The right to choose: Existential-phenomenological psychotherapy with primary school-aged children

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Research shows that, on average, one in 10 primary school-aged children in the UK have some kind of diagnosable mental health problem (Department of Health, 2004). Various agencies are involved in working with children’s emotional well-being, from statutory and voluntary sectors, and it is a growing field. Much of the therapeutic work carried out with young children takes place through the medium of play therapy and is thought about often from psychodynamic/psychoanalytical, behaviourist or systemic theories. This paper seeks to consider the approach of working in an existential-phenomenological way with children and how existential philosophy can inform the child practitioner’s thinking and interventions. While existential philosophers point to various ontological factors of life including freedom, isolation, relatedness, meaninglessness, anxiety and death/nothingness, this paper examines two of these strands in relation to working with children. The areas of freedom and personal responsibility are explored, together with relatedness and intersubjectivity. While some arguments against using these ideas with children are raised, the paper seeks to reassure practitioners that an existential-phenomenological approach to working with children is not only an appropriate approach, but can also bring about significant alleviation of children’s distress.

IKE ADULTS, children come to psychotherapeutic situations with a wide array of difficulties with living. These can include interpersonal problems, school refusal, bullying, fear of death, fear of hell and the devil, an inability to concentrate or learn in the classroom, an inability to ‘behave well’ at home, difficulties around parental disputes and divorce, abandonment and rejection, mutism, drug use in the home, emotional, physical and sexual abuse, homelessness, panic attacks, sibling rivalry and bereavement. The list is as long as the number of children who present themselves or who are presented by parents or teachers for emotional support, or even for ‘correction’.

Parenting, behavioural and CBT strategies are also becoming more widely used in children’s mental health settings. Working existentially-phenomenologically does not appear often in open discourse around working with children.

To pose a typically existential-phenomenological question, what does it mean, to work existentially with children? Some clarity can be gained from the derivation of the word existential from the Latin word existere: to stand out, to emerge, to become. According to Misiak and Sexton (1973), existential-phenomenological work is an investigation of existence as experienced by man as an individual, its fluidity and constant state of ‘becoming’. Existential-phenomenology is characterised by its emphasis on key ‘givens’ of existence: freedom and responsibility, meaninglessness, isolation and ultimately, death and nothingness. In phenomenological thinking, symptoms of mental disturbance are expressions of an individual’s attempts to defend against these central existential anxieties.
Working phenomenologically

Clearly there are as many different ways of working existentially as there are practitioners doing so. According to Cohn, Heidegger talked in the Zollikon Seminars about the necessity and difficulty of focusing on the phenomena (2002, p.75). Heidegger’s hermeneutical view of phenomenology lends itself very well to working with children, for whom context is everything. The continual reinterpretation of phenomena and the examination of the process of interpretation are necessary parts of working with children, who often communicate through metaphor or other oblique means. Working existentially it would be accepted that it is impossible to arrive at a definite solution or final interpretation of what a child might mean through his work; one can only ‘continually reinterpret the phenomena’, as Heidegger would have us do.

By carrying out the process of trying to discover meaning, both inside the therapy room with the child and outside in supervision and in private contemplation, the therapist can achieve multi-layered understanding of their child client. But even while arriving at certain realisations, the therapist can bear in mind that there will always be more complexities to what has gone on; they cannot ‘know’ the full details.

Conducting play, art or drama therapy with a child in a child-centred way can by its nature become phenomenological, and lends itself to this type of approach. In the main, the work can be entirely at a metaphorical level, and to help and encourage a child to play out or create his concerns in that moment is to give ‘priority to the phenomena’ (Cohn, 2002). Children will, for example, create images and forms which, taken out of context, may seem meaningless, but within the context of the play room, the course of therapy so far and the relationship between the two people in it, carry huge importance and often very complex meaning. To take a reasonably clear-cut example, many children present with symptoms that point to repressed feelings about younger siblings. In their artwork they may paint images of sadism and destruction that could be interpreted as powerful rage and hatred of the usurping baby, such as babies stuffed down toilets, babies with their heads chopped off, and so on.

