-to assist-to help- (according to the "Diccionario de sinónimos y antónimos" 2005, Espasa-Calpes, Madrid). The term accompaniment is not new in humanistic psychotherapy, and has a similar meaning to counseling or relation therapy, whose theoretical principles mainly come from Carl Rogers' non-directive therapy. Its conceptual use in this model is meant to emphasize the fact that the solution of the specific problematic depends more on the client of consultant than on the orientator. The term accompaniment is not new in humanistic psychotherapy, and has a similar meaning to "counseling" or relation therapy, whose theoretical principles mainly come from Carl Rogers' non-directive therapy. Its conceptual use in this model is meant to emphasize the fact that the solution of the specific problematic depends more on the client of consultant than on the orientator.

A proposed definition would be the following one: it's about a professional support service through preventive and orientation actions towards persons, groups and institutions that need help in taking decisions or solving problems that alter the normal course of their lives. Besides offering orientation, it implies giving support, emotional contention, discussing existential topics, life planning, goal establishment, etc. The main topics to deal with are mourning, life crises, accident crises, personal, interpersonal, family, work related and educational conflicts.

Accompany model basis for the CEDEHC

The model of accompaniment from the CEDEHC[*], is developed within humanistic psychology, specifically under five theoretical perspectives: the movement called Development of Human Potential, led by Lafarga (2003 and 2014), The Person Centered Approach (Rogers, 1988 and 1997), Existential psychology (May, 1988 and 2000), Gestalt Psychotherapy (Perls, (2006) and Transactional Analysis (Berne, 1974 and 1985). About its application or instrumentation, the work of Carkhuff (1972) and Egan (1997) has been taken as reference. Even though these theories and therapeutical work methods share philosophical and conceptual elements, they substantially differ in many others as well. This has led those responsible for the center and the student's accompaniment practice to properly develop an

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integrated model, carefully adapted to their needs and objectives. The model is transmitted through theoretical subjects and a completely practical one called Humanistic therapy, imparted in 8th. semester.

It has been said that from the humanistic approach, the most important aspect in the therapeutical or accompaniment process is the therapist-patient or orientator-consultant relationship, above any other theoretical and methodological aspect without this implying that we lessen their importance; what we are saying is that they are a necessary condition, but not enough to observe the benefits on people that assist for help. One could take different theories and methods and work successfully with them, taking the limitations all of models have, thus we have taken the mentioned above for very practical reasons associated with didactics and education of the practitioners from CEDEHC. The concepts taken from these theories are here shown.

1) Development of Human Potential. The model specially takes it as the basis of its humanistic philosophy, the principles that the Development of Human potential promotes, that based on Jaramillo (1997) can be reformulated thus: a) Man lives subjectively (He builds his own reality); b) Each man is a system of configured or organismic uniqueness (physical, emotional, mental and spiritually); c) Human nature is profoundly considered as positive; any choice human beings performs, expresses his search for development and self-realization; d) Man is in continuous restructuring, or permanent development; e) Man is wiser than his intellect; f) Human beings possess freedom and choice; g) The accent to promote development must be put in health, taking into account the person's capabilities and potentialities, and not just their limitations. These principles are our activities' fundamental guide at CEDEHC and we try to transmit it to students and practitioners of accompaniment, such that the method's body of knowledge and methodological tools are dependent to this vision of human beings.

2) The Person Centered Approach. The elements taken from Carl Rogers' work are above all the essential respect towards the person; His own understanding of psychotherapy, at first called Non-directive therapy, ended up being named the "Person Centered Approach" precisely to highlight that the practice of psychology, be it psychotherapy, education or at organizations, must be sustained on the fact that human beings are different, we experience existence in very peculiar and essentially unique ways. Starting from similar ideas, Rogers proposes a general hypothesis that results critical in the humanistic orientation: "If I can create a certain type of relationship, the other person will discover his or her ability to use it for his

or her own maturity and thus produce individual change and development" (Rogers, 1988: p. 28). From this, three factors that he states are produced to perform his own therapeutic work: Unconditional Positive Acceptance, Congruence, and Empathy.

