

Person-Centered and Experiential Counseling for Relational Trauma

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Introduction Person-Centered and Experiential Counseling (PCE) has been pivotal in addressing the unique needs of individuals experiencing trauma, particularly in relational contexts. This approach emphasizes empathy, acceptance, and a non-directive stance that empowers individuals to explore their inner worlds while feeling supported by the therapist. This paper explores the application of PCE in trauma counseling, particularly focusing on refugee children who have survived gender-based violence (GBV), and provides insights from empirical research on the effectiveness of this approach.

Theoretical Background The foundation of PCE lies in Carl Rogers' notion of the actualizing tendency, which posits that all individuals have an inherent drive to realize their potential (Rogers, 2008). Trauma, however, can distort this natural tendency by undermining the individual's sense of safety and self-worth (Warner, 1991). Refugee children, in particular, face immense challenges as they cope with displacement, violence, and the loss of relational security (UNHCR, 2021). For such children, the therapeutic goal is to restore a sense of agency and belonging through empathic, non-directive counseling.

Methodology The research presented here was conducted as part of a collaborative initiative between UNHCR and the NGO PRAKSIS. The study involved 4 children aged 8 to 17, all of whom had experienced complex PTSD as survivors of gender-based violence (GBV). A mixed-method approach was employed, incorporating both quantitative data (pre-and post-tests) and qualitative interviews with the children and trauma specialists. The quantitative data were analyzed using standardized measures like the International Trauma Questionnaire (Cloitre et al., 2021), while qualitative data were subjected to thematic analysis (Freire et al., 2014).

Findings The findings indicate significant improvements in both PTSD symptoms and self-organization among the participants. Notably, there was a decrease in PTSD-related symptoms such as hypervigilance and emotional numbness (Pre-test score: 32/48, Post-test score: 23/48). Additionally, children demonstrated improved self-awareness and emotional regulation, particularly in areas related to self-worth and relational functioning (Cryder et al., 2006).

Qualitative data revealed that participants found the empathic mapping activities and the therapist's non-directive stance particularly helpful. One child stated, "I used to not capture what I was feeling, but now I can understand my emotions better" (Participant A). These improvements reflect the core tenets of the PCE approach, which prioritizes the client's autonomy and emotional safety in the therapeutic process.

Discussion The application of PCE in trauma therapy is well-aligned with the needs of GBV survivors, particularly children. The process of "empathic mapping" helped participants externalize their emotional experiences and better understand their reactions to trauma. This aligns with Vygotsky's theory of internalization, which emphasizes the transformation of external interactions into internal mental processes (Jones, 2009). The children's ability to

articulate and manage their emotions improved over the course of the intervention, suggesting that PCE can foster self-regulation and post-traumatic growth.

Conclusion PCE provides a compassionate and effective framework for supporting refugee children and other survivors of trauma. By focusing on empathy, emotional safety, and non-directiveness, this approach allows individuals to explore their experiences without fear of judgment. The findings from this study underscore the importance of creating therapeutic environments where children can rediscover their self-worth and reclaim agency over their lives.

References

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