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TITLE:
‘This gift is for you!’
An exploration of counsellors’ personal views on the meaning of gifts and their gift-giving experiences in therapy.

THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS OF THE B.A. (HONS) COUNSELLING AND PSYCHOTHERAPY.

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DATE:
27th March 2012
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ACKNOWLEDGEMENT

I would sincerely like to thank Eamonn Boland for his support and guidance throughout the project, from inception to completion.

I would also like to thank Laurence Demoitie, my fiancée and best friend, for her continued encouragement and moral support during my time on the course.

Last, but not least, I would like to thank the counsellors and psychotherapists who participated in this study, who gave their time and shared their gift-giving experiences in therapy so openly.
ABSTRACT

Gift-giving is an important interpersonal transaction that has not received much attention in psychotherapy literature. However, in practice, therapists often receive gifts from clients and are challenged to understand the meaning of gifts and respond to them therapeutically. Although a larger number of quantitative studies have been published in recent decades, there still exists little qualitative research into the meaning of gifts.

The objective of this study is to explore therapists’ underlying beliefs around gifts, and how those relate to their use of gifts in therapy. A qualitative research approach was applied in this research project to this purpose, and six therapists shared their attributed meaning to gifts in therapy during a semi-structured interview process.

Using the thematic analysis approach to analyse the data, four major themes emerged: (1) Love as the primary meaning of gifts in therapists’ personal lives, (2) Therapists’ response pattern to receiving a gift, (3) Therapists’ attribution of meaning to gifts, and (4) Ethical codes, training and supervision as sources of meaning.

The results show that therapists identify gifts in their personal life mainly as an expression of love. Most therapists assign a high significance to gifts both in their personal life and therapy. Their response patterns to receiving gifts vary considerably, though, ranging from a mere acknowledgement to a proactive contextual exploration of the meaning of gifts together with the client. In general, ethical codes, training and supervision are considered highly influential with regard to the handling of gifts.

From these findings, it would appear that the significance of gifts in therapy is acknowledged by most therapists today, but the attribution of meaning and the response to gifts can differ considerably. Through investigating the participating therapists’ own response pattern, their views on gifts were challenged. Therefore, this research hopes to provide psychotherapists and counsellors with a renewed appreciation of how gift-giving may further the therapeutic process.
CHAPTER 1
INTRODUCTION

1.1 Gifts and Gift-Giving in Therapy

Traditional psychotherapy has largely rejected the giving of gifts in therapy. Those who reject the giving of gifts usually are afraid of unethical behaviour, boundary breaches and the unhelpful consequences to the therapeutic alliance. Understandably, much has been written about this, considering the well-documented dangers of dual relationships, therapists taking advantage of the client’s ‘generosity,’ etc. This negative effect of gift-giving has resulted in most therapists being advised to not to give or receive any gifts at all.

However, in recent decades, various proponents of psychotherapy have suggested that appropriate gift-giving can have a positive therapeutic impact. Their argument is that gift-giving is a common way of expressing love and appreciation with a strong symbolic meaning across cultures. A rigid therapeutic stance is not helpful, therefore, in many instances, as the client may feel rejected and this then influences the progress of therapy in a negative way. Therefore, it is argued that inexpensive gifts that are given or received at an appropriate time in therapy might well be used as powerful therapeutic tools in the right context.

In summary, having moved from a rather rigid stance of no gift-giving in the past, a careful use of gifts in therapy has been welcomed by many in recent decades for different reasons. However, as a matter of fact, practitioners seem to justify their gift-giving and receiving based on a myriad of reasons. This project is mainly concerned about therapists who deliberately use gifts in therapeutic practice, and the meanings they attribute to them.
1.2 The Inspiration for this Study

The idea for this research project emerged through the author’s own therapeutic practice. One day a client handed the author a pen and emphatically declared “This gift is for you!” An awkward silence followed. Not having carefully thought through the issue before, and being well aware of the fact that there are different perspectives on the issue in the relevant counselling literature, the author felt very challenged by the situation. This experience then inspired further investigation into the topic of gift-giving in therapy.

1.3 Relevance of Gift-Giving in Therapy

It is argued throughout this project that the issue of gift-giving in therapy is highly practical. First, every therapist will be confronted with a client wanting to give a gift to him or her at times. Therapists too might contemplate giving a gift to a client at times, but do not know exactly how to interpret and handle the situation. Second, gift-giving in therapy has great potential for both considerable harm and great therapeutic benefit for the client. This certainly warrants a careful consideration of the issue at hand.

1.4 Research Questions and Aims

The sole focus of my paper is to look closely at therapists who deliberately allow for gifts in their therapeutic practice. I hope my research will show some of their underlying personal beliefs and motivations around gifts, and how those might relate to their use of gifts in therapy. The applied research approach and methodology will be outlined in more detail in chapter 3.
2.1 Contemporary Gift-Giving Practice in Therapy

Amos and Margison (1998) conducted a survey amongst therapists in the UK and collated some hard fact on gifts in therapeutic practice. They found that only 8% of the therapists interviewed had not received any gifts from clients. The most popular gifts were alcohol and flowers, followed by an array of handmade gifts such as crafts, paintings, photographs etc. Almost half of the gifts were accompanied by something written, and 61% of gifts were made at the end of therapy.

However, many of those surveyed felt that receiving gifts and managing the multiple levels of communication in a gift was problematic. The discomfort stemmed from the fact that the therapist did often not know if they could accept the gift. The authors assume that this is so because so little is written about gifts in the literature, and there are still many professional codes that do not mention them explicitly (Amos & Margison, 1998, p. 45).

Researching another aspect of current gift-giving practice, Brown & Trangsrud (2008) looked at the factors associated with acceptance and decline of client gift-giving in an empirical study. Accordingly, mental-health professionals were more likely to decline gifts that were more expensive or were presented during the course of treatment rather than at the end of therapy. Several participants indicated they do not normally accept gifts from clients because they considered this a breach of their code of ethics.
In order to get a better understanding clients' opinions on gifts, Knox, DuBois, Smith, Hess, & Hill (2009) interviewed nine therapy clients and questioned them with regard to their gift-giving to therapists. The data was analysed using consensual qualitative research.

The majority indicated that they bought inexpensive gifts they thought their therapist would like. They handed the gift over during the course of therapy, either in the context of appreciation for the therapy received or an important life event. Significantly, similar to the surveys done amongst therapists, most clients too reported mixed emotions in relation to gift-giving. Moreover, they commented that any discussion of the gift was both typically brief and did not explore its deeper meaning! Nevertheless, the majority considered gift events to positively affect them and their therapists.

Amos, Burman, Goldberg, Margison and Spandler (2000) presented a qualitative analysis of an open-ended survey on the topic of gifts completed by British psychotherapists. The writers discuss the wide range of interpretative and communicational meanings with regard to the giving and receiving of gifts within the psychotherapeutic encounter.