3) Existential Psychology. From the existential and phenomenological school, three fundamental aspects were taken (May, 1988 and 2000): a) The epoché, as a fundamental attitude from the counselor or facilitator. We conceived that the fundamental assignment of the one accompanying in a therapeutic process is to learn how to put aside those different presumptions or prejudices that he or she could have regarding his or her consultant3, being alert of his or her tendency to listen to and pay attention to certain things and not others. The meaning of the Word "consultant" in English is synonymous to adviser, assessor, etc. in Spanish it refers to the person who seeks advice rather than the person who gives it. It's more related to the concept "client" from Carl Rogers. Ezama, Alonso & Fontanil (2010), perform an interesting analysis to question the biomedical model of psychotherapy, proposing to modify the terms sickness, disorder and symptom for failure, dysfunction and complaint, respectively, arguing with similar ideas as the ones exposed in this work. But they also consider relevant to use the expression Consultant instead of patient or client, given that it explains by itself the role that the person plays when they arrive to a "Consultation", and avoids giving them a medical tag (patient) or a commercial one (client).

Developing complete confidence in his or her immediate experience and the consultant's as well; b) The extension of the present. Phenomenology and existentialism look for the apprehension and description of the immediate experience as it appears in the present. This perspective introduces a specific conception regarding time within the humanistic-existential psychotherapy's framework, allowing to work on the "here and now". However, it's important to mention that this does not imply in any way devaluating the past and future's relevance; quite the contrary, the client's necessity to be capable of understanding his or her own history, and to construct a life project that will guide him or her is recognized and undertaken, so it confers sense to his or her existence, but the fact that the person lives in the present is highlighted, and that a successful therapeutical process requires paying attention to this circumstance, turning it into a central accompaniment dimension; c) The unique experience of the session. The third point taken from the existential approach, the insistence that, just as people are unique, so is every accompaniment session, which is why it should be valued by and in itself. Practitioners are exhorted to get ready moments before the session to mentally and emotionally predispose themselves to "fully be" with their consultant, admitting

that the main tool of the process is precisely the relationship that is established between them. This is why, besides some exceptions4, the counselor is asked not to take notes during the session, that he sits comfortably and very aware of his or her body language so he or she can manage to transmit this sense of "full accompaniment"; at the end of the session, of course, its very convenient to write down their report on their field diary.

4) Gestalt Therapy. Some fundamental concepts from the Gestalt approach have been taken to understand the nature of the consultant or patient's problems that go to CEDEHC. These are: a) Awareness: This is a key concept for those that base their practice on the Gestalt approach (Perls, 2006); being aware is to come in contact, naturally, spontaneously, with the here and now, with what one is, feels and perceives. b) The Here and Now. In order for the patient to feel, to experiment the "here and now", one starts to work on his sensations (hearing, vision, tact, tone of voice, etc). This phenomenological definition of Gestalt therapy contemplates the process we are living through as unique and exclusively our experience; c) changing the "Why" and the "How". Perls considered that words, when used to "explain" and to distance oneself from the evident, or reality, are more of a burden than something useful. If they ask themselves the "how" question, we are looking at the structure, we are looking at the obvious; worrying about a deeper understanding of the process. The how gives us insight, orientation. The how shows us that one of the basic laws, structure and function identity, is valid. If we change the structure, the function changes; d) The Cycle of Experience. The conceptualization of this cycle pretends to reproduce the way subjects establish contact with their surroundings and themselves. In the classic schematics of the cycle, six successive stages are identified: 1) rest; 2) Sensation; 3) awareness or figure formation; 4) Energization; 5) Action and 6) contact. In general terms one can say that the cycle of experience, given within a specific and significant context, constitutes by itself a Gestalt. An interrupted cycle is an unconcluded Gestalt; an entity that will parasite the organism consuming its energy until fulfilled; e) Experience Blocking or Self-Interruptions: Fritz Perls (and Laura, his wife and co-founder of Gestalt therapy) described up to five mechanisms: introjection, projection, confluence, deflection and retroflection.

5) Transactional Analysis. Regarding Transactional analysis (TA) (Berne, 1974 and 1985), it is important to remark that he considered people to possess the potential to live as autonomous beings and to free themselves from mental and conductual schemes that limit their personal growth and vital health. The most important topic taken from TA is the development of a life plan or life-script, considering that it offers a very practical

approximation for working with the consultant's history. A person's life-script is based on messages which constitute a frame work on how to act, build relationships and live.