In phenomenological work, the emphasis is on the here and now experience of the child and therapist together. It is not a case of doing therapy to the child, or – crucially – having an agenda for the child to change, but more a case of getting alongside the child, letting the child ‘be’ and of the therapist ‘being with’ and ‘being for’ the child. The existential-phenomenological therapist should not be driven by the desire to bring about shifts in the client; but rather to be with that client in such a way that they completely accept the client and thereby help that client truly understand themselves and their world (Spinelli, 2007). The importance of the work is not on the ‘why’ but more on the what (noema) and the how (noesis) of the child’s material. Rather than being technique led, phenomenological work is a set of principles: ‘It is not the understanding that follows technique, but the technique that follows understanding’ (Misiak & Wilson, 1973).

Freedom and responsibility

From the writings of Kierkegaard and Nietzsche, through 20th century philosophers such as Heidegger and Sartre, existential philosophy has it that we have far more freedom of thought and belief, behaviour and emotions than we think.

Heidegger’s seminal work, Sein und Zeit (1927) – translated into English as Being and Time (1962) – explored the meaning and physical ramifications of ‘being there’ (Dasein). Heidegger did not reach a final explanation, and indeed no-one else has got there yet: it is a situation with which we universally find ourselves struggling. Like Sartre, with his notion of living in ‘good faith’ or ‘bad faith’, Heidegger concentrated heavily on the idea of living authentically and inauthentically. To live authentically is to
embrace the idea that we are free to construct our own world. However, the price we pay for this freedom is the understanding that we are in a sense isolated, and that life has no meaning or purpose dictated by an ‘other’; it is an anxious process which will inescapably end in nothingness. But, on the other hand, the reward of facing up to these facts of life, of taking responsibility for ourselves, rather than living for other people and their rules and demands, is the liberation of making what we want of our own lives.

If we are free to live our lives and to construct meanings for the phenomena around us as we choose, then we are responsible for ourselves. Conversely, if we choose to live in a state of denial of the inescapable facts of our lives, we live inauthentically, and become irresponsible for ourselves. According to Sartre, people living in a state of bad faith deny their own freedom, and with it their capacity to fulfill their personal potential. They excuse their denial by blaming their limitations on externally driven factors such as society, class, gender, parents and religion (1943).

Warnock describes the result: 

The inauthentic being: ‘…ignores the reality of his own relation to the world. There is an ambiguity in his dealings with reality. He partly knows what things are, but partly does not, because he is so caught up in the way other people see them, the labels attached to them by the world at large. He cannot straightforwardly form any opinion, and his statements are partly his own, partly those of people in general … the conversation of the man who is inauthentic is said to be Gerede (prattle) as opposed to Rede (discourse)’ (1970, p.57).

While this seems a laudable aim, is it feasible to ask children to consider life in this way? By dint of their age and station in life, children are in the throes of ‘becoming’ (hopefully) a fully functioning adult human being. To do this requires a process of assimilation and introjection of cultural and social beliefs from their families, peers and the world around them (Benedict, 1934; Mead, 1935; Cole, 1998). This can be described as a necessary part of development which ensures the child’s survival within its social groups. If the child’s eyes are opened to a deception during this phase of their life, what would that mean for their continuing development, which necessarily has to occur against the backdrop of the very family members who may be deceiving them? Does this mean children are in a continual state of living inauthentically, having to believe in the beliefs of others?

Furthermore, is it developmentally advisable to encourage the child to wake up to its world and the reality of its existence, when the child is essentially trapped in its situation and has to remain attached to its care givers in order to survive? Van Deurzen points out that not everyone is suitable for existential work. One of her criteria for suitability is that the client must be someone who questions the status quo, rather than wanting to fit in and be ‘normal’ (1995). Furthermore, like Laing and his work with people suffering with symptoms of schizophrenia and other mental health problems, British existentialists reject the idea of working with the client to help them slot back into society and the status quo, instead preferring to help them find their own unique way of being. This could be quite a difficult criterion for a child, as often a child not only has to fit in with its status quo in order to survive, at various developmental stages also has a pressing need to be ‘normal’ and ‘the same as everyone else’.