The main point made is that when a gift was given, as well as what it was, informed the meanings conferred upon it by therapists. These meanings included amongst others aggression, as well as gratitude, or negotiation of dependency. Overall, the authors argue against specifying prescriptive guidelines for practice. They point out that a consideration of gender and cultural relations requires a more nuanced discussion of gift-giving as acting out within therapy.
2.2 Meaning of Gifts in a Wider Context

A range of views on gifts has been offered by various disciplines, including anthropology, psychology, sociology, economics, and other disciplines.

Presenting a very influential anthropological view, Mauss (2002, pp. 10-13) explains the function of gifts in the context of primitive societies and demonstrates that the motives behind giving gifts are more complicated than commonly believed to be. Accordingly, gifts are not necessarily something given out of good will, and in many tribal cultures a gift is reciprocated.

A gift is primarily given in order to gain respect and authority from it, and so that one will also receive something in return. Therefore, behind the motives of gift-giving is not so much goodwill but the motives of power and authority. Importantly, rejecting a gift is at the same time rejecting a bond of alliance and breaks the sacred quality of exchange. This might present a good argument for the use of gifts in a therapeutic context.

A similar non-altruistic view is taken by Abrams (2006), who explored the various forms and meanings of giving in a general context. He points out that there is a significant correlation between exchange systems; for example, commercial trade and the exchange of gifts. Abrams relates this to the therapeutic context where the gift and giving seem to occupy a strange place, as he calls it.
Some authors have allowed for a more idealistic and differentiated view of gifts.

Belk (1996) describes the nature of gifts by outlining the distinction between perfect and imperfect gifts. While the perfect gift - including sacrifice, altruism, surprise, delight and appropriateness - seldom appears in actual practice, it is nevertheless a universal ideal that appears to be treasured across many cultures. “As an ideal template for gift giving the perfect gift is a pervasive and important framework” (Belk, 1996, p. 69).

The imperfect gift lacks one or more of those characteristics, and that can be due to a failure on part of the giver and receiver. For example, a cheap gift removes the condition of sacrifice. A gift given with ulterior motives removes the condition of altruism. If the gift is generic or a token gift, it eliminates the condition of appropriateness. Routine or pre-arranged gifts eliminate the condition of surprise.

Finally, gifts that do not match the recipient’s desire eliminate the condition of delight.

Importantly, the gift is not imperfect so much because of the gift itself. The gift is only a symbolic vehicle through which giver and receiver interact (Belk, 1996).

Other approaches have stressed the important function of gifts in the context of relationship.

Berking (1999), for example, defines the giving of gifts from a sociological point of view and describes it a ritual “through which the current value of a relationship may be communicated and maintained” (p. 5).
Similarly, Vandevelde (2000) offers another sociological definition that sees the relationship between giver and receiver as primary and the gift as secondary. He defines a gift as “... every allowance of goods and services made without guarantee of return, with a view of creating, maintaining and regenerating the social bond. In the relationship of gift, the bond is more important than the good” (p. 47).

Last, but not least, Cheal (1987) suggests that intimacy can be structured through the giving of gifts. Therefore, gift-giving can be seen as a means through which individuals communicate the values that they assign to their significant others.

Finally, some authors have highlighted that there are also important cultural considerations of gift-giving.

Dobson (2010) draws the attention to the fact that gift-giving does not just have multiple meanings in general but also means different things to different cultures, as their cognitive assumptions are different. Therefore, different communication styles that are culturally influenced are reflected in gift-giving. In some cultures like Japan, for example, gift-giving demonstrates respect. In contrast, in some African countries and South America, gift-giving is an expression of gratitude.

In a similar fashion, Goldberg (2002) situates the gift within a system of wider cultural meanings. As a result, this lessens the traditional pathological view of gift-giving that is often found in psychotherapeutic literature.
2.3 Meaning of Gifts in a Therapeutic Context

Multiple meanings of a gift have been proposed in a therapy context, mostly from authors with a psychoanalytical background.

Freud (1917) was well aware of the powerful underlying dynamic of gifts. He noted that the first gift given by an infant is often its own faeces. In fact, he suggested that the first meaning, illustrated by a child developing an interest in faeces, is that of a ‘gift’. He also notes that faeces are not ordinarily given to strangers. Therefore, the child’s giving of its faeces to its caregiver, family member, or friend can be seen as a spontaneous gift and as a token of affection.

Freud also argues that because faeces are the child’s first gift, the child easily transfers his interest from that substance to the new one of money or other objects. Concluding from this, Freud encouraged therapists to “consider their experience of psychoanalytic treatment, study the gifts they receive as doctors from their patients, and watch the storms of transference which a gift from them can rouse in their patients” (Freud, 1917, p. 131).

Stein (1965) draws attention to the correct interpretation of gifts as a turning point in therapy. Accordingly, gifts are a special form of communication, having their roots in unconscious fantasy. Along Freudian lines, the client symbolically gives the therapist a gift on an oral, anal, or genital level. At the same time, the client wishes to attach the therapist to a gift in return. Stein argues that gifts serve as a defence against both hostile and erotic impulses and are intermediates between dreaming and acting out. Moreover, gifts can also conceal a repressed traumatic memory.
Orgel & Shengold (1968) notice some repetitive phenomena surrounding gifts in therapy, especially those between parents and children. As a result, they put forward the hypothesis that a gift can have the effect of binding the receiver symbiotically to the giver. The gift has the effect of supplying the missing body part to the receiver, the child. This holds the child in symbiotic bondage with the giver of the gift, ordinarily the parent. Thereby, the gift interferes with the emerging identity of the child, and effectively binds the child symbiotically to his parent. Later in adulthood, gifts can express any level of the basic parent-child relationship ranging from symbiotic fusion to mature object love.

Therefore, Orgel & Shengold (1968) propose along the lines of Anna Freud that:

Where the capacity for object love exists, a gift completes, or adds to the wholeness of, the identity of the recipient. Gift-giving of this kind involves relatively neutralised energy. The giver is not primarily satisfying his own drives, erotic or aggressive, through the gift, but those of the object. The gift is chosen by way of a temporary partial identification with the recipient; in large part preconscious processes are involved, and both partners retain or enhance their self-esteem and separate identities. A true gift should involve a renunciation of claims for permanent fusion with the object. The gift signifies the reversal of fusion without injury to either giver or recipient (p. 383).

Goldberg (2002) suggests that the meaning of gifts is unconscious and hidden and must be brought to light with observation and interpretation. She suggests that the meaning of a gift is co-created in the therapeutic relationship. Thereby, she suggests an alternative view of the meaning of gift in therapy as a narrative construction rather than an immanent revelation.
Along similar lines, Talan (1989) discusses mainly psychoanalytic theorists and the problems that may arise with gift-giving. Overall, he proposes that gift-giving is a highly symbolic act with multiple levels of meaning.

Kritzberg (1980) confirms such a view and interprets gifts given by clients to their analysts as symbolic transactions with unconscious motives. Accordingly, gifts often mirror the variations of the transference and are technically a form of acting out of transference reactions. Thereby, they are significant reflections of the client’s character trends. They also can point to problems in the important giving-and-receiving dimension of human behaviour. The author suggests that gifts should be analysed in terms of the underlying impulses, memories, and associated defences that they represent.

Schaverien (2011) stresses the importance of gifts as non-verbal cues and interactions with a meaning that may be metaphorical. He draws the attention to the darker side of gifts because, on the surface, the gift might appear to be an expression of love. This may instead be a communication of a wish for acceptance. However, it may also have a more sinister, unconscious intent. For example, it may embody the wish to get rid of unwanted emotions, get rid of evil, or control the analyst.

Overall, as highlighted by Syme (2003), the language of gifts is certainly complex and carries various hidden messages in various categories. The categories include the nature of the gift as a metaphor, information about the client’s feelings about themselves, information about how the client feels about the therapist, and relationships in the past (transference), with the latter three perhaps as yet inexpressible in words (p. 47).
Further applications are described by Gallo-Lopez and Schaefer (2005), who suggest that a gift can be used as a transitional object in play therapy.

For example, at the closing of therapy, the therapist asks the client to each make a handmade gift for each other. Thereby, the gifts serves as a means of remembering each other and sends the message that the client is a valuable individual with many gifts that can be shared to benefit other people. Ideally, the gift also involves some type of visual reminder of the progress made in therapy (Gallo-Lopez & Schaefer, 2005, pp. 135-136).

Brodsky & Gutheil (2008) describe the process of ‘acting in’ in therapy where the gift becomes the object of a bargaining process. Whereas acting out means taking an issue from therapy and acting on it outside of therapy, ‘acting in’ means taking an issue from outside of therapy and acting on it in therapy. In this context, gifts become the object of a bargaining process and are seen as part of an exchange.

For example, a gift to the therapist can represent a conscious or unconscious effort to suppress the expression of aggression or anger. The client may think, for example, that if he gives a gift to the therapist, he can avoid looking at his messy and unpleasant feelings. The gift becomes a bribe, so to speak, “...with an explicit or implicit quid pro quo” (Brodsky & Gutheil, 2008, p. 88).
Taking a person-centred perspective, Lambers, Mearns, Thorne & Warne (2005) make the point that the therapy itself [or therapist himself] can be seen as the gift to the client. Although tangible gifts are the focus of the thesis, it is good to be reminded that the therapist can be seen as the intangible gift in therapy. “To be with a person who is unconditionally accepting, emphatically attuned and in touch with his or her own flow of experience is the gift received by the client” (pp. 87-88).

Smolar (2003), too, voices the notion of the therapist as the gift in therapy. “For many patients, the therapeutic setting itself, in which the therapist listens in a non-judgmental, empathic fashion, while placing the patient's needs as primary, represents a gift never experienced previously” (Smolar, 2003, p. 301).
2.4 From the Meaning of Gifts to Therapeutic Applications

Deriving from the different possible meanings of gifts in therapy as discussed before, a variety of concrete applications and recommendations of gift-giving with potentially great therapeutic benefits have been put forward.

Smolar (2003), for example, gives a vivid clinical example that illustrates that gifts can operate as a transitional object. Rachel, a woman in her twenties, presented with borderline syndrome. She struggled with her hateful and loving feelings for her therapist, but felt that the therapist was the only one who had ever cared for her. Struggling with abandonment and a pending divorce, absences of the therapist created additional challenges for her. One day before a longer holiday, Rachel asked her therapist if she could buy a stuffed bear and name him Andrew. She wanted to hold the bear and think about her therapist during his holiday absence. The therapist gave permission to do so and acknowledged that this represented a progress in the therapy as Rachel with the help of the object was able to identify strong loving and hateful feelings towards himself. As a result, Rachel felt great relief and experienced the bear as a gift from the therapist to her (pp. 303-304).

Bornstein & Weiner (2009) stress the importance of a correct appraisal of transference feelings and use the context of gift-giving as an important example. They introduce a case study of a client who avoids saying anything personal to the therapist during sessions but who brings the therapist gifts and who seemingly forgets personal belongings in the therapist’s office. Thereby, transference feelings are being expressed via the gift in indirect ways and without the client’s awareness. As a result, this behaviour, and the intensity of feelings it reflects, calls for an interpretation by the therapist.
Beier & Young (1998) see great potential in gift-giving and actively encourage it. They acknowledge that gift-giving has a very strong component of social convention and should therefore not be prevented. However, therapists can always use those gift-giving situations for the benefit of therapy by exploring deeper feelings and motives that lie beneath the safe structure of a gift. In fact, it is very likely that a conventional gift carries with it deeper layers of meaning and emotions. “Because the gift is such a safe way of expressing feelings and setting up structures that some of the most therapeutically important feelings are likely to be hidden behind these expressions” (p. 118).

Beier & Young (1998) also highlight the importance of the common occurrence of a client demanding gifts and the unconscious processes involved. It is no surprise this can be hard to spot, as both conventional gifts and seemingly trivial gift objects such as cigarettes, matches, special privileges, or the therapist’s services may be requested. Sometimes, the client may complain about the heat or cold in the office. The requests may seem rational and justifiable enough and the therapist must deal with the request extra-therapeutically, e.g. by turning off the heat if the client is too hot. However, often enough the therapist can afford to look at unaware sources.

Hahn (1998) calls for a balance between interpreting all gift-giving behaviour and to accept all gifts. Accordingly, this may limit the therapist’s ability to understand the client’s subjective perspective on the gift. As a result, both supportive and interpretive interventions are used to help clients address the organising principles that give meaning to their experiences. Supportive interventions can include gift acceptance, positive emotional responsiveness, and naming and describing the gift. Interpretations should be used when gifts reflect a desire for reparation, displacement, and the projective identification of ingratiating.
Siskind (1992) highlights the effectiveness of gifts in child therapy and explains why gifts in child therapy make sense. Obviously, the use of gifts has been traditionally much higher in child therapy as compared to therapy with adults. She argues that gifts are an intrinsic part of normal life, such as, for example, a birthday celebration, but may at the same time gratify both the therapist’s and client’s wishes. As a result, the uniqueness of the treatment relationship might be compromised.

In order to resolve this dilemma, Siskind (1992, pp. 268-269) suggests to make it very clear in therapy that the present has to become an aspect of therapy, and not a conventional gift that a non-therapist might give. Instead of choosing a gift for the client, the child client is asked if they want a gift for their birthday, and the child also has to choose the gift. As a consequence, the therapist never has to guess what the child wants, nor is the gift ever a surprise. Moreover, the implications on the parents must be considered, as the therapist, although unintentionally, may enter into competition with the parents.

Schwartz (2010) reflects on a case study in which the client gives gifts to the therapist, both material and affective. In the following, the therapist's intentional and unintentional responses to these gifts are a critical factor in facilitating their work through impasse in the treatment. The author exemplifies this by a client who gives his gift of shame via projective identification to the therapist. This in turn enables the therapist to attend to the client in a way that helps both of them to grow.
Imber-Black (1993) promotes the giving of gifts as a deliberate therapeutic intervention in a family therapy context. Accordingly, the giving of a gift is seen less as a task addressing solely the behavioural level and more as a ritual addressing behavioural, cognitive, and affective levels. The ritual of gift giving is co-created by the therapist and the client.

Relying on symbols rather than concrete instructions allows for a multiplicity of meanings and directions. For example, in the case of families struggling with leaving-home issues, the exchange of gifts can be a helpful intervention. Therefore, through giving and receiving, “the ritual affirms and makes simultaneous the contradictions of separation and continuing connectedness involved in this transition” (p. 123).

Sherman and Fredman (1986) also highlight the usefulness of a deliberate use of gifts in a family therapy context. As the family dysfunction is usually proportionate to the degree of communication impairment, they suggest the use of gifts in order to overcome the difficulty in verbal communication. Thereby, feelings can be expressed metaphorically through the giving of an object such as gifts (p. 176).
2.6 Meaning of Gifts and Ethical Considerations

There is still a notion in the therapeutic community that gift-giving is essentially unethical and might harm the client. Some have taken a cautious position and warn against the potential abuse of gift-giving practice.

Gerig (2004), for example, explores the ethical and therapeutic implications of receiving gifts from clients. He points to the various problems that can arise out of gift giving: “It is the potential for exploitation and distortion of the professional relationship that make the receiving of gifts from clients an ethical concern” (p. 202).

Indeed, many examples highlight the fact that gifts may not be in the best interest of the client. Gift-giving can, for example, be a feature of the clinical picture for clients with dependent or borderline personality disorders. “The mental health counsellor passively accepting a gift from such a client may reinforce patterns of manipulative or self-debasing behaviours that are symptomatic of the problematic levels of functioning” (Gerig, 2004, p. 202).

Another negative ethical effect observed is that counsellors who receive gifts are more inclined to compromise the policy of their agency or professional association. For example, a client who had several no-shows and cancellations and had given a gift to the therapist beforehand might be treated in a different way than another offending client. “The motive for such a show of grace on the part of the mental health counsellor ... might be more out of reciprocity than client need” (Gerig, 2004, p. 203).
Goldstein (2000) also concurs with some of the (negative) advice given by most hands-on counselling literature on how a therapist should respond when confronted with a gift. He highlights the rule of thumb in insight-oriented therapies to not accept a gift when presented with one, because this undermines the task of understanding. At the same time, he highlights the possible negative effects such as shame, hurt, injury and sometimes humiliation experienced by the client under these circumstances. He suggests a new rule of thumb that includes the acceptance of a gift and, at a later stage in therapy, a discussion of the dynamics that initiated it (p. 74).

Several authors have shown a more open position and suggest certain criteria that allow for a deliberate integration of gift-giving into therapy without violating ethical values.

Callanan, Corey & Schneider-Corey (2007) discuss the criteria of how to evaluate a gift in order to accept or decline it. The two main criteria they give is to judge by the monetary value of the gift and to consider the clinical implications of accepting or rejecting a gift (p. 294).

A similar, but more complex, approach based on several criteria was suggested by Brendel, Chu, Radden, Leeper, Pope, et.al, (2007). They strongly propagate that the meaning of a gift has a huge influence in determining whether to accept or decline it. Therefore, in deciding on the appropriateness of a gift, the therapist must consider its meaning in the context of the therapeutic relationship, besides the intention of the gift, its value to the client, and the “...anticipated effect of accepting or refusing it” (p. 43).
Gabrielle Syme (2003) acknowledges the fact that a gift changes the therapeutic relationship to a dual relationship, mixing personal with professional. This does not mean that the therapist ought to decline the gift. However, because of that complexity, it is sometimes better to accept the gift and explore its significance later, when the client feels less threatened (Syme, 2003, p. 47).

Some authors have suggested that the therapist’s well-being can also constitute ethical criteria in gift-giving. Weiss (2004), for example, deals with the topic of gifts in the context of self-care. He generally suggests an open attitude towards gifts as long as the primary motivation to accept them is the benefit of the client. Moreover, he emphasises the possible positive and negative implications of giving and receiving gifts on the therapist’s well-being.

Some authors have reflected on gift-giving with the help of various ethical codes in psychotherapy.

The codes of ethics of psychotherapists’ professional associations have certainly developed over the last few decades. Zur (2002), for example, highlights the fact that most codes of ethics during the mid-twentieth century and ensuing decades concentrated on protecting client welfare and preventing the abuse of power by practitioners. However, because of the fact that the meaning of gifts in therapy is often context-based, gift-giving is not a clear-cut issue with simple rules as a result. Today, this challenge is reflected in an open, yet critical, approach to gifts in ethical guidelines.
More recent codes of ethics, however, have changed in the sense that they present a flexible and context-based perspective in regards to boundaries. Helpful guidance is offered, for example, by the American Counselling Association (2005): “Counsellors understand the challenges of accepting gifts from clients and recognize that in some cultures, small gifts are a token of respect and showing gratitude” (p. 6).

However, other counselling and therapy associations, such as the Irish Association for Counselling and Psychotherapy, do not make any reference to gift-giving in their code of ethics (IACP, n.d.).

In conclusion, there remains still a dilemma for many therapists in spite of a more open view of gift-giving. On one hand, therapists are encouraged to respect the dignity and worth of their clients. On the other hand, graciously receiving a gift is an accepted, if not required, social protocol.

Therefore, mental health practitioners are challenged to maintain professional boundaries but have the flexibility to respond with openness and appreciation. In any case, therapists are ethically obligated to consider their clients’ best interests when deciding whether to accept or decline a gift. Because the therapist must defend the client's best interest while adhering to professional ethics, a case-by-case approach is strongly suggested.
3.1 Research Design

Most recent researchers on gifts in therapy have used a quantitative method for data gathering. This approach offers both advantages and disadvantages.

On one hand, a quantitative approach is systemised and quantifiable. On the other hand, it is relatively limited, with the primary reason being that it does not allow for an in-depth exploration with the interviewees in regards to their subjective views on gifts. Furthermore, a quantitative methodology does not allow for an in-depth discussion and exploration of how and why therapists deliberately further the use of gifts in therapy (McLeod, 2011).

In contrast, a qualitative approach focuses more on the detailed investigation of qualitative material and understanding process, rather than establishing causal relationships or quantifying the size or extent of something. This stresses the important fact that qualitative approaches enable understanding of experience (Harper & Thompson, 2012).

Furthermore, qualitative research focuses on the real world and how this is experienced - the main concern is therefore meaning-making. The qualitative researcher attempts to describe understandings and engages with interviewees through his own subjectivity. As a result, the qualitative researcher must be sensitive to his own influence on the process and is required to monitor and reflect upon his own subjectivity (Houston & O’Brien, 2007).
Considering all this, a qualitative research methodology was chosen to ascertain the participating therapists’ personal meaning they assign to gifts, and also to explore what meanings they ascribe to the gifts in their therapeutic practice. “At its heart, qualitative research involves doing one’s utmost to map and explore the meaning of an area of human experience” (McLeod, 2011, p. ix). In this, the qualitative method offers itself naturally, because it allows for the exploration of the participating therapists’ values and beliefs.

### 3.2 Participants

For the semi-structured interviews, a small sample of six therapists with different counselling orientations, gender, and age range was chosen. The criteria for participation included male and female therapists who deliberately use gifts in therapy, with a minimum client experience of five years.

**Table 1: Demographic details of participants in the study**

<table>
<thead>
<tr>
<th></th>
<th>Age</th>
<th>Sex</th>
<th>Therapeutic Orientation</th>
<th>Years of practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant1</td>
<td>53</td>
<td>Female</td>
<td>Integrative</td>
<td>25</td>
</tr>
<tr>
<td>Participant2</td>
<td>58</td>
<td>Female</td>
<td>Person-centred</td>
<td>15</td>
</tr>
<tr>
<td>Participant3</td>
<td>49</td>
<td>Male</td>
<td>Integrative</td>
<td>13</td>
</tr>
<tr>
<td>Participant4</td>
<td>36</td>
<td>Female</td>
<td>Cognitive-behavioural</td>
<td>12</td>
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<tr>
<td>Participant5</td>
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<td>Male</td>
<td>Family therapy</td>
<td>13</td>
</tr>
<tr>
<td>Participant6</td>
<td>47</td>
<td>Female</td>
<td>Psychodynamic</td>
<td>9</td>
</tr>
</tbody>
</table>
3.3 Data Gathering

A semi-structured interview with five set questions was used in order to conduct the research (see Appendix 1). The interviews with the six participants were all recorded and the data transcribed afterwards.

The reason for choosing semi-structured interviews was that this method is both detailed and personal. It allows for ongoing clarification of the personal and therapeutic meanings that the participants associate with gifts. The interview questions are prepared in advance, and “...such prepared questions are designed to be sufficiently open that the subsequent questions of the interviewer cannot be planned in advance, but must be improvised in a careful and theorised way” (Wengraf, 2004, p. 5). The semi-structured interview also turned out to be a good choice, because some of the areas of inquiry could be anticipated in advance.

This method also left enough flexibility during the data-gathering process with the participating therapists. As highlighted by Wildemuth (2009), semi-structured interviews are more flexible compared to structured interviews because the interviewer has a certain amount of room to adjust the sequence of the questions to be asked, and to add questions based on the context of the participants’ responses. Overall, the semi-structured interviews required careful preparation. This included the definition of the research goals, the creation of an interview plan, and the creation of a consent form for the participating therapists.

A possible quantitative method including a survey was decided against, having taken into account its disadvantages, including the inability to motivate people to respond, the possible inaccuracy of self-reports (which would have led to poor construct validity), and the fact that surveys cannot reveal why something has happened (Jolle & Mitchell, 2007, p. 263).
3.4 Data-Analysis

A thematic analysis approach was chosen and applied for the interpretation of the data gathered through the semi-structured interviews.

In general, a thematic analysis approach allows for digging deeper into the transcript of the semi-structured interview, “to identify a variety of themes which describe significant aspects of the text” (Cramer & Howitt, 2005, p. 336). Once a meaning of the experience has been found, the researcher seeks for more general and more universal meanings arising from exploring (Van Manen, 1990). The end result of the thematic analysis then produces the most salient meanings present in the data set, including affective, cognitive, and symbolic dimensions (Harper & Thompson, 2012).

Indeed, the thematic analysis approach proved to be a fruitful choice. In the research project at hand, it allowed for the exploration of the therapists’ context, how they perceive gift-giving events in therapy and in general, what they subjectively perceive to be the essence of gifts, and the significance they assign to these experiences.

3.5 Materials

The tools required to carry out this research project included a questionnaire, a Dictaphone, and a reasonably quiet place to meet the interviewees. The participants were asked to give their consent for the interview to be recorded and for the content of the discussion to be used in the research project. An outline for a semi-structured interview was created and handed out to the participants before the interview.
3.6 Procedure

Six therapists, who had previously agreed to participate in the study, were contacted by email or face-to-face in order to outline the purpose of the research project. An interview of around 45 minutes was subsequently arranged with each of the participants, and it was clearly communicated that those sessions would be taped for the purpose of accuracy. Three female and three male therapists from different counselling orientations were finally met and interviewed over a period of four weeks. The interviews took place in both counselling centres and private offices.

Before starting with the interview, the process of data gathering, data analysis, and the ultimate use of the data was explained to each therapist. The issue of confidentiality was outlined to all six participants, and it was agreed that no names, workplaces, or other privacy-compromising information, would be disclosed in the research project.

Having the semi-structured interview as a guiding framework, only a few additional questions were required during the interviews to clarify some of the responses. The main challenge that occurred was that of time, as a few interviews took longer than anticipated. Throughout the interviewing process, the researcher detached himself sufficiently from his own opinions on the subject at hand.

After the interviews, the recordings were safely stored, and a transcript for each of them was created for the subsequent data analysis.
3.7 Scope of research

Due to the limited time and resources available, only six interviews could be conducted. This certainly did not allow for the application of a more representative sample.

Furthermore, the sample used for the research consisted only of native Irish therapists. Considering the fact that gifts are viewed differently across the cultural spectrum, therapists from different cultural and ethnic backgrounds most certainly would have provided an additional contribution.

3.7 Ethical Considerations

The rationale for the research project was outlined to each participating therapist before commencing the interview. As the participating therapists also shared personal information and views about themselves and their clients, the issue of confidentiality was discussed. Although the nature of the project does not allow for confidentiality, all participants have been assured of full anonymity.

Furthermore, written consent has been obtained for the interviews to be recorded via Dictaphone, transcribed, and the content used in the research project. Last, but not least, each therapist was offered the opportunity to read the completed project if they so desired.
CHAPTER 4
RESULTS AND RESEARCH FINDINGS

The five questions asked in the semi-structured interview provided a helpful template for exploration. Only in rare instances did a question need to be clarified to the participating therapists. The questions also turned out to be broad enough to let additional material emerge.

A number of dominating themes could be identified from the thematic analysis based on the transcription of the interviews. Although overlapping in some areas, four major themes were found and are outlined in the following:

- 1. Love as the primary meaning of gifts in therapists’ personal lives
- 2. Therapist’s response pattern to receiving a gift
- 3. Therapists’ attribution of meaning to gifts
- 4. Ethical codes, training and supervision as sources of meaning
4.1 Love as the primary meaning of gifts in therapists’ personal lives

Asking about what gifts meant to the participants in their personal lives, and which meaning they ascribe to those gifts, brought forth interesting perspectives.

First, most participants considered gifts an important part of their relationships with partners, family, and friends. Therapist 1, for example, stated: “Gifts are not so important to me in themselves; what counts is the thought of it. I see gifts as part of a relationship; it signifies that someone feels very special to me.”

Second, five participants expressed that to them, gifts are an expression of love. Therapist 2, for example, remarked: “Giving of a gift is part of the concept of love to me. Gift-giving in personal life is a statement of love, I think, and ranks quite high for me. Not so much the gift itself and what it is. That it was specifically chosen for me ... an expression of love.”

Third, half of the participants said that a real gift was to be an expression of love with a selfless dimension to it. Therapist 3, for example, recounted her 50th birthday, when she received a trip to Bermuda as a gift from her husband. “I think that this was not so great for him, but spoke to my needs. It meant a lot to me, because it did not mean a lot to him.”

Fourth, the meaning assigned to gifts that the participants made in their personal life varied substantially. Similar to receiving gifts from others, some therapists highlighted gifts as a sign of love when they gave gifts to others. Two therapists indicated a more ambivalent relationship to gifts, however. Accordingly, gifts were only of benefit if they addressed the real needs of others. This ideal was not always easy to reach in practice, though. For example, Therapist 5 remarked: “At times I give money instead, so people can get what they really want...but I think this is maybe also letting myself off the hook, so I don’t have to bother about gifts too much. I like spontaneous gifts, therefore, when I find one.”
4.2 Therapists’ response pattern to receiving a gift

Similar response patterns could be observed from the participants to receiving a gift. If considered of little financial value, therapists would accept a gift most of the time, and just say thank-you to their clients. If the gift was considered inappropriate, all participants said they would reject the gift with reference to the boundaries of the therapeutic relationship and ethical professional code. All therapists also emphasised that they would share any difficulties surrounding gifts in supervision.

In other aspects, the six interviewed therapists differed widely, in particular with the question of how far a response should extend. To start with, two of the participating therapists ordinarily just reject, or gratefully receive a gift, and literally leave it at that.

One participant usually goes beyond a mere acknowledgement of the gift from a client. He lets the gift - based on the symbolic meaning he himself attributes to the gift as an object - inform his case conceptualisation.

Finally, the three remaining therapists would not only consider the meaning of a gift for their own reflection, but would openly raise the gift as a topic to be explored between them and the client. This includes an exploration of what the gift means to the client. Furthermore, these therapists also work deliberately with their counter-transference by monitoring their own responses. Last, but not least, they would also share the impact a gift had had on them with their client. This often posed a challenge. Therapist 2, for example, reported: “Difficult gifts make me feel uneasy, those given out of ulterior motives. I almost did not want to deal with it...but I knew from the therapeutic relationship I had to address it for the therapeutic process to move ... I went back to contract and said it was not part of it. Then we explored together where this was all coming from, and what purpose the gift served.”
4.3 Therapists’ attribution of meaning to gifts

According to the interviews, the process of attribution seemed to fall into two groups, irrespective of the content of the attributed meaning.

In the first group, attribution was mainly due to the therapist’s meaning-making. Two of the interviewed therapists indicated that the meaning they attributed to a gift in therapy was usually derived from their own reflection, rather than from the client’s. This often included the interpretation of the transference dynamics and the inherent symbolic meaning in gifts. Therapist 6, whose attribution of meaning was based on his own thoughts, said: “The client gave me these roses, and said she would have to throw them away otherwise. I did not buy into it. As far as I can tell, she wanted more sessions and was trying to manipulate me.”

In the second group, the therapists stated that they were careful to integrate the view of the client into the process of attributing meaning. Meaning was to be co-created as a result, and the therapist felt that this made the process more complex and challenging.

Either way, three attributions of meaning to gifts proved to be particularly prominent.

First, most therapists left room for a gift to be a simple expression of gratefulness and appreciation. Gifts at the end of therapy appeared to be the most acceptable in that regard. Cards in particular were mentioned as a frequent gift in that context and were seen as a grateful acknowledgement of the good work that had been accomplished together. For example, Therapist 4 exclaimed: “The card I got from that client was an expression of love, deep gratefulness, and signified our strong therapeutic connection. Yes, gratefulness to the space. You know, sometimes a gift is just a gift.”
Second, most therapists acknowledged the inherent meaning and symbolism in gifts. Therapist 2 clarified: “Gifts are symbols... and symbols bind up reality!” A wide range of symbolic meanings of gifts were suggested. For example, a teapot made one therapist reflect on the space between him and his client. In another instance, a candlestick as a gift made the therapist wonder if there was a lot or too little light in the therapy. In general, all therapists who worked deliberately with gifts in therapy emphasised that symbolic meanings of objects were very significant. However, these inherent meanings should be considered as helpful hints for exploration, rather than the full meaning of a gift in the client’s context.

Third, the idea of gifts as potential transitional objects seemed to be well known and was brought up by three therapists. Accordingly, gifts as transitional objects can provide comfort and reassurance in difficult times. Therapist 2, for example, commented: “I believe, transitional objects can be important to the client, especially during longer therapy breaks or at the end of therapy ... at times I give a client a small memorable gift, not just to value our time together, but also to replace the therapeutic bond for a limited period of time.”

Fourth, a more conscious negative meaning of gifts seemed to arise in particular with clients struggling with attachment issues, and this then strongly manifested in the transference. For example, two therapists felt that at times a client expected a particular reaction to their gifts. In those instances, gifts were given out of fear, in order to manipulate, or other less-than-wholesome reasons. Therapist 4, for example, commented: “I had one client with mental health problems and in particular attachment issues. She brought numerous gifts, including photos of her children ... and that made me cautious. I felt the client wanted to draw me in. She got very upset when she did not get the reaction she expected.”
Fifth, half of the therapists said that they directly integrated the meaning of a gift into their case conceptualisation. For example, Therapist 3 remarked: “...gifts are only a small part of the therapy, of course, but in some cases they have helped me to ask the right questions. Definitely, a gift can inform my case conceptualisation because it helps to get a better sense of the client’s problems and underlying issues.”

At the same time, two therapists highlighted omitting gifts into their case conceptualisations, although they considered the meaning of gifts as important. As a result, they stressed the importance of awareness in the immediacy of therapy in order not to miss an important moment. For example, Therapist 1 commented: “A crucial moment in therapy can pass quickly, and this has often happened to me when I received gifts from clients. I hardly noticed what was going on. I did not even think about the gift, and the meaning was lost as a result.”

### 4.4 Ethical codes, training and supervision as sources of meaning

Five out of six participants acknowledged ethical codes, training, and supervision as moderately helpful sources in ascribing meaning to a gift and in responding to them in a proper way. However, they felt that ethical codes and professional opinion can be too restrictive at times. A focus on potential boundary breaches, rather than the gift and its meaning, had often prevented a proper exploration.

Overall, the participants felt that, nowadays, ethical codes, supervision, and the literature left more space and freedom to both accepting and exploring the meaning of gifts.
CHAPTER 5
DISCUSSION AND CONCLUSION

This chapter will discuss and reflect on the results of the current study. The findings will be analysed in conjunction with previous research in the area of gift-giving in the therapeutic context.

5.1 Discussion

5.1.1 Gifts as an expression of love, appreciation and gratefulness

Most therapists almost exclusively attributed the meaning of love and appreciation to gifts in their personal lives. They did not question this and appeared to take a very positive view about both giving and receiving gifts in the context of their own relationships. Did this influence their view of gifts in therapy?

Considering the type of research methodology that was used, a direct correlation cannot be drawn. However, in the therapeutic context, the meaning of love, gratefulness, and appreciation was clearly acknowledged, especially when a gift was given at the end of therapy. Therefore, it appears that the participants who give gifts a high priority in their personal lives also left room for this attributed meaning in therapy.

The importance of expressing gratitude and appreciation for gifts received in therapy has been stressed by various authors. Smolar (2003), for example, emphasises that a gift in psychotherapy requires the therapist to express genuine appreciation and gratitude.
Evidently, the participants had also experienced occasions in which gifts were out of proportion or maladaptive. Indeed, there was great awareness that gifts can also point towards underlying psychological issues and themes to be explored. Instead of giving a gift as a sign of love, gratefulness, and appreciation, “the client may give you a gift because he wants something from you,” as was pointed out by one of the participants in the study.

This view concurs with the findings of a study completed by Zur (2011), where it is suggested that the client's gift-giving may well be an attempt to "buy" the therapist’s love. A client who feels unworthy and not lovable, for example, may try to increase the chance of the therapist liking him by way of giving a gift. This pattern is also repeated in the client’s personal life in their relationships.

To summarise, there appears to be a place for love, appreciation, and gratefulness in both personal life and in the therapeutic alliance, and therapists are encouraged to appreciate gifts as tokens of love and gratefulness, especially at the end of therapy. Accepting a gift in that way can be to the therapeutic benefit of the client. At the same time, caution is warranted, as with some clients, gifts can instead be an expression of a need or an attempt to manipulate the therapist.
5.1.2 Therapist’s response pattern to receiving a gift

As pointed out before, similar response patterns could be observed from the participants in the study to receiving a gift. If considered of little financial value, the participants would generally accept a gift most of the time, and just say thank-you to their clients. This ties in with research conducted by Amos and Margison (1998), who saw 90% of the gifts being accepted by practitioners.

Some participants would explore the meaning and symbolism of a gift by themselves, and some together with the client. In either case, the reason of responding in a deliberate way appeared to be a strong belief in the therapeutic value of accepting and exploring gifts.

This finding is also reflected in recent research. Zur (2011), for example, suggests that gift-giving and the reciprocal appreciation of the gifts, even on the most basic level, can enhance the therapeutic relationship. Going beyond an expression of gratitude, an exploration of the meaning and intentions of the client's gift-giving in therapy can also enhance the clinical work and therapeutic outcome, especially when carried out with sensitivity.

Hahn (1998), too, highlights the fact that at times, therapists may chose to accept small gifts that seem to try to buy their love in order not to shame or insult clients or to avoid causing a sense of rejection. Nonetheless, while they may accept such gifts, they must find a way to deal with the maladaptive gift-giving behaviours therapeutically.
If a gift was considered inappropriate, all participants in the study would reject the gift with reference to the boundaries of the therapeutic relationship and ethical professional code. Most tried to do this in a deliberately kind way, as they feared they would otherwise potentially make the client feel rejected. Most participants considered this to be a very delicate task.

The research of Zur (2011) that has emphasised the challenge of responding to inappropriate, ill-timed, or very expensive gifts concurs with this observation. He suggest that the exploration of the meaning of a gift should be carried out only when relevant, potentially helpful, and is not to cause the client to feel rejected or shamed.

In other aspects, the six interviewed therapists in the study differed widely in their response pattern, in particular with the question of how far a response should extend.

Sometimes a gift is just acknowledged. At other times, gifts appear to inform case conceptualisations, based on the symbolic meaning attributed to the gift. The gift as an object with a specific symbolic meaning therefore determines the creation of hypothesis. Such an approach is openly encouraged in some of the literature, where gifts are considered to have an influence on case conceptualisations (Heimberg, Ledley & Marx, 2010).

In the most deliberate and skillful responses to gifts, some of the participants would not only consider the meaning of a gift for their own reflection but would openly raise the gift as a topic to be explored between themselves and the client. A number of authors, such as Knox, DuBois, Smith, Hess, & Hill (2009), have suggested a similarly open approach. Accordingly, a gift in counselling and psychotherapy requires the therapist to express genuine appreciation. When appropriate, this is to be followed up by an exploration of the meaning and conscious or unconscious intent of the gift with the client.
5.1.3 Therapists’ attribution of meaning to gifts

The therapists who explored a deeper meaning of gifts appeared to fall into one of two groups.

In the first group, the attribution of meaning rested almost solely on the therapist. Although this was mainly due to the fact that the participants did not look at other options, this approach seems to make sense in many cases. The reason is that gift-giving has a substantial unconscious component to it, and the real meaning may not be readily available to the client, or hard to explore in therapy. The process of meaning making and interpretation of the gift is therefore dependent on the therapist to a good degree.

This notion is linked to previous research in that area. Kritzberg (1980), for example, arguing from a more conservative perspective, suggests that gifts can be viewed as unconsciously motivated representations of symbolic desires. Normally the client is totally unaware that the gift expresses the desire for the therapist to become a real object sharing his world. However, it might in fact express a desire for the companionship and intimacy of the therapist outside of the therapeutic hour. If brought into consciousness, this acting out of the transference via gift-giving can then provide more insight into interpersonal problems, attachment issues and personality characteristics.

The approach also concurs with research related to psychoanalytic understandings of transference and countertransference to evaluate the significance of clients’ gifts and the responses of therapists to them. Amos, Burman, Goldberg, Margison & Spandler (2000), for example, argue that because gift-giving is a regular activity in families, its occurrence in therapy makes it particularly suitable for transferential and counter-transferential interpretations.
A second group of participants in the study stated that they were careful to integrate the view of the client into the process of attributing meaning. Meaning was to be co-created with the client. Evidently, this reflects on a more humanistic and interpersonal approach to meaning making, and such a view is also encouraged by previous research. Zur (2011), for example, stresses the fact that unlike the analytic tradition, humanistic psychology and feminist therapy have emphasised the importance of congruent relationships between therapists and clients. As a matter of fact, this is often enhanced by giving and receiving gifts.

What was strangely absent in the interviews was any direct reference to gift-giving and the power dynamics in therapy. This is in contrast with the relevant literature. While gifts offer potentially important meanings for the task of therapy, they also appear to be used within the negotiation of power in the therapeutic relationship. Amos, Burman, Goldberg, Margison and Spandler (2000) even regard power as being at the heart of the therapeutic process in the context of gifts: “Seen in this light, the gift-at-the-end may be a ritual marker of a client’s disentangling themselves from, or transcending, their patient role.”

In general, the participants of the study were well aware of the complexity underlying gifts in therapy, and the difficulty of determining their meaning. It is noteworthy that half of the participants saw the necessity of both exploring and interpreting the meaning of a gift but felt a bit overwhelmed by the multitude of possible meanings. The number of possible meanings attributed to gifts in the literature is vast indeed, and therefore might warrant additional education and training on the therapist’s side.
5.1.4 Ethical codes, training and supervision as sources of meaning

The participants in the study have indicated that there is great gain in exploring the meaning of gifts; at the same time, they indicated that ethical codes and professional opinion can be too restrictive at times. As a result, a perceived focus on potential boundary breaches, rather than the gift and its meaning, had often prevented a proper exploration in their work as therapists in the past.

This challenge becomes more understandable considering the fact that neither of the two codes of ethics from the main Irish professional bodies directly reference gifts or gift-giving in therapy. Because of the fact that IHIP and IACP keep their regulation on a more general level, a discussion of gifts in relation to ethical behaviour might have to be subsumed under the broader categories of boundary maintenance or professional integrity. Due to the frequent dilemmas with gifts in therapy, some more concrete guidance for the practitioner might be helpful. On one hand, as has been argued before, gifts have great therapeutic potential if their meaning is being explored in context. On the other hand, if handled inappropriately, they can pose a real threat to the integrity of the therapeutic encounter.

The American Counselling Association (2005), for example, might point the way. This counselling institution suggests a flexible handling of gifts and also gives more concrete guidance: "When determining whether or not to accept a gift from clients, counsellors take into account the therapeutic relationship, the monetary value of the gift, a client's motivation for giving the gift, and the counsellor’s motivation for wanting or declining the gift" (p. 6). For therapists, this concrete, contextual ethical guideline might be well worth considering when having to deal with a gift in therapy.
5.2 Strength and Limitations to the study

Having a research project with only six participants influenced the range and type of information obtained. As a matter of fact, most of the participants shared a similar age range, and therefore their viewpoints and experiences may not be representative of the wider counselling industry in Ireland. The researcher had previously worked with one of the therapists, and as a consequence some of the responses may have been influenced by this fact. Last, but not least, the understanding of what was considered a gift differed among the participants, e.g. one individual did not consider a card as a gift. This might have influenced some of the responses or omitted information.

5.3 Conclusion

Traditionally, therapists have been mostly concerned with the ethical question of accepting or rejecting a gift in therapy. Today, there appears to be more flexibility around gifts in the therapeutic alliance, and this is also increasingly reflected in the relevant literature, in ethical codes, and supervision.

This qualitative study has shown that both gratitude and exploration of the meaning of a gift, when appropriate, can be used in psychotherapy. In spite of variations in opinion about how to respond to gifts, the research conducted saw the potential benefit of interpretation and exploration of the meaning of gifts confirmed by most participants. It is strongly suggested that in order to inform interventions properly, the meaning of gifts must be explored in its entire context (including the cultural setting), and if possible in conjunction with the client. Either way, by reflecting on their own responses to gifts, the participating therapists in the study were challenged to handle gifts thoughtfully and clinically appropriately.
REFERENCES


Zur, O. (2002). The truth about the codes of ethics: Dispelling the rumors that dual relationships are unethical. In A. A. Lazarus, & O. Zur (Eds.), *Dual relationships and psychotherapy* (pp. 55-63). New York: Springer.
APPENDIX 1: Semi-Structured Interview

DATE: _______________

Demographic Questions

a. Age ______
b. Sex ______
c. Therapeutic Orientation  ________________________________
d. Duration of professional practice: ______ years

Interview Questions

1. What does giving and receiving a gift mean to you in your personal life?

2. What is the impact on you when you receive a gift from a client?

3. How do you usually respond when you receive a gift from a client?

4. What meaning did you attribute to the gifts you received from clients in the past?

5. How has your understanding of gifts shaped your therapy interventions?
APPENDIX 2: Participant Information Sheet

My name is Rudolf Marco Nesler and I am conducting a research study as part of a BA Degree Programme in Counselling and Psychotherapy at Dublin Business School (DBS).

**Title of the Research Project**

‘This gift is for you!’ An exploration of counsellors’ personal views on the meaning of gifts and their gift-giving experiences in therapy.

**Researcher:** Rudolf Marco Nesler

**Research Supervisor:** Eamonn Boland

**Purpose of the research project:**

There is little qualitative research into the meaning of gifts from a therapist’s point of view. Therefore, the objective of this study is to explore therapists’ underlying personal beliefs and motivations around gifts, and how those might relate to their deliberate use of gifts in therapy.

**Criteria for participation in the study:**

To contribute to this study, the participants will be practicing therapists in counselling and psychotherapy who deliberately allow the therapeutic use of gifts in the sessions with their clients.
**Required involvement and participation:**

The participation in this study will involve conducting a face-to-face interview which will be audio-taped and later transcribed. The interview will take approximately 45 minutes. There will be an opportunity given by the researcher to ask questions or to clarify any aspects of the study.

**Use of data and confidentiality**

Your decision to participate is completely voluntary and all the information you provide will be used responsibly for the purpose of this project. As a participant in the study, you are assured of full anonymity. Any names or other identifying information that you provide during the course of the interview will be removed during transcription.

**Limitations to confidentiality**

In accordance with IACP guidelines and national law, confidentiality cannot be kept if child(ren) are in danger of harm, or if information indicates that a minor may be at risk. This applies even if you withdraw from the study after disclosing such information.