Summarizing, the development of human potential, the approach centered on the person, and existential psychology fully share the notion that it is the person who has the capability to pull through with his own problems starting, fundamentally, from being aware of what is happening to him and how they got into that problematical situation; they also promote the awareness of the person's own resources, existing or in need of development, needed to face a normal life from a more realistic and functional point of view. On the other hand, Gestalt and Transactional Analysis tend to be more practical in their concepts and self-discovery, exploration and reflection techniques, which allow for a better comprehension of inner life, which complement the intentionality model from CEDEHC, which means to be a relatively short or brief accompaniment model. The intention of not extending the process too much has a practical or realistic sense: people, according to our experience, rarely or too long persist in therapeutic or orientation processes, due to different motives, like lack of time, loss in interest, personal resistance towards these types of processes, economical reasons, etc. Moreover, the model itself is meant to give a set of rules for people to continue their work on their own once the consulting stage has finished. In any case, there's always an invitation to start a new orientation process if the consultant so desires.

Process of Accompaniment stages

The psychological accompaniment model from CEDEHC was designed based on the two fundamental objectives of the humanistic therapy practitioners' education, and to offer an adequate service to the demanding population, plus the theoretical elements earlier mentioned, which we will now describe.

1) Initial Contact Phase (approximately the two first sessions): Generate basic empathy, being with the other. In this stage the practitioners are asked to focus their attention in transmitting, above all, trust and empathy to the consultant, taking care in creating an adequate rapport, minding their body language, etc.

2) Phase Two (sessions 3 to 6): The exploration of the consultant's central problematic: answer respectfully and with empathy; establish harmony and an effective and collaborative work relationship.

3) Phase Three (sessions 7 to 12): Central Problematic Comprehension and its possible causes: identifying dysfunctional topics and behavior patterns; visualizing a wider overview.

Why just twelve sessions? The experience gathered from educating several generations of students at CEDEHC, plus basing our work on Psychological Orientation literature (i.e. Egan, 1997), has allowed tuning the number of sessions by which the accompaniment service is granted, allowing us to offer a relatively short but intensive enough process that covers the stages that the model proposes. Of course, there's complete flexibility, as in the case of consultants that may feel satisfied with seven or eight sessions, and others that may need a little more time, but in general, this time lapse is considered as sufficient to check an emotional problematic that is not producing a high degree of dysfunctionality, but that consultants consider as relevant in their life stage

It is also important to state that the division of the accompaniment phases into a given number of sessions is presented by a practical and didactic direction, but evidently it isn't nor can it be something punctual. However, it does have a logic, because one can expect that a basic empathy has to take place to be able to start a positive facilitator-consultant relationship, which could take at least a couple of sessions; after this, one would expect the exploration of the central problematic and its full comprehension in order to make the necessary decisions. It's clear to us there will be consultants that quickly arrive to the comprehensive part, or be aware of the motives that have taken them to experience their lives in a certain way or to understand the reasons of their suffering, while others may only arrive to the exploratory phase leaving the comprehension phase for another time, in which they may have the personal resources or the appropriate life experiences that help them to better understand the problematic they are facing or experimenting.

The Accompaniment Process Evaluation

One of the first studies that evaluated the effectiveness of psychotherapy was performed by Rogers (1988), who recorded complete sessions of renowned therapists of that time. After a detailed analysis, he arrived to the conclusion that besides the therapeutic technique employed the therapist's characteristics and the established relationship with the patient which determined the process' effectiveness. From these studies and his own experience the already classical elements of psychological accompaniment: unconditional positive acceptance, empathy and congruence.

In general, according to several contemporary investigations (Botella & Feixas, 1994; Lambert & Bergin, 1992; Lafarga, Groues, Pérez & Schlüter, 1997; Chambless & Ollendick, 2001; Bados, García & Fusté, 2002), psychotherapy is more effective than non-treatment.

More recent studies have also confirmed its effectiveness, despite the approach (Rovira i Aler & Leiva, 2009; Labrador & Fernández, 2009; Rojas, 2011; Painepán & Kühne, 2012). On the other hand, recent studies on the effectiveness of several humanistic therapeutic approximations and counseling, have confirmed its benefits in several context types (Rennie, 2010; Spalding & Khalsa, 2010; Nentjes & Bernstein, 2011; Killips, Cooper, Freire & McGinnis, 2012).

