
Clients' Accounts of Resistance in Counselling: A Qualitative Analysis

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Abstract

This article is derived from a study of clients' moment-to-moment experience of a counselling session. Their recollections of the experience were stimulated through the replay of a tape of the session and the transcribed interviews were analyzed in terms of the grounded theory form of qualitative analysis. The article focuses on accounts given by some of these clients indicating that they were resistant to their counsellor because they were ambivalent about his or her approach to counselling. The returns from the analysis are discussed in terms of current notions of resistance and of the concept of the working alliance in counselling.

Résumé

Cet article provient d'une étude de l'expérience de clients au cours d'une session de counseling exprimée moment par moment. Les souvenirs de l'expérience ont été stimulés par l'entremise de l'enregistrement où celui-ci était réécouté et les entrevues transcrites ont été analysées en termes de la théorie de l'analyse qualitative. Cet article se concentre sur les comptes rendus de ces clients indiquant qu'ils étaient résistants face à leur conseiller dû à leur ambivalence face à l'approche de counseling utilisée par celui-ci. Les résultats de cette analyse sont discutés en fonction des notions actuelles sur la résistance et sur le concept de relation d'alliance en counseling.

An issue facing social scientists and practitioners is the matter of the worth of persons' verbal reports of their experience. After all, people may not know what they are experiencing. Moreover, even if they are aware of it, they may distort it or lie about it (cf. Ericsson & Simon, 1980; Nisbett & Wilson, 1977). The issue is especially pertinent to clients' resistance to counselling and psychotherapy. Much has been written about resistance (e.g., Kernberg, 1976; Kottler, 1992; Liotto, 1989; Masterson, 1981; Streat, 1985) and it is agreed that clients' resistance is often unconscious. When unaware of their resistance, they can hardly be expected to comment on it. Thus, unconscious resistance can be inferred only by an observer other than the person doing such resisting.

It is also observed that resistance is not entirely unconscious. Greenson (1967) maintains that the traditional psychoanalytic view of the therapeutic relationship as totally transferenceal is oversimplified. Instead, it also involves a real relationship and, hopefully, a working alliance as well. According to Greenson, in the real relationship, clients may resist treatment because they object when the analyst makes errors, is inconsiderate, and so on. This resistance is conscious and deliberate; in the author's

view, it may be described as “realistic” resistance. Similarly, cognitive-behaviour therapists suggest that clients’ resistance extends beyond unconscious thinking, feeling, and behaviour determined by core schemata; it is also a conscious refusal by the client to go along with therapist initiatives that the client justifiably judges to be not in his or her best interest (Ellis, 1983; Meichenbaum & Gilmore, 1982).

Kottler (1992) proposes that a schema developed by Munjack and Oziel (1978) in the context of sexual dysfunctions can be adapted to counselling and psychotherapy as a whole. *Type 1* resistance occurs when the client does not understand what the counsellor wants or expects. *Type 2* is noncompliance to assigned tasks because the client lacks relevant knowledge or skills. *Type 3* involves a lack of motivation in response to skepticism about the outcome of treatment and expressed as indifference to the counsellor’s initiatives. *Type 4* is avoidance of threatening material coming into awareness in response to the breakdown of customary defences. Lastly, *Type 5* results from the secondary gains experienced by the client as a result of his or her symptoms. The first two types entail reactions to the expectations and demands of the counsellor and thus may be thought of as expressions of realistic resistance. The last three are in keeping with transference resistance.

In summary, resistance is both transference and realistic. Realistic resistance is conscious and can thus be reported, which leads back the opening concern: can value be placed on such reports when they could be misleading? It can be argued that there is no alternative. Realistic resistance is experienced subjectively and can be made known only through its representation by the person undergoing it. Accordingly, it can also be maintained that the qualitative approach to research is the best way to conduct such an inquiry. Among the approaches to social science, the qualitative approach best provides the investigator with a systematic way of discerning and representing the meaning contained in verbal reports.

The foregoing describes the rationale of the present study. It is a study that focuses on the *client’s* perspective on counselling, which has received much less attention in the research literature than has the counsellor’s view of it (Bergin & Lambert, 1978; McLeod, 1990). Clients were asked to report their recollections of their moment-to-moment experience of a session of counselling, and a qualitative analysis was applied to their reports. Among the reports were accounts of experiencing resistance to the efforts of the counsellor. These accounts were organized into themes and categorized. Much of what the clients revealed in their accounts had not been disclosed to their counsellor. The accounts were thus in many respects the clients’ presentations of their private thoughts, feelings, strategies, and plans as they struggled with the efforts of the counsellor.