However, children are a lot more critically minded than perhaps they are given credit for, and in their work will often make acute observations about their situation. For example, I heard an example of a group interaction that went like this:

Boy 1: I hated that exercise, I hated everything about it, it was crap.

Boy 2 (aged 5): No William, you hate yourself.

Old sayings such as ‘out of the mouths of babes’ can carry much insight. Children are well-known for their willingness to express
honest thoughts even when not welcomed by the adults around them. I believe from my work with children that they have their own strong moral compass and an innate, if blurred, understanding of their existential situation, which can be tampered with by environmental factors but rarely absolutely crushed.

‘Children are not yet fools, but we shall turn them into imbeciles like ourselves, with high IQs if possible.’ (Laing, 1967 p.49)

At a societal level, while children may not be universally believed, UK law enshrines the idea that, so long as a child can prove that he knows right from wrong, he can be believed in a court room situation, almost regardless of age. Take, for example, the recent case of Baby Peter’s stepfather, who was successfully convicted of rape on the verbal evidence of a 4-year-old girl (The Guardian, 1 May [Electronic version] 2009).

While young children have very limited freedom to choose whose ideas they are exposed to, the point of existential ideas of freedom is not that we are free to do whatever we want. On the contrary, it accepts the limitations of our existence, and exercises freedom in the construing of and reaction to the givens of our existence.

‘Our freedom does not lie in our ability to control or determine the stimuli or events that impinge upon us….the significance and meaning I give to the stimulus, the interpretation I might make of the event, ultimately the way I experience the stimulus, is a matter of choice.’ (Spinelli, 1989, p.111)

It is from this standpoint that a huge difference can be made with children therapeutically. The idea of authenticity and responsibility can be vitally important when working with children, who often have limited reasoning around why they act and feel the way they do, but, crucially, usually at some level I would contend, desperately want to find out and do something about it. Take a ‘naughty boy’ who essentially is a highly distressed individual who has no other way to cope with his intolerable feelings of confusion, guilt, shame, low self-esteem and helplessness, than to ‘act out’. In other words, disrupt the class, walk out of class, be rude to the teacher, smash things, hit other children, and so on. This child is constantly isolated at school, punished at home and at school and told he is ‘bad’, thereby consolidating his fears about himself and the cycle continues.

This sort of child will often present himself in therapeutic work with a genuine desire to feel better, cope with his angry feelings and get on better with everyone. He can be helped, in relation with the therapist, to think about his world and his view of himself and others, and what life is really like for him. A phenomenological understanding of his creations and actions in therapy can help this child understand himself and consequentially understand that he has a choice over how he reacts to the stimuli around him. Of course, it is then up to the child what he does about it, but I would say that, where a child has gained this understanding, at whatever level, he is more likely to survive his situation intact.

Conversely, the shy, withdrawn, depressed child who is often in tears and alone in the playground might, through phenomenological exploration, begin to understand himself and start to get in touch with very angry feelings, that might manifest themselves outside the therapy room for the first time, often to the consternation of those around him. Either result is a sign of an evolving towards authentic existing.

In many cases, no matter what work the child does on himself, conditions at home will stay the same and, therefore, he will be in just the same position. However, one of the hardest things about being in therapy can be the understanding that no matter who has done what to the client, it is up to the client and the client alone to take responsibility for their own life – no one else is going to do it. Unfortunately the same goes for many children (excepting where a child discloses a child protection issue and legal requirements around safeguarding the child come into force). Where no work can
take place with the family, as is often the case, it will be then up to the child and the child alone to grasp responsibility for their existence, in the sense of their inner world and the way they view themselves and the world. If such a child is in a state of readiness to undertake therapeutic work, over a course of time in existential-phenomenological work, he can slowly use the complex interaction between himself and the therapist to increase his trust in his own senses, efficacy, agency, identity and esteem. When enough of these elements are in place, the child can and often does understand the world he lives in well enough to ensure his survival as a discrete entity in the world. Subjective reports from children, teachers and parents will often reveal an improvement in whole family dynamics when a child has been in therapy for a period of time.

**Relatedness**
To work existentially is to accept and embrace the relatedness of client and therapist, that each interpersonal encounter is an intersubjective experience that affects all parties involved. According to existential thought, the self is not an intra-psychic apparatus, but is situated in the relation between the person and the world.

Many practitioners working with children are acutely aware of the importance of reflexivity, of acknowledging felt sensations, emotional responses and reactions to the material as conduits to understanding the child’s world. In psychoanalytical terms, unconscious communications such as transference, counter transference, and, very importantly in work with children, projective identification, are key to the work, particularly where the therapy is an almost exclusively non-verbal encounter. While a traditional psychoanalytical thinker might understand a projective identification as ‘belonging to the client’, existential thinking would claim that the emotion or sensation under discussion was ‘in the field’ between client and therapist, and in some way belonged to both parties.

Indeed, several psychoanalytical thinkers have moved away from intra-psychic determinism and towards a relational view of human interaction and psychological development and health. For example, Stolorow and Atwood (1994, pp.ix–xii) describe intersubjectivity theory as ‘a field theory or systems theory in that it seeks to comprehend psychological phenomena not as products of isolated intrapsychic mechanisms but as forming at the interface of reciprocally interacting worlds of experience.’

Merleau Ponty took up the Heideggerian notion of Dasein but expanded it to encompass more of an idea of Daseins being in the world with each other. He says: ‘There are no longer two independent consciousnesses, with their own different teleologies and distinctive destinies, but two mutually enfolding glances … One’s own body can assume segments derived from the body of another, just as the substance of one’s own being passes into the other’ (1964, p.15). However, while Merleau Ponty seemed to be saying that people are very much fluid entities that exist in the world, he also retained the idea of them being at the same time individuals – incarnated minds. This seems to leave room for the notion that while the human self is largely an interaction with its environment, there is some scope for private, even internal, workings.

Merleau Ponty’s ideas about the nature of being with others in the world seem to lend themselves to working with children, who by nature tend to engage with the world in a more material, literal and embodied way than perhaps adults do. Younger children in particular are not yet fully linguistically developed and therefore tend not to be able to distance themselves from their experience through language as well as adults can. In play therapy, for example, the child therapist lives with the paradox that, for the most part, the child will not talk about their experience. But if the therapist attends carefully, the child will bring the therapist into his four ‘worlds’ of existence (private, public, physical (Binswanger, 1963) and spiritual
(van Deurzen, 2002) through a variety of means: directly, through metaphor and by giving the therapist access to his feelings by way of the intersubjective experience that takes place between them.

Perhaps this is not so far from Klein’s conception of how the constant process of projection and introjection back and forth between infant and mother is, under ideal conditions, the process by which the infant’s ego builds strength and become whole. Through this constant flow of psychic traffic between mother and baby, the infant learns to cope with and contain persecutory fantasies about self and other and to become integrated and move from the paranoid schizoid position to the depressive position (1997).

For example, a child I worked with several years ago, who was severely emotionally neglected and had suffered life-threatening physical abuse, used to enjoy some quite sadistic play. Several sessions in she became quite frantic in her activity; she got together a variety of paints and mixed them up into a brown slurry, which she proceeded to smear all over a table. Looking at me with some glee, she wrote my name in it. I experienced a variety of emotions, including worthlessness and humiliation, anxiety and annoyance. This child was making visible some profoundly difficult aspects of her life to me, including massive ambivalence and concern about her feelings of hatred for various members of her family and a huge fear of feeling love for and dependence on another person. I suggested that she was feeling pretty cross with me, at which she laughed maniacally. Many months later as we came to the end of our work together, in the penultimate session, she created a beautiful house and as she did so started to sing (for the first time in my presence) the Whitney Houston song *The Greatest Love of All* in a cracked and emotional little voice. As I listened to her sing the lyrics word perfectly (‘the greatest love’s inside of me’) I experienced a mixture of wanting to laugh and cry, such was the profound emotional charge of the messages she was giving me. It seemed that this child used the space between herself and her therapist, both of whom were deeply committed to the relationship, firstly to mine the depths of her difficulties and finally to communicate that she had found an alternative way to consider herself in the world in which she lived, and, therefore, open up new possibilities for her life.

**Intersubjectivity in the therapeutic relationship**

‘Human beings relate to each other not simply externally, like two billiard balls, but by the relations of the two worlds of experience that come into play when two people meet.’ (Laing, 1967, p.53)

Anyone who doubts the intersubjectivity of people working together in the therapeutic dyad, or indeed in any intimate connection, could have their doubts removed by working with children. This endeavour is made more fascinating by virtue of the fact one is working right at the time when the child is busy being formed and forming himself in relation to others. The child is still ‘soft’, his ego boundaries let traffic in and out very easily and his self-hood is at an early stage of formation. With adults, one often finds oneself listening to stories of childhood and past explanations for current distress, percolated through the medium of the adult body. But with the child, later distress is being potentially laid down in the present. While this means a huge duty of care for the therapist working with such a vulnerable person, it also provides a precious opportunity to help that child form himself such that he is more able to constitute his world in a way that is more beneficial to him on an on-going basis.

Most practitioners who work with children will be aware of the power of a long term, secure attachment, the only one of some children’s lives. Having experienced a secure and nurturing relationship, the child can hopefully go forth into the world knowing what it feels like and therefore be able to choose similar experiences. Furthermore, the presence of a securely attached, nurturing adult can even help the child –
and indeed some adult clients – go back and re-do some developmental tasks, such as learn to self-soothe (Gerhardt, 2004). Working from an existential stance with the child offers an intrinsically two-way relationship, in which both parties are committed to each other and the therapist is well-aware of the intersubjective possibilities of her presence for the child in that relationship. This is particularly interesting in the case of children who live in family systems such as those described by Laing and Esterson (1964): highly toxic environments where children are given undermining and diminishing messages about themselves, under the guise of love and concern.

Furthermore while they have some idea of what is going on, their perceptions are continually denied. As Laing (1967) puts it: ‘It is not enough to destroy one’s own and other people’s experience. One must overlay this devastation by a false consciousness inured … to its own falsity.’ When children have their feelings, perceptions and thoughts consistently denied by other members of the family, that child will become highly confused. Children know they are being lied to, but cannot necessarily trust their impressions enough to be able to hold this position. According to Laing, one mechanism that child may later use to defend against this state of affairs is a retreat into mental ill health, such as schizophrenia (1960, 1964, 1967).

A further problem, according to Laing, is not with the family imposing rules, but with the way it does not distinguish between actions and being. So, for example, the child assimilates the identity of ‘naughty child’, then when a naughty act is punished, the punishment is perceived as a threat to the whole self. Working existentially with children labouring under these circumstances can be particularly rewarding, as it offers a chance to help that child get a more secure hold on his perceptions of the world. For the average child receiving psychotherapeutic help, not only are they coping with major difficulties, they will also probably think it is their fault, either by dint of toxic messages from those in their system, or because they are, in Piagetian terms, at an ego-centric age where they are still at the centre of their universe and therefore everything in it that goes wrong must be somehow their fault.

By taking an approach such as Laing’s, one can work very effectively with children by helping them unpick what is going on, what their role is in it and to aid the child in confirming for himself his own sense of what is going on, rather than whatever false explanation he may have been given by often well-intentioned adults.

An example of a child in this situation was a boy who, over two years of work (from aged 8 to 10) moved from addressing the world in a chaotic way, where he did not know what day it was, how long a week was, what his nationality was, what language he spoke, when his birthday was, let alone why he seemed to have the devil inside him, to the point where he could get up, get dressed and get on the bus to school at the correct time, all without his mother even knowing he had left his bedroom. I suspect that what brought about this shift was largely the presence over an extended period of the basic tenets of any humanistic work: a trustworthy, caring and honest other, who accepted all of his material, however outlandish, and who turned up every week at the same time.

In this type of work, it is of particular importance to be highly consistent, predictable and honest, to be a solid presence against whom the child can test out his ideas. This can be extraordinarily powerful for some children who can seem half mad with confusion about themselves. Children will always retain a sense of their own truth, but this sense becomes tenuous under the weight of alternative interpretations given by trusted adults. An existential therapist can help the child use his will in order to navigate the world in a way that affords him a greater sense of agency, efficacy and, perhaps most important of all, hope.
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