Of course, there are discrepancies over which approaches are more effective, but an element that all of them have since Rogers' first study is that the therapist-patient relationship plays a fundamental part in the success of the psychological support process.

By this, a very important aspect that integrates the model from CEDEHC is the evaluation of the effectiveness of the accompaniment model, using the Personal Orientation Inventory (POI), given its affinity with this approach. Moreover, we consider it appropriate because it focuses on the consultant's maturity, actualization or self-realization profile, not in pathological traits. This instrument was designed by Shostrom (1964), and was also appreciated and used by Abraham Maslow himself, mentor of the latter. The POI consists of 150 forced choice questions, and is only applied to adults with at least junior high level studies. It's composed of 12 scales, of which the two first ones are the most important and most used in research that use the inventory, due to the quick view they give regarding the person's competence to live in the present, and if his or her reactivity orientation is basically towards others (dependent personality) or towards him or herself (independent personality). Twelve scales are: Time competence (Tc scale): A tendency to live in the present and see life as a continuum, avoiding resentments from the past and excessive worries of the future. Inner-direction (I scale): Defines personal self-sufficiency and the tendency of not being dependant of other people. Self-Actualizing values (Sav scale): it's the importance that a person gives to concepts attuned to inner growth. Existentiality (Ex scale): It's the capability of the person to accept different points of view. Feeling reactivity (Fr scale): It refers to the capability of being aware of one's own needs and feelings. Spontaneity (S scale): It grades personal spontaneity and authenticity, which is possible due to a smaller inner conflict and concentrating on present activities. Self-regard (Sr scale): It marks one's own value and being aware of one's own strengths. Self acceptance (Sa scale): Is the ability to be conscious of the need to constantly improve. Nature of Man- constructive (Nc): It's the conception of Human being's nature as essentially noble, and seeing their evolutive possibilities with optimism. Synergy (Sy scale): It's the ability to synthesize opposites; seeing the positive sides in a conflict,

seeking to conciliate and synthesize. Acceptance of Aggresion (A scale): It's the adequate and pertinent expression of feelings of anger or frustation, accepting them as an essential part of human beings. Capacity for intímate contact (C scale): It's the capability to express personal feelings and allow others to express them, as a way to be more in contact with people.

The application of the scale is pertinently performed in the first and the last session, such that a comparative measure is taken before and after the process. Due to length motives, we only show the comparative study of the evaluated population in quantitative terms, because presenting the analysis of each case would take a lot of space.

Method

Objective: Evaluating the accompaniment process effectiveness that CEDEHC practitioners offer based on the consultants' POI profiles.

Hypothesis: there are significant differences between the first and the second applied evaluation in the POI of the consultants that received the accompaniment process.

Designed type: pre-experimental test-retest with only one group.

Independent variable: accompany process

Dependent variable: psychological profile obtained by the POI

Participants. Thirty-six cases that concluded their accompaniment process between June 2012 and May 2014 participants were for this report. They took between 8 and 13 sessions, with an average of 10.5; all of them were adults, ranging from 18 to 54 years, with an average age of 28. Their academic level ranged from basic education to college. Six were male and thirty female.

Orientators were last grade students of the School of Psychology, whose ages ranged between 20 and 24 years, with an average of 21.6. All of them received 120 hours of training in the accompaniment model proposed in CEDEHC and received supervision after each session with their client, by a teacher with graduate studies in psychology in the humanistic approach and an expert in the stated model.

Evaluation. As stated before, the instrument used was the POI in its Spanish validated version by Castanedo & Munguía (2004), in the first and last session.

For the data analysis, besides a comparative table to have a visual understanding of the obtained differences, the program SPSS v.19 was used to obtain the measurements, the

standard deviation and the typified error; Levene's test to compare the equality of variances and the t test for the equality of means were applied.

Findings and Discussion

Table 1 shows the means obtained from the pretest-postest results; one can see that in nine out of the twelve scales, significant differences are shown (considering "p" as less than 0.05) supporting the hypothesis that the accompaniment process can have a positive impact in the self-realization profile obtained with the POI.