THE OVERALL STUDY

The method (Rennie, in press; Rennie, Phillips & Quartaro, 1988; Rennie & Toukmanian, 1992) and returns to date (Rennie, 1990; 1992; in press) of the overall study are presented elsewhere. Briefly, it is a study of clients' reports of their moment-to-moment experience of an hour of counselling/psychotherapy. Their recollections of their experience were stimulated by listening to the replay, immediately after the counselling session, of either an audiotape or a videotape of the session. The technique of using tape replay to stimulate recall was pioneered by Kagan (1975) as an approach to counsellor training. More recently, the basic technique has been applied to psychotherapy and counselling process research (e.g., Elliott, 1983; 1986; Martin & Stelmaczek, 1988; Rennie, 1984; 1990). In the present research programme, the clients' reports were transcribed and subjected to a grounded theory form of qualitative analysis (Glaser, 1978; Glaser & Strauss, 1967). To date, 12 clients each reported on one counselling session and 2 clients each reported on two sessions. Thus, the grounded analysis was applied to 16 protocols. All of the clients were actively in counselling. They were mainly university students, six men and eight women, ranging in age from their mid-twenties to their mid-forties. At the time of the research interview, they had been in counselling for periods ranging from 6 weeks to over 2 years. They were seen by experienced counsellors, most of whom were psychologists with the Ph.D. degree. The counsellors collectively represented person-centred, gestalt, transactional analytic, radical-behaviouristic, rational-emotive, and eclectic orientations.

In the overall study, the grounded analysis has given rise to the conceptualization of 51 categories depicting the client's experience of counselling (Rennie, 1992). One of these categories is entitled Resistance by Client.

THE SUBJECTIVE EXPERIENCE OF RESISTANCE

Clients' reflexivity as the core category in the grounded analysis

As summarized elsewhere (Rennie, 1992; in press), when the interviewees were given an opportunity to report on their subjective experience of an hour of therapy, it was evident that they were *persons* in interaction with this other person, the counsellor (cf. Rorty, 1976a). Thus, as part of their personhood, the clients were conscious, and within that consciousness, they were reflexive. When being reflexive, they attended to themselves, thus becoming focused on themselves (Harré, 1984; Husserl, 1913/1976; Lawson, 1985; Rorty, 1976b; Slife, 1987). The act of turning attention to themselves enables persons to heed desires and to make decisions about which desires they will act upon, and what those actions will be. People are not always reflexive, of course. When

nonreflexive, they are engrossed in carrying out an action. As Searle (1983) states, they are not aware of doing, but are "just doing." The nonreflexive action continues until, for any of a variety of reasons, persons return to an awareness of self. Within that state of reflexivity, they then heed their desires in forming a new course of action, leading to a new round of nonreflexive action.

In the present study, during the inquiry interview the interviewees appeared to focus on moments of recalled reflexivity more than on moments of recalled nonreflexivity (see Rennie [1992] for a discussion of this finding). Furthermore, it has been judged that the majority of the categories constituting the taxonomy of the client's experience of the counselling hour are expressions of their reflexivity, including Resistance by Client. Accordingly, clients' reflexivity has been conceptualized as the core (i.e., most central, unifying) category in the grounded analysis. This is the framework of the following presentation.

Clients' resistance in expression of their reflexivity

The analysis suggested that, for the 10 clients represented in the 11 protocols that contained accounts of resistance (one of these clients produced two protocols), the overall category of resistance was divisible into three types: (a) resistance to a particular counsellor *intervention* in the context of an evidently good working alliance (Bordin, 1979; Greenson, 1967); (b) resistance to the counsellor's *strategy* in the particular session within the context of an evidently good working alliance; and (c) resistance to aspects of the counsellor's *general approach* to counselling the client, thus in the context of an evidently conflicted working alliance. The last type ties in best with the theme of this special issue of the *Journal*. Three clients experienced this type of resistance periodically throughout their session. They were most likely to have been "difficult" from the point of view of the counsellor when compared with the other clients studied. In keeping with the theme of this special issue of the *Journal*, for the present article, attention was focused on the experience of these three clients.

The analysis of their accounts led to the conceptualization that their resistance is understandable in terms of five aspects. These aspects, or themes, are common to the accounts given by all three clients. However, before proceeding to this structure, a synopsis will be presented of each client's account of his or her session as whole.

THREE CASE STUDIES

Case 1: The troubled young man

"Jack" (a pseudonym) was a first-year undergraduate who was in counselling to deal with his inability to get involved in his studies. His counsellor,

a professor, had many years of experience. This was the fifth session, which occurred 6 weeks after the previous meeting. Jack came to this session feeling unprepared. He half-consciously decided to play the role of the troubled young man. The session started out badly, in his view. He wanted to talk about himself, whereas the counsellor wanted Jack to focus on his family. Finally, Jack made a veiled attack on the counsellor's competency as a professor. After that, Jack was allowed to talk about himself and he felt more involved. Toward the end of the session, the counsellor encouraged Jack to take personal responsibility where needed; Jack lamely agreed, but his heart was not in it. From then on, he was impatient for the session to come to a close.

Case 2: Give me some practical suggestions

"Audrey" was an undergraduate in her early twenties who was dealing with troubled relations with her family, especially her mother. She was seen by an experienced woman counsellor who had a no-nonsense approach to counselling. Audrey had mixed feelings about the counsellor and her approach. On the one hand, having emerged from another counselling relationship with a counsellor who was gentle and supportive, Audrey felt that she was ready for a programmatic approach. On the other hand, she felt that she would have to make an effort to stand her ground with this counsellor, and this made her feel rather tense. The session under study began with Audrey talking about a success that she attributed to the work of the previous session. She then presented a dream, which the counsellor had Audrey role-play. This led to an insight that surprised Audrey. Presently, the focus shifted to Audrey's relationship with her mother. The counsellor had her do a "gestalt shuttle," with her mother in the other chair. Audrey felt that this would not go anywhere. She wanted practical tips on how to deal with her mother, but the counsellor persisted in concentrating on Audrey's feelings. Yet Audrey felt restrained against voicing her criticisms to the counsellor. Audrey questioned her own judgement. The counselling was working to a certain extent; she did not want to jeopardize it. Near the end of the session, the counsellor made an interpretation that seemed plausible, which Audrey had been intending to think about since the session.

Case 3: This is counselling—or is it?

"Paul" was an undergraduate who had been seeing a counsellor for several months about a low-level depression. This was his last session for a while prior to a break in his studies created by a work-term. His counsellor was a woman in her forties with many years of experience. Paul did not have anything pressing to talk about. The topics covered in the main body of the session were a traffic fine that he had to pay; physics (his major subject); a music recording session in which he had participated

the evening before (music was a hobby); and the counsellor's bandaged finger. The counsellor's conduct of this session was typical of her other sessions. She talked a lot, asking questions; she often talked about her own experiences. Paul had difficulty detecting a method in her approach. It seemed as though they were simply carrying on a conversation. Throughout the session, he was experiencing a mild, niggling depression but he never got to it, and the counsellor never went after it. He generally drifted in the flow of the discussion, although he tried to steer the counsellor back on course when she was clearly being irrelevant. He felt that it was not his place to criticize her method. The session ended with the counsellor returning to some coping strategies addressed in an earlier session. Paul said that he had forgotten about them, but that such reminders are often useful because they make him realize that there are other possible strategies, and in this state he often works out his own solutions.

These summaries provide a context for the following analysis. In what follows, the clients' comments are used for illustration. The author's gloss of these comments is contained in square parentheses.

ANALYSIS OF RESISTANCE AS EXPERIENCED BY THESE CLIENTS

Expectancies about this particular counselling session

All three of these clients were with counsellors who were active and dominant and who in one way or another had to be *dealt with*. Both Jack and Audrey had to deal with what they experienced as aggressiveness, while Paul had to contend with an excess of discourse coming from his counsellor, in which she was inclined to drift into irrelevancies and at times seemed almost incredible. In turn, Jack and Audrey were on edge whereas Paul experienced a mild irritation embedded in a feeling of perplexity. Audrey's counsellor was rather severe ("She reminds me of an Old Mother Superior [I had in] a Catholic school and I was terrified"). Jack's counsellor created an atmosphere of expectancy and pressure ("I feel in a hot seat . . . I always feel on the spot"). Paul evidently anticipated his meetings with his counsellor with an expectancy of mild surrealism that he felt in part might have been due to his own tendency to be incredulous ("If there wasn't something convenient that was true it would be just as easy to make up something that wasn't so—a fable or parable—to aid me . . . I think it's part of my general cynicism at things and my ability to do things like that—to redirect conversations with a story which is not entirely true but which suits the occasion well").

The atmosphere of the relationship with the counsellor in general contextualized each client's approach to the session. Jack felt unprepared ("I need to get material to present to him. Stuff that he can work on"). Audrey dreaded criticism because she had failed to complete a homework assignment ("I was really afraid that she was going to ask me

had I done anymore on writing up my autobiography which I'm supposed to be doing for us"). Paul was unfocused ("I almost feel a little strange because I come in here and I don't have anything specific to talk about . . . and she doesn't do that either so sometimes we seem to float along a bit and I feel afterwards that we haven't really gone into anything much").

Management of concerns arising from expectancies about the session

The pressure of expectancy led Jack and Audrey to take rather extreme measures, albeit subtly, while Paul had the problem of creating something to do in the session. Although he partly constructed the notion in the light of the inquiry, Jack felt that he may have come into the session subconsciously playing the role of being subdued in order to give his counsellor something to work on ("Today I was going to play the part of sort of 'down,' so that he could pick up on that, read that and he'd go from there"). There was a bonus in this strategy in that it helped to reduce the counsellor's authority ("Sometimes . . . patients will come in today, 'Hey! I'm going to give this guy a hard time' . . . You decide, because you're in a mood . . . 'You [the counsellor] have your day's work'").

Audrey neatly deflected her counsellor from remembering the homework assignment by introducing a dream early in the session ("I'm attempting, I think, to get as far away from the autobiography part of that I can—what occurred to me immediately . . . is the dream that I had the night before, which was significant, but it became the way out").

Paul talked about a traffic case that he lost in court the day before. Upon hearing himself on tape, he decided that he had been more mixed up than he thought at the time. He had thought he was conveying a frivolous assessment of his loss, yet on hearing the tape he decided that he had been more affected by it. On the other hand, in the counselling session he made a fuss about paying the fine, when in fact he was not all that worked up about it. His counsellor failed to pick up on these disjunctions. In large part, Paul blamed himself ("It makes me feel that I'm not communicating particularly well"). However, although he had mixed feelings, he wished in a way that the counsellor was not so supportive. (" . . . I know I'm just being silly, but because I'm saying she's agreeing with me. And at times I get a strong sense that she'd agree with me pretty well with whatever I said. So I'm saying that she's agreeing with it and we're probably both sitting there thinking this is silly.")

Jack's strategy worked in that it did activate his counsellor. The difficulty was that the counsellor went about the counselling in the wrong way, in Jack's view. The counsellor kept talking about Jack and his family, while Jack wanted to talk about himself. He felt barraged and had difficulty paying attention because he was deeply within himself. ("For

some reason I'm always thinking about the feelings I'm having, rather than listening to him, trying to benefit from his expertise. Whereas, I can't help it. It just triggers a whole bunch of thoughts, being in that atmosphere. It's like a chamber where you recollect these things.")

In presenting her dream, Audrey got more than she bargained for. An element in it was a price tag and, in gestalt therapy fashion, the counsellor urged Audrey to be the price tag. ("I kept going from first person to third person, and that was a kind of concession to me that I wasn't really being a price tag—that I was going along and trying to come up with feelings but damn if I was going to let myself be personified as something as inanimate as a price tag, as commercial as a price tag.") Yet, to her surprise, the counsellor's intervention worked. At a certain point in her role-play, in making an attribution to the price tag, she used the phrase "my face" instead of "price tag." The counsellor had her repeat the attribution three times and the third time Audrey understood the significance of the Freudian slip. ("I'm usually aware of formulating . . . I'm very careful about the words I use, I'm a half a sentence ahead of myself in my head . . . [this] was completely spontaneous . . . it wasn't until the third time she had me repeat it that it took on additional meaning for me.")

Paul contended with his counsellor's tendency to wander off track. In part he blamed himself for not communicating well enough to make it plain what the track was. In part he told himself that he would resist if she went too far astray, although this promise was hypothetical and appeared to emerge out of the inquiry. When asked in the inquiry what he did when he felt they were moving into something irrelevant, he replied, "I probably become sort of resistant to carrying on in that direction and try to go in a different one. Or I at least try to see what we're getting at." Finally, he also drew upon a notion that he had worked out during the course of his counselling relationship. He thought it possible that she only *seemed* to be irrelevant during such times, that in fact she was subtly leading him in a new direction, and was actually quite professional. ("I always have a conflict between two views of what's going on, one of which is that [it is] entirely as it seems, which is that I go and we just talk about various things, and the other view is that we're talking about things and all the time in her mind there's a sort of, you know, 'Oh yes. This is chapter two of such and such a book,' you know, all that background.")

Power struggles over the best plan for the counselling

Throughout their session, each of these three clients experienced conflict and confusion about the proper plan for the counselling. The unfolding plot of the session with their counsellor, in many respects, was an expression of their attempts to deal with these concerns. By "counsellor's plan" is meant the counsellor's overriding objective for treatment,

derived from his or her understanding of the reasons for the client's difficulty (see Rennie, 1990).

Jack's counsellor seemed to feel strongly that Jack's problem with school was rooted in his troubled family relations, highlighted by his relationship with his father and feelings of responsibility towards his sister, who had recently made a suicide attempt. Jack's conflict with this plan was that he felt that *he* was responsible for his state, and wanted to focus on himself. The counsellor aggressively pursued his plan, in response to which Jack felt unprepared, inarticulate, inattentive, and generally incompetent. This unhappy situation continued until midway through the session, when Jack saw an opportunity to strike back at the counsellor. In an earlier session, he had mentioned to his counsellor that Jack had a number of professors who were slackers, and he noticed that the counsellor had seemed defensive at that point. In this particular session, the discussion once again turned to Jack and his professors and, "I tried it on him here, and I really—the way he looked, he really, I really got his goat. I did. And he's denying it. I got to him as a person. Do you know what I mean? Not as—I got to his role beneath his persona, and I pricked him." This proved to be a breakpoint in the session. In response to Jack's veiled attack, the counsellor backed off, and started attending more keenly to Jack, which enabled him to shift from the family to himself.

Audrey was dealing with a similar problem, but in an opposite way. As indicated, the main theme of her counselling was her difficult family relations, especially with her mother. Audrey had the strong sense that her counsellor felt that Audrey's difficulty lay primarily with her—that Audrey was too inhibited in expressing her needs to the family, in short, that Audrey was neurotic. Audrey, on the other hand, felt that her counsellor could not see Audrey's strong side, and that she was actually a normal, creative person attempting to deal with a neurotic family. As she said,

[I'm] not really understanding what the *whole* of what she [the counsellor] wants to get through. It's like I'm maybe I'm only taking part—It's really difficult to talk about this—uh, I think it comes from the conviction that she's *helping*. And I want her to go on helping. But I wish along the way of getting emotional things cleared up that she could just give me some—just a *few* very small *practical* suggestions that I could work on in the meantime. But I feel that by asking for those, that I would be too, uh, juvenile or something.

As mentioned above, Paul was ambivalent about his counsellor's plan, and he was also conflicted about his own preferred plan. On the one hand, he enjoyed conversations, and if he could have resolved his guilt over taking up his counsellor's time with mere conversation, he could have been almost content to leave it at that. However, he also had a tendency to get mildly depressed, as he had felt the night before when a music recording session had not gone well. He lamented in the inquiry

that, while he had given many details about the recording session, he had not gotten to the depression in the counselling session, and that his counsellor perhaps should have helped him. (“I don’t think I got to the heart of it at all. [Interviewer: Would anything have helped?] I think at that point it would be a lot better if, sort of, more specific questions were asked because I’ve got as far as I can get by just talking about it.”)

It is thus apparent that Paul was a rather passive client who saw two sides to everything, including the merits of his counsellor’s approach. The net effect was a slightly irritated resignation that they did not get anywhere in the session. A major reason for this stasis was that, like the other two clients, and indeed, all of the clients in the study as a whole, he was strongly inclined to defer to the counsellor.

Deference to the counsellor’s authority

The study overall has led to the understanding that a major aspect of the client’s experience of counselling and psychotherapy is deference to the authority of the counsellor. As shown, although Jack and Audrey inwardly railed against their counsellor’s approach, their manoeuvres against it were veiled and subtle. Meanwhile, Paul neutralized much of his irritation about his counsellor’s lack of focus by blaming himself for being unclear. There were many reasons for deference, and they will not be reviewed formally (see Rennie, 1985; 1990). Nevertheless, it is important to look at how these three clients experienced it in particular terms because it says a lot about their experience of resistance.

Jack’s account indicates that he quickly withdrew his attack after striking his blow at his counsellor’s self-esteem. (“But watch how I back off if you play the tape.”) More generally, he was diffident about his dissatisfaction with the counsellor’s plan (“He’s the professional so I should defer maybe”) and had difficulty criticizing the counsellor.

Both Audrey and Paul were similarly constrained. Audrey remarked,

It seems a little bit silly not just to point things out—uh—something stops me from doing that . . . perhaps it’s because [in addition to criticizing silently] at the same time I’m thinking, “Well, I don’t really understand the whole of this. Yes, it may be that there are still some feelings there to discover,” and, “Maybe I better hold on until we find out what those are, because they might make a difference.”

Paul was also quite self-reflective and was inclined to mistrust his negative appraisal of his counsellor’s work on the grounds that he, too, might be missing something that exceeded his awareness. As with Audrey, this made him reluctant to criticize. In his experience, however, there were additional reasons. As he commented,

It would be kind of socially awkward . . . to come out and say, “I see what you’re doing here, trying to be subtle or whatever,” while on the other hand it would be even worse to say that when they’re not doing that at all . . . Sort of false accusation, sort of thing? [The risk is] the displeasure of the counsellor. [You] lose the bond or

relationship with her . . . [It also has to do with] just the fact that they're helping you and you're not helping them, so you shouldn't make it difficult for them . . .

Such reluctance to criticize and openly challenge the counsellor meant that these clients could not enter wholeheartedly into the counselling enterprise as put into motion by the counsellor. Consequently, they were unable to put their full weight behind their desire to change. This diffidence extended to their reflections on whether or not they would act constructively on interpretations, challenges, and assignments coming out of the session.

Clients' judgements about whether or not they would act on demands arising in the session

All three counsellors ended their session with either an interpretation or a suggested coping strategy. Such interventions are very common, the author has observed, perhaps because they give the counsellor a sense that he or she is providing closure for the client. The accounts of the clients are rather edifying in this regard. Jack's attack on his counsellor's self-esteem enabled Jack to talk about himself, even to the point of breaking some new ground. Nevertheless, his hope that this would lead to new insights by the counsellor were for naught. Instead, the counsellor reverted to his pressuring approach, this time to admonish him that it was really up to Jack to assume responsibility for his life. He told Jack that he "would have to do the spadework." Jack commented that, upon hearing it on tape, he realized for the first time that by this the counsellor had meant, "That's your problem. You deal with it." He followed this realization with the remark,

And I suppose that's right . . . and I probably won't act on it either, you know . . . and it's up to me to help myself . . . maybe I'm just talking now [in the counselling session] to just fill in time . . . "Oh, come on!" I'm not going to act on this stuff. I'm just talking. This is hot air.

Paul also balked at some coping strategies that his counsellor had introduced in an earlier session and re-introduced toward the end of this one. However, the reason Paul gave had less to do with his lack of motivation to take action (although, in the author's interpretation, that was involved); it had more to do with the inappropriateness of the suggestions. He felt that the strategies suggested were too narrow and not ones that he could actually implement. However, he appreciated them as examples of the more general principle that there were other ways to do things than the ways he customarily used. ("The advice isn't particularly important as the thing in itself because it's so narrow. Like, it's about one particular thing . . . which isn't that important compared to applying—generalizing that and applying it to everything.")

Thus, in these respects, both of these clients were unallied with the counsellor. Jack said in the inquiry that toward the end of his counselling

session he was basically assenting to the counsellor without conviction; he wanted to close the dialogue and end the session. Paul indicated that at this point in the session he was not taking seriously what his counsellor was offering him; instead he dismissed the details of her suggestion while extricating from them a general, principle. Jack and Paul both refrained from revealing these and related attitudes in their counselling session, and thus made it difficult for the counsellors to recognize and correct their errors that contributed to the clients' attitudes.

Audrey, as well, indicated that she had failed to act, at least as yet, on an important development that occurred in her session, although the quality of her experience was considerably different than that of the other two. Toward the end of the session, her counsellor made an interpretation that took Audrey's breath away. She was not sure that it was true, but she thought that it might be; at the time of the inquiry she still intended to consider it seriously. Thus, Audrey's resistance to the interpretation had to do with its personal implications and not with her relationship with the counsellor. In short, in this episode, Audrey was experiencing a positive working alliance.

DISCUSSION

In evaluating the foregoing representation of clients' experience of resistance, it is important to specify what it is not. It is not a claim that the resistance reported by these clients was uninfluenced by unconscious factors; that what these clients reported as wanting was the same as what they needed; that what they reported was necessarily veridical with what they experienced; that the representation can be generalised to include other clients; or that the representation is objective in the positivistic sense of the term. Instead, the representation is the author's construction of their representation of their conscious experience. Thus, the meaning of the representation is contextualized within a good deal of relativism. However, it is contended that it is not totally relativistic, but instead is an example of what some have referred to as critical realism (see Mahoney, 1991; Maxwell, 1992).

In being representations of their conscious experience, the accounts of resistance given by these clients pertain primarily to realistic resistance. Nevertheless, there are hints of transference resistance (as when Audrey related her feelings about her counsellor to earlier feelings about a Mother Superior). The realistic resistance was in keeping in part with Types 1 and 2 of the Kottler (1992) typology in that at times these clients—Jack and Paul especially—felt confused and incompetent when dealing with the counsellor's expectations and demands. More fundamentally, however, all three clients had definite views on the best plan for counselling. This finding underscores the importance ascribed to clients' experiences for treatment (e.g., Lazarus, 1976; Lazarus & Fay,

1982) and, if supported by subsequent research, suggests that a sixth category might be added to the Kottler taxonomy to describe resistance in response to explicit conflicts about the treatment plan.

Whether or not a client's preferred plan is necessarily the best one is, of course, a separate matter. While counsellors cannot know clients' sense of personal agency as well as the clients themselves, counsellors are in a better position to make inferences about their clients' patienthood (see Rennie & Toukmanian, 1992). Furthermore, as emphasized at length by members of the psychodynamic school, when clients' patienthood is challenged, they will resist (Strean, 1985). Nevertheless, the three accounts in this study bring out the importance of the counsellor's recruitment of the client's agency as an ally in the struggle against their patienthood. This point has been made elsewhere (Bordin, 1979; Greenson, 1967) but it is useful, it is submitted, to have the point supported within the client's perspective.

Another return from this study is its provision of a glimpse into the clients' private appraisals of themselves, the counsellor, and their interaction, as well as the reasons for their actions within the interaction. The study reveals that these clients at times were actually busy influencing the counsellor while ostensibly being influenced by the counsellor. The reasons for these hidden agendas are very complex but appear to have much to do with the structure of the counselling relationship, particularly in terms of the constraints the clients felt against challenging the authority of the counsellor.

The power of deference reinforces the implication that it was the role of the counsellors to invite these clients to collaborate in the development of the treatment plan. Left on their own, the clients could not confront their counsellors openly. Resorting to subtle, defensive manoeuvres, they occasionally found themselves doing something surprisingly useful as when Audrey's introduction of her dream led to a good result, and when Jack's threatening of his counsellor's self-esteem provided room for Jack to do what he wanted. However, the achievement of therapeutic results despite a contest for control has little to recommend it. Again, it would have been better if the counsellors of these clients had created an environment in which the approach to treatment could have been negotiated. Thus, the main implication of the study would seem to be the light it sheds on the importance of being sensitive and open to the client's thoughts about the best approach to treatment. The study indicates that encouragement of the expression of such thoughts is essential because the power differential in the counselling relationship makes it difficult for clients to challenge the counsellor. Encouragement would empower clients to negotiate the approach to counselling and thus to contribute directly to the establishment of a productive working alliance.

References

- Bergin, A. E. & Lambert, M. J. (1978). The evaluation of therapeutic outcomes. In S. L. Garfield and A. E. Bergin (eds.), *Handbook of psychotherapy and behavior change*, 2nd ed., 139-89. New York: Wiley.
- Bordin, E. (1979). The generalizability of the psychoanalytic concept of the working alliance. *Psychotherapy: Theory, Research and Practice*, 16, 252-60.
- Ellis, A. (1983). Rational-emotive therapy approaches to overcoming resistance. I: Common forms of resistance. *British Journal of Cognitive Psychotherapy* 1, 28-38.
- Elliott, R. (1983). "That in your hands . . .": A comprehensive process analysis of a significant event in psychotherapy. *Psychiatry*, 46, 113-29.
- . (1986). Interpersonal process recall (IPR) as a psychotherapy process research method. In L. Greenberg and W. Pinsof (eds.), *The psychotherapeutic process: A research handbook* (pp. 503-29). New York: Guilford.
- Elliott, R. & Shapiro, D. A. (1992). Client and therapist as analysts of significant events. In S. Toukmanian and D. Rennie (eds.), *Psychotherapy process research: Paradigmatic and narrative approaches* (pp. 163-86). Newbury Park, CA: Sage.
- Ericsson, K. A. & Simon, H. A. (1980). Verbal reports as data. *Psychological Review*, 87, 215-51.
- Glaser, B. G. (1978). *Theoretical sensitivity: Advances in the methodology of grounded theory*. Mill Valley, CA: The Sociology Press.
- Glaser, B. G. & Strauss, A. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Chicago: Aldine.
- Greenson, R. (1967). *The technique and practice of psychoanalysis*. New York: International Universities Press.
- Harré, R. (1984). *Personal being: A theory for individual psychology*. Cambridge, MA: Cambridge University Press.
- Husserl, E. (1913/1976). *Ideas: General introduction to pure phenomenology* (W. R. Boyce Gibson, trans.). New York: Humanities Press.
- Kagan, N. (1975). *Interpersonal Process Recall: A method for influencing human action*. (Available from N. Kagan, Educational Psychology Department, University of Houston, University Park, Houston, TX, 77004.)
- Kernberg, O. (1976). *Object-relations theory and clinical psychoanalysis*. New York: Jacob Aronson.
- Kottler, J. (1992). *Compassionate therapy: Working with difficult clients*. San Francisco: Jossey-Bass.
- Lawson, H. (1985). *Reflexivity: A Post-modern predicament*. La Salle, Illinois: Open Court.
- Lazarus, A. (1976). *Multimodal behavior therapy*. New York: Springer.
- Lazarus, A. & Fay, A. (1982). Resistance or rationalization? A cognitive-behavioral perspective. In P. Wachtel (ed.), *Resistance: Psychodynamic and behavioral perspectives* (pp. 115-32). New York: Plenum.
- Liotti, G. (1989). Resistance to change in cognitive psychotherapy: Theoretical remarks from a constructivist point of view. In W. Dryden and P. Trower (eds.), *Cognitive therapy: Stasis and change* (pp. 508-33). New York: Springer.
- Mahoney, M. J. (1991). *Human change processes: The scientific foundations of psychotherapy*. Basic Books.
- Martin, J. & Stelmazonek, K. (1988). Participant identification and recall of important events in counseling. *Journal of Counseling Psychology*, 35, 385-90.
- Masterson, J. F. (1981). *The narcissistic and borderline disorders: An integrated developmental approach*. New York: Bruner/Mazel.
- Maxwell, J. A. (1992). Understanding and validity in qualitative research. *Harvard Educational Review*, 62, 279-300.
- McLeod, J. (1990). The client's experience of counselling and psychotherapy. In D. Mearns and W. Dryden (eds.), *Experiences of counselling in action* (pp. 1-19). London: Sage.
- Meichenbaum, D. & Gilmore, J. B. (1982). Resistance from a cognitive-behavioral perspective. In P. Wachtel (ed.), *Resistance: Psychodynamic and behavioral approaches* (pp. 133-56). New York: Plenum.

- Munjack, D. J. & Oziel, L. J. (1978). Resistance in the behavioral treatment of sexual dysfunction. *Journal of Sex and Marital Therapy*, 4, 122-38.
- Nisbett, R. E. & Wilson, T. D. (1979). Telling more than we know: Verbal reports on mental processes. *Psychological Review*, 84, 231-59.
- Rennie, D. L. (1984, May). Clients' tape-assisted recall of psychotherapy: A qualitative analysis. In D. Rennie (Chair), *Recent advances in psychotherapy research: The experience of the client*. Symposium conducted at the annual meeting of the Canadian Psychological Association, Ottawa.
- . (1985, June). Client deference in the psychotherapy relationship. In D. Rennie (Chair), *The client's phenomenological experience of psychotherapy*. Evanston, Illinois.
- . (1990). Toward a representation of the client's experience of the psychotherapy hour. In G. Lietaer, J. Romgauts and R. Van Balen (eds.), *Client-centered and experiential therapy in the nineties* (pp. 155-72). Leuven: Leuven University Press.
- . (1992). Qualitative analysis of the client's experience of psychotherapy: The unfolding of reflexivity. In S. Toukmanian and D. Rennie (eds.), *Psychotherapy process research: Paradigmatic and narrative approaches* (pp. 211-33). Newbury Park, CA: Sage.
- . (in press a). Strategic choices in a qualitative approach to psychotherapy research: A personal account. To appear in L. Hosmand and J. Martin (eds.), *Method choice and inquiry process: Lessons from programmatic research in therapeutic practice*. Teacher's College Press. Ms. under review.
- . (in press b). Storytelling in psychotherapy: The client's subjective experience. *Psychotherapy*.
- Rennie, D. L., Phillips, J. R. & Quartaro, G. K. (1988). Grounded theory: A promising approach to conceptualization in psychology? *Canadian Psychology*, 29, 139-50.
- Rennie, D. L. & Toukmanian, S. G. (1992). Explanation in psychotherapy process research. In S. Toukmanian and D. Rennie (eds.), *Psychotherapy process research: Paradigmatic and narrative approaches* (pp. 234-51). Newbury Park, CA: Sage.
- Rorty, A. O. (ed.), *The identities of persons*. Berkeley: University of California Press, 1976(a).
- Rorty, A. O. (1976b). Introduction. In A. Rorty (ed.), *The identities of persons* (pp. 1-15). Berkeley: University of California Press.
- Searle, J. (1983). *Intentionality: An essay in the philosophy of mind*. Cambridge: Cambridge University Press.
- Slife, B. D. (1987). Can cognitive functions account metacognitive functions of mind? *The Journal of Mind and Behavior*, 8, 195-208.
- Strean, H. S. (1985). *Resolving resistances in psychotherapy*. New York: John Wiley & Sons.

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The research leading to this article has been supported by the Social Sciences and Humanities Research Council of Canada and by the Faculty of Arts and the Faculty Association, York University. The author is also grateful to the clients and therapists who participated in the study, to Jeff Phillips and Charles Marino for assisting as interviewers.