Towards a Culturally Sensitive Model of Therapeutic Alliance: Exploring the Role of Filipino Values and Shared Realities

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ABSTRACT. This article aims to develop a model of the therapeutic alliance for psychotherapy guided by the concepts of *Loob, Pakikibahagi ng Loob,* and the framework offered by the Shared Reality Model. The conceptualization is anchored on data from a qualitative survey with 15 Filipino client-therapist dyads living in the Philippines. In the proposed model, client-therapist dynamics are viewed under two levels of analyses: (a) intrapersonal level (inner world or *katangiang panloob*) – that includes clients' and therapists' personality, values, and beliefs; (b) interpersonal level (relational world or *ugnayang panloob*) – that encapsulates the client-therapist relationship known as the therapeutic alliance. The model hypothesizes that a shared reality (*pakikibahagi*) in the form of shared inner world (*pakikibahagi ng katangiang panloob*) and shared relational world (*pakikibahagi ng ugnayang panloob*) contribute to psychological well-being. Implications for clinical practice, Sikolohiyang Pilipino theorizing, and directions for further research are explored in this paper.

1.0. Introduction

How is therapeutic alliance cultivated? How do Filipino clients and therapists make sense of their alliance as they enter the psychotherapy process? What do they find essential in a healthy therapeutic alliance and effective psychotherapy? These questions remain blurry in the literature, especially in the local Filipino research on psychotherapy.

In the Philippines, psychotherapy research is often guided by a sociocultural lens. Highlighting relational and cultural variables is relevant in the context of the Filipino client's mental health experiences as they contribute to therapeutic change and overall well-being (Tuason et al., 2012). It has been shown that certain sociocultural resources like religiosity and spirituality (Dy-Liacco et al., 2009), social support and engagement (Grimm et al., 1999), and personal and collective resilience and hopefulness (Tuason, 2011) must be enhanced to facilitate therapeutic healing and flourishing. This outcome is viewed as a form of *ginhawa* (Samaco-Zamora & Fernandez, 2016; Bautista, 2011)*,* where clients experience vigor in life *(sigla),* ease of life *(gaan),* functionality in life *(gana),* and happiness in life *(ligaya).*

In terms of psychotherapy practice in the Philippines in the last decade, studies indicate that practicing Filipino psychotherapists utilize diverse approaches and techniques (Melgar, 2013; Teh, 2003) in their clinical work such as psychodynamic, humanistic-existential, cognitive-behavioral, narrative (Deleña, 2021), spiritual (Degillo & Gayoles, 2020; Repique & Gayoles, 2019), pastoral (Lucerna & Gayoles, 2018), transpersonal, and indigenous counseling frameworks (Bulatao, 2002). With the predominance of integrative approaches in psychotherapy, this paper emphasizes the common factor across different therapy orientations, that is, the therapeutic alliance between clients and their therapists, which plays a huge role in the healing process of Filipino clients.

Therapeutic alliance is an interactive relationship developed between the client and the therapist as they embark on a psychotherapy journey (Muran & Barber, 2011). It has three major components: (a) agreement on the goals of the treatment, (b) engagement on the tasks, and (c) development of a personal bond (Ardito & Rabellino, 2011). Several empirical research have been established over the years confirming the relationship between therapeutic alliance and psychotherapy success (Zilcha-Mano, 2017). Consistent findings show that the strength of the therapeutic alliance is a reliable and significant predictor of outcomes in psychotherapy, with stronger alliance levels predicting better therapeutic outcomes (Horvath et al., 2011). In longitudinal studies where the alliance is captured over time across sessions, there is robust and stable empirical evidence that the therapeutic alliance is a significant causal factor for therapy outcomes across

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time (Flückiger et al., 2018). High-quality therapeutic alliance has been proven to contribute to significant symptom improvement (Botella et al., 2008), social adjustment (Rounsaville et al., 1987), decreased subjective distress (Zilcha-Mano, 2017), treatment satisfaction (Horvath et al., 2011), skills acquisition (Goldstein et al., 2020) and enhanced quality of life (Prusiński, 2022) at the end of therapy.

Therapeutic alliance is also situated along cultural lines (Asnaani & Hofmann, 2012) with behaviors and characteristics that clients and therapists bring into the therapy relationship being influenced by several social and cultural variables. These include but are not limited to age, health, religious and spiritual orientation, ethnic identity and heritage, socioeconomic status, sexual orientation, and gender (Hays, 2008). Furthermore, how clients and therapists view their alliance, exhibit their personality tendencies, and uphold their value orientations and belief systems are all shaped by their sociocultural upbringing and context (Duan, 2019).

In this regard, an excellent quality of therapeutic alliance is associated with using a culturally sensitive therapy approach. This includes exploring the role of cultural variables in the client's problems, validating the client's cultural beliefs and practices, allowing a conversation about the client's sociocultural experiences, identifying and utilizing the client's strengths and resources, and implementing technique-specific cultural modifications (Asnaani & Hofmann, 2012; Hays, 2008). Therapists who engage actively in culturally sensitive and relevant conversations during therapy sessions can be more effective in understanding and articulating their clients' goals and needs in therapy (Tsang et al., 2011). Also, in this approach, therapists become more emotionally attuned and responsive to their clients, increasing the quality of therapeutic alliance (Lee, 2008). In the course of therapy, clients and therapists gradually become "aligned". The alignment between clients and therapists regarding their expectations, attitudes, beliefs, and even values is considered an essential part of cultural competence (Zane et al., 2005) and therapy effectiveness (Lee, 2008).

To lay the foundation for theorizing about dynamics and processes in psychotherapy in the Philippines, the general objective of this paper is to conceptualize a model of therapeutic alliance that can guide clinicians and researchers in understanding psychotherapy in the Filipino context. Specifically, this article aims to 1) stimulate culturally nuanced theorizing about therapeutic alliance, 2) review relevant indigenous constructs that can be applied in Filipino psychotherapy, and 3) propose a working model for therapeutic alliance as applied in the Philippine context. The following research questions

were answered in line with these objectives: 1) How do Filipino clients and therapists describe their psychotherapy experience as help-seekers and help-providers, respectively? 2) How do Filipino clients and therapists make sense of their therapeutic alliance (client-therapist relationship)? 3) How do Filipino clients and therapists explain the outcomes or benefits of psychotherapy?

2.0. Methodology

Therapeutic alliance has not yet been explicitly conceptualized using an indigenous framework relevant to the Filipino context. While the term comes from a Western conceptualization, the construct can be considered pan-theoretical and universal (Horvath et al., 2011).

Participants. Fifteen Filipino client-therapist dyads currently engaged in active psychotherapy with at least four completed sessions were invited for the study. The participating clients are at least 18 years of age and can provide consent. Clients were excluded and ineligible for the study if they have an acute mental health condition (severe, unstable symptoms requiring immediate treatment) or are currently admitted to a hospital (in-patient). Highly vulnerable clients were not included to minimize the level of risk in participation and ensure physical and mental capacity to participate. On the other hand, the participating therapists are licensed psychologists with a current client who meets the inclusion and exclusion criteria mentioned above. Other mental health professionals such as psychiatrists, social workers, and counselors were not included to emphasize therapeutic alliance in a psychotherapy setting.

Research instrument. An online qualitative survey was administered to the participants. The survey questions are open-ended, pertaining to experiences in providing help (for psychotherapists) and seeking help (for clients), description of the therapeutic relationship known as the alliance, and exploration of treatment gains or experienced outcomes in psychotherapy. Common themes from the survey responses were analyzed and extracted. The thematic analysis was guided by a relational psychology lens with a Sikolohiyang Pilipino orientation, where concepts about the self, other, and self-other interactions are deemed significant. The review of the literature as well as the extracted themes from the survey responses, were synthesized to arrive at a working model of therapeutic alliance.

Data Collection. Data collection began with recruiting therapists and inviting them to answer a qualitative survey. Part of their participation is inviting one of their clients to also answer the same survey. Only the therapists had direct contact with the clients as they were the ones who forwarded the

survey link to their respective clients, keeping the clients anonymous in the study.

Researcher Reflexivity Statement. The researcher is a licensed clinical psychologist who has been working with various mental health cases for the past nine years. The researcher also works as a clinical supervisor – supervising a team of clinical psychologists and guidance counselors. Alongside clinical practice is the researcher's interest in studying the phenomenon of therapeutic alliance.

For this study, the researcher did not recruit client participants who were his current or previous clients at his place of work. He also excluded inviting therapist participants currently in a supervisory relationship with the researcher. To enhance self-awareness, the researcher performed multiple re-analysis and strove for an open-minded, transparent process.

Ethical Considerations. This study upheld all ethical principles in conducting qualitative inquiry research. The participant information sheet and informed consent forms were provided in the research link before answering the main survey. Informed consent was obtained after the therapist participant ticked all corresponding boxes in the informed consent form (i.e., reading and understanding the participant information sheet, meeting the criteria for participation, agreeing to participate, etc.), indicating their understanding of and agreement with the study procedures. All information gathered in this study was kept confidential, and no identifying information was obtained from any of the participants. Furthermore, only the therapists have direct contact with their clients as they were the ones who forwarded the research link to them. Clients and therapists do not have access to each other's responses to the survey.

3.0. Results and Discussion

Information about client-therapist dyads

Among the 15 client-therapist dyads, there are nine female and six male clients, ten female therapists, and five male therapists. The therapy orientations of these therapists include cognitive, behavioral, humanistic, psychodynamic, narrative, and integrative approaches. The number of completed sessions ranges from 6 to 12, with session meetings of once to twice a month.

***Loob* as a relevant construct in Filipino psychotherapy**

The following are some of the salient narratives from clinical psychologists when they were asked about the process they undergo during psychotherapy (*Paano mo ilalarawan ang proseso mo sa simula ng sikoterapiya o pagbibigay ng tulong"? [How would you describe your process as you begin psychotherapy*

or providing help?]). Some Filipino words were translated into English and enclosed in brackets:

> *Nakikipagpalagayang-loob sa isa't isa… makapag-establish ng* atmosphere of safety. [Being emotionally safe in the presence of the other… aim to establish an atmosphere of safety] (Therapist 1, personal communication, September 2, 2023)

> *Iniintindi ang nilalaman ng isip at kalooban.* [Trying to understand how my client thinks and feels] (Therapist 5, personal communication, September 4, 2023)

> *Sinusubukang kilalanin ang mundo at buksan ang loob ng aking client* [Getting to know the world of my client] (Therapist 6, personal communication, September 4, 2023)

> *Naghahanap din ako ng tibay ng loob sa kung ano ang mapapag-usapan namin sa therapy.* [I am also looking for strength to face whatever might transpire in therapy] (Therapist 10, personal communication, September 10, 2023)

On the other hand, below are select narratives from clients when asked about their experience in therapy and help-seeking (*Paano mo ilalarawan ang karanasan mo sa simula ng sikoterapiya o paghingi ng tulong? [How would you describe your experience as you begin psychotherapy or seeking help?]*)

> *Pagbubukas at pagkakaroon ng lakas ng loob* if I need help. [Opening myself up to my therapist and having the courage to seek help if I need it] (Client 1, personal communication, September 3, 2023)

> *Nahihiya sa umpisa pero unit-unting komportable ang sarili.* [I am not comfortable at first but gradually getting the hang of it] (Client 5, personal communication, September 5, 2023)

> *Hindi alam kung ano ang* ie-expect… getting ready to discover more about myself. [I don't know what to expect… getting ready to discover more about myself] (Client 10, personal communication, September 15, 2023)

In these narratives, terms such as *loob* and *sarili* were used frequently. It reflects how clients and therapists tap something within themselves

when discussing psychotherapy experiences. *Loob* is an indigenous concept among Filipinos pertaining to one's world or *daigdig*. This world contains one's characteristics, internal experiences (emotions, cognitions, consciousness, morality, will), environmental and cultural experiences, and relationships (Alejo, 2020). The totality of experiences representing one's *loob* is what makes up one's personhood (Ramos, 2020). *Loob* can be further analyzed as having intrapersonal and interpersonal dimensions. At the intrapersonal level, one's *loob* refers to integrating one's internal characteristics and experiences (also known as inner *loob* or inner world). At the interpersonal level, the *loob* refers to the relational interaction between one person and another, also known as the relational *loob* or relational world (Alejo, 2018). *Loob* is dynamic, and it is said that one's *loob* encourages the person to share the self with the wider reality, promoting growth, harmony, and communion (Ramos, 2020; Reyes, 2015).

As applied in the context of psychotherapy, both clients and therapists, like any other person, are viewed as having *loob.* They bring their inner world - their own personal characteristics (i.e., traits), values, belief systems, and burdens. These are considered components of the inner *loob (katangiang panloob*). There were therapist responses in the survey that emphasized personality variables, values, and beliefs as something that they are mindful of when interacting with their clients:

> It helps if I get to assess my client's personality, how they think, feel… Also, with what they believe in. (Therapist 3, personal communication, September 3, 2023)

> I try to check *kung yung* values *ko ba ay* compatible *sa* values *ng aking client* at the start of the therapy.
> [I try to check if my values are compatible with my clients at the start of the therapy] (Therapist 11, personal communication, September 19, 2023)

> *Mahalagang may* client-therapist fit… aligned *yung* personality, *paniniwala sa buhay, at pinapahalagahan sa buhay.* [It's important to have client-therapist fit… our personalities, beliefs, and values are aligned] (Therapist 14, personal communication, September 20, 2023)

At the same time, as they enter psychotherapy, they experience a relational world - a relationship known as therapeutic alliance. Therapists seek to get into and understand their clients' inner world by establishing a relational world around them. This experience is

called *ugnayang panloob.* Both clients and therapists navigate the psychotherapy journey toward achieving the treatment goals. From a culturally nuanced practice, the therapeutic interactions involve a degree of openness and a compassionate desire to learn from each other respectfully and egalitarian (Dixon et al., 2022), which reduces the power imbalance inherent in psychotherapy relationships and emphasizes the autonomy of clients. In the survey, therapists and clients indicated that they experience a different kind of relationship when entering the psychotherapy process:

> It's more than just talking to a friend… It's an encounter with a fellow human being who accepts you for who you are. (Client 7, personal communication, September 15, 2023)

> We don't formulate solutions right away. We get in touch with the inner world of our clients, we relate to them, empathize with them, and paint a clinical picture of that person. (Therapist 8, personal communication, September 17, 2023)

When asked about how they describe their relationship in therapy *(Paano mo ilalarawan ang ugnayan mo sa iyong therapist/client?* [How would you describe your relationship with your therapist/client?] *Anu-ano ang mga karanasan mo sa pakikipag-ugnayan o pakikipag-usap sa iyong therapist/client?* [What are your experiences when it comes to interacting with your therapist/client?]), below are the responses obtained from the survey:

> *Mabigat sa umpisa kasi mahirap maglabas ng saloobin pero habang tumatagal, mas gumagaan ang pakikipag-usap sa aking* therapist. [It's quite heavy and loaded during the initial session as it is difficult to express the self, but along the way, I feel more at ease with my therapist] (Client 7, personal communication, September 15, 2023)

> *Nagsisimula sa mababaw na usapin para makapag-*establish *ng* rapport*… Lalong lumalalim ang client-therapist relationship kapag mas lalong may nadi-*discover *at natututunan sa sarili.* [It begins with surface-level conversations to establish rapport… The client-therapist relationship becomes deeper as we continue to discover and learn things about myself] (Therapist 8, personal communication, September 17, 2023)

Sa psychotherapy mas napapalinaw ang dala-dalang problema at pangangailangan ng clients dahil may nabuo nang tiwala na pag-usapan at solusyunan ang problema. [Psychotherapy clarifies my problems and needs because trust has been built to explore solutions and strategies] (Therapist 10, personal communication, September 10, 2023)

These responses reflect the polarities of experiences as they navigate the therapeutic relationship. There could be struggle or ease, superficiality or depth, and clarity or ambiguity. Subsequently, as psychotherapy facilitates change, the clients' and therapists' inner and relational *loob* are also transformed. The healing brought about by psychotherapy interventions and interactions involves the growth of one's *loob*. Particularly for clients in psychotherapy, they experience *ginhawa ng ka(loob) an,* which can be described at the intrapersonal level as alleviation of internal burden and flourishing of the self and manifested at the interpersonal level in terms of development of how the self relates with others. Below are examples of narratives from clients when asked about outcomes of psychotherapy (*Paano mo maisasalarawan ang dulot ng sikoterapiya para sa iyo? [How would you describe the benefits of psychotherapy for you?]*):

Nakapagbibigay ng kaginhawaan sa sarili. [Facilitates a sense of wellness] (Client 1, personal communication, September 3, 2023)

Nakakapag-pagaan ng aking dinadala. [Uplifts my burdens] (Client 7, personal communication, September 15, 2023)

Nagiging mas mabuting tao sa sarili at sa iba. [I learn to be a kinder person to myself and others] (Client 13, personal communication, September 18, 2023)

Likewise, for therapists, a huge part of their training in counseling and clinical psychology is about *pagtitibay ng ka(loob)an* (strengthening of the self) through self-reflection, exploration of personal issues and values, and improvement of skills and competencies:

Nakikilala ang sarili bilang professional… Knowing my strengths and limitations, what I can do and what I can't do. [I get to know myself as a professional… Knowing my strengths and limitations, what I can do and what I can't do] (Therapist 3, personal communication, September 13, 2023)

May natututunan din tungkol sa buhay bilang tao… I can learn from my clients as well. [I get to know more about the stories about the lives of other people… I can learn from my clients as well] (Therapist 8, personal communication, September 17, 2023)

Furthermore, therapists are trained to be sensitive to and be in touch with the *loob* of their clients as there are moments where the *loob* of the therapists interact with the *loob* of their clients and vice versa, a phenomenon labelled as transference (Høglend, 2004) and countertransference (Stefana, 2015). These reactions provide clinically relevant information about the inner world and relational world of clients and therapists.

Minsan nakikita ko ang sarili ko sa aking mga clients. [Sometimes, I see myself in my clients] (Therapist 6, personal communication, September 4, 2023)

Hindi maiiwasan ang transference *na kung saan may* reactions *yung* clients *ko tungkol sa akin…* I remind them of someone significant to them. [Transference may be inevitable where my clients react emotionally… I remind them of someone significant to them] (Therapist 12, personal communication, September 20, 2023)

Kapwa and *Loob* as central in Therapeutic Alliance

The word *kapwa* was also mentioned in the survey responses from therapists:

I see my way of relating with my client as a form of *pakikipag-kapwa at pagbibigay* compassion *sa aking kapwa.* [Providing compassion to a fellow person] (Therapist 9, personal communication, September 9, 2023)

Tinuturing na kapwa-tao ang aking client, who deserve to be helped and to heal. [I consider my client as a fellow person who is not different from me, who deserves to be helped and to heal] (Therapist 14, personal communication, September 20, 2023)

Kapwa refers to an inner self shared with others where the self *(ako)* and the others *(iba-sa-akin)* are viewed as one and the same in *kapwa* psychology (Enriquez, 1986). This theorizing led to the conception of Filipino values with *kapwa* as a core value. While *kapwa* refers to the awareness of shared identity, *pakikipag-kapwa* refers to the behavior of

socializing and interacting, sharing the self with the other while upholding the value of *kapwa* (Yacat, 2008). Furthermore, *kapwa* is a social-relational construct such that when one uses the term, it refers to an evaluation of a highly positive social other strong connections and interactions are embedded (Labor & Gastardo-Conaco, 2021) such that when a client or therapist endorses the term, *kapwa* to refer to the other, it reflects a significance and meaningfulness of the therapeutic relationship.

Several levels of interaction have been identified, representing the transition from what can be considered "outsider" *(ibang-tao)* to what can be recognized as "one-of-us" *(hindi-ibang-tao)* (Santiago & Enriquez, 1978). The Filipino help-seeking and caring behaviors are shaped by the cultural value of *kapwa*. Filipinos are more likely to be more open and honest about their life experiences (well-being and struggle narratives) to those whom they consider as *Hindi-Ibang-Tao* than those whom they perceive as *Ibang-Tao* (Martinez et al., 2020).

Kapwa and *Loob* are inherently connected in Filipino psychology. No one is detached from other people and the world around them (Reyes, 2015). One's *loob* is potentially related to everyone else's *loob,* and it is through interactions of *loob* that healthy relationships are actualized. In a lot of Filipino virtues containing the word *loob* like *kagandahang-loob, pakikipagpalagayang-loob, utang-na-loob, lakas-ng-loob, kusang-loob, gaan-ng-loob*, they all relate to *kapwa* as one's *loob* directly involves sharing of and expressing the self with others and with the society at large (Reyes, 2015).

In psychotherapy interactions, the connection between the clients' and therapists' respective inner and relational *loob* is established through *pakikipag-kapwa* (Reyes, 2015). Psychotherapy is often considered a transformative journey toward self-discovery and healing (Tickle & Murphy, 2014) where clients and therapists open themselves (*pagbubukas ng loob*) in the process in facilitating a sense of well-being or *ginhawa ng ka(loob)an*. It needs to be emphasized that it requires two willing *loob* to establish a genuine *kapwa* relationship. The client must be willing to enter psychotherapy, and the therapist must be willing to enter the healing and helping process as well.

The client-therapist relationship becomes a "therapeutic alliance" as clients and therapists go through different levels of *pakikipag-kapwa* (Vinluan, 2013)*.* It starts with getting along well with each other *(pakikisama)* as the highest level of interaction with client and therapist treating each other as outsiders *(Ibang-Tao)* (Pe-Pua & Protacio-Marcelino, 2000). The therapeutic alliance is developed further through mutual understanding of the client's concern

and context *(pakikipagpalagayang-loob)*, getting involved with the client *(pakikisangkot)*, and being one with the client *(pakikiisa)*. In this case, the level of social interaction develops from being an outsider *(Ibang-Tao)* to one-of-us *(Hindi-Ibang-Tao)*, treating each other as part of their world (*loob*).

Shared Reality between clients and therapists

> Psychotherapy is a shared experience. My clients and I share the goals, tasks, and expectations in therapy. We share common goals and directions of where the therapy is headed. (Therapist 8, personal communication, September 17, 2023)

> *Pareho ang gusto naming marating* sa therapy. We share the same goals for therapy and what we want from therapy. (Therapist 9, personal communication, September 9, 2023)

These were interesting responses from therapists when describing what makes effective psychotherapy.

(Ano ang itsura ng isang epektibong sikoterapiya? [What does an effective psychotherapy look like?]). It was clearly communicated as a shared experience. The phenomenon of sharedness is articulated in the Shared reality model from the field of social psychology that seeks to analyze interpersonal relationships. Shared reality refers to the commonality of inner states or perceptions about some aspects of the world (Echterhoff et al., 2009). In the context of psychotherapy, a shared reality between clients and therapists is established due to the commonality in terms of personal characteristics and alignment of relational experiences (i.e., therapeutic alliance).

Shared experiences in psychotherapy have been shown to contribute to positive therapeutic alliance (Marmarosh & Kivlighan, 2012) and outcomes (Orlinsky et al., 2004). The concept of "sharedness" may be analyzed in two levels (similar to the analysis of *loob*). On the one hand, there is an intrapersonal level which pertains to the experience of commonality of personal characteristics, values, or beliefs (client-therapist similarities), and on the other, an interpersonal level that refers to partaking in a consensus or agreement toward a relational experience (client-therapist congruence) like a therapeutic alliance.

Shared reality as *Pakikibahagi ng Loob* in Psychotherapy

Two notable responses from the survey mentioned the terms, *bahagi* and *bahaginan:*

Nagbabahaginan ng karanasan. [Sharing of experiences] (Therapist 1, personal communication, September 2, 2023)

Bahagi ng kanyang problema at solutions na na-try ay hindi iba sa mga napagdaanan ko ring problema at nagawa ko ring mga solusyon. [Aspects of my client's problems and the solutions that they have tried is not different from how I usually approach my problems] (Therapist 5, personal communication, September 4, 2023)

These responses indicate that the flow of therapeutic conversations begins to deepen when clients and therapists establish an experience of sharedness, which is more than shared goals, tasks, and expectations but shared realities at a deeper level.

The Filipino term for "sharing" is *pakikibahagi.* Sharing narratives and realities through enlightening and empowering conversations *(pakikipagkuwentuhan)* as part of *pakikipag-kapwa* is an active process in psychotherapy. Since *loob* is conceptualized as one's world or reality, it is logical to refer to shared reality as *pakikibahagi ng loob.* Both clients and therapists engage in a sharing of their inner world *(pakikibahagi ng katangiang panloob)* and relational world *(pakikibahagi ng ugnayang panloob).* Based on the framework of the shared reality model, at the intrapersonal level, clients and therapists may create a shared inner world by having similarities or compatibilities in their inner *loob* – similar or compatible personality tendencies, value orientations, belief systems, etc. At the interpersonal level, clients and therapists build a relational world – known as the therapeutic alliance where they share congruent perceptions about the psychotherapy experience (i.e., they are on the same page regarding the goals for therapy, the tasks demanded for therapy, and the emotional bond they have for each other).

Looking at shared reality as a form of *pakikibahagi ng loob* in psychotherapy underscores the importance of an egalitarian and humanistic approach. Javier (2017), in his linguistic analysis of the term *pakikipag-kapwa,* referred to the sharing of selves and realities as the cornerstone of becoming a human person. As applied in psychotherapy, clients and therapists treat each other not as the seeker of help and provider of help, respectively, but ultimately as fellow human persons. Establishing some level of reality-sharing *(pakikibahagi ng loob)* between clients and therapists is deemed essential, as this is hypothesized to pave the way for an effective psychotherapeutic intervention.

Proposed Conceptual Model of Therapeutic Alliance in the Filipino Context

Incorporating the concepts of *loob, kapwa,* and shared reality *(pakikibahagi ng loob),* a nuanced conceptualization of therapeutic alliance is formulated (see Figure 1). This newly conceptualized model describes and explains the dynamic interplay between clients' and therapists' *loob*. Clients and therapists possess their inner world or inner *loob* – personality tendencies (Hartmann et al., 2015; Nissen-Lie et al., 2021), values (Welkowitz et al., 1967), and beliefs (Hathaway, 2008; Foon, 1985). Furthermore, clients and therapists engage in interactions in therapy, which is considered a form of *pakikipag-kapwa.* In this regard, they develop a relational world or relational *loob* - the therapeutic alliance. Based on the responses from the survey, the ways by which clients and therapists navigate their experiences of therapeutic alliance may be categorized into three distinct but interrelated dimensions:

Struggle-ease (bigat-gaan), which may be manifested in the presence or absence of therapy-interfering behaviors of both clients (e.g., non-compliance, absence/tardiness, avoidance, boundary violations, aggression) and therapists (e.g., over-confidence, inflexibility to protocols, demandingness, unresponsiveness, invalidation) that may burden or ease the flow of therapy (Chapman & Rosenthal, 2016);

Superficiality-depth (babaw-lalim), which is characterized by clients with a high or low degree of openness when it comes to treatment, who may be either fully expressive or defensive (e.g., concealing/masking their emotions) (Baumann & Hill, 2016) that may be critical for the superficiality or depth of the therapeutic alliance. Similarly, the way the therapist exhibits genuineness in the form of personal presence (e.g., showing the real person who is capable of not knowing and making mistakes instead of putting up a facade) and appropriate self-disclosures (e.g., intentional revealing of emotions and thoughts, and impressions) leads