Table 1
Pretest and Posttest Measurements

| Scale | Pretest | | Posttest | | t | p |
	x	SD	X	SD		
TC	12.4	2.41	15.1	2.58	-5.54	0.000
I	69.6	10.87	85.2	9.37	-8.43	0.000
SAV	16.8	2.84	19.5	2.68	-6.09	0.000
EX	15.6	3.86	19.1	3.65	-4.64	0.000
FR	12.7	2.55	14.9	2.11	-4.58	0.000
S	10.1	2.89	13.2	2.32	-6.73	0.000
SR	9.9	3.17	13.9	1.60	-7.36	0.000
SA	11.62	2.98	14.3	3.31	-5.86	0.000
NC	10.1	2.35	12.1	1.45	-4.47	0.000
SY	5.4	1.52	6.3	1.28	-3.38	0.001
A	13.0	3.43	14.8	2.57	-3.67	0.000
C	16.3	4.27	20.1	2.59	-5.54	0.000

Graph 1 shows the standardized grade averages of the first and second POI application; one can see that all scales there was a statistically significant increase on the score.

Graph 1.
Standarized score averages 1st. and 2nd. aplication POI
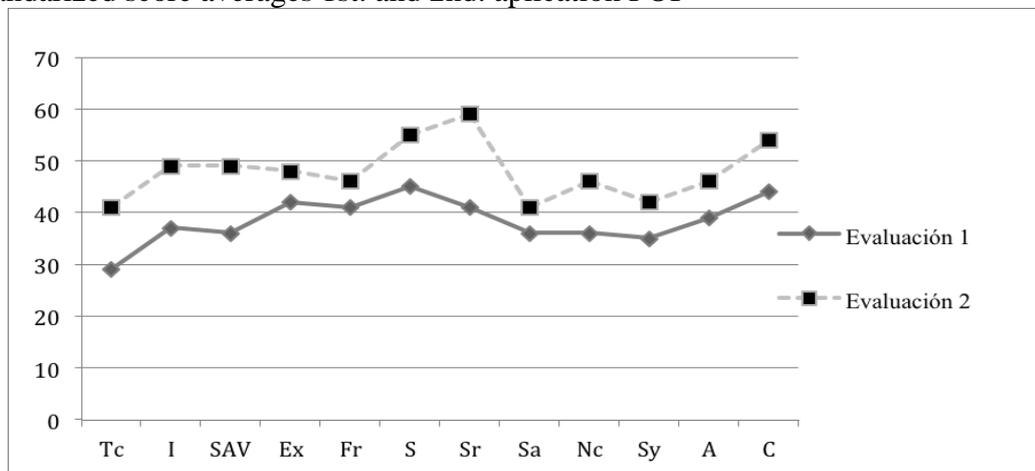
According to Castanedo & Munguía (2004), the scores that fall between 40 and 60 standard can be considered within the population's mean, also indicating that the scores closest to 60 are more "self-actualizers". In the first application, only five scales (Ex, Fr, S, Sr y C) fall within this margin. On the contrary, in the second application, the twelve scales fall within the population's mean. In general the group of people that received accompaniment showed a better profile in the second application; a significant improvement in the S scale is related with the capability to be more authentic and express their feelings: the Sr scale that refers to self-concept or self-esteem shows the appreciation of their own strengths, and finally an important increase in the C scale, regarding the ability to relate to others.

Conclusion

Some interesting observations would show that most people attending are females, perhaps because, in our culture, women have a greater willingness to seek help than men. Another interesting fact is that the process of support, at least in this model tends to further strengthen the sense of authenticity and self-concept more than other traits. Perhaps this is due to the orientation model emphasizing applied empowerment or strengthening of autonomy considerably.

This study supports the consideration that the psychological accompaniment process offered by the practitioners from CEDEHC, can have a positive effect on the POI's self-realization profile. This also allows us to suppose that the student's education under this model can be an important educational alternative for professional development within this field of psychology, and at the same time it satisfies a fundamental social function, by supporting those who come in search of help.

Nevertheless, it's important to say that these types of models must constantly be evaluated and reviewed to scientifically strengthen them, so they can be shared with other academic communities interested in the education of Psychologists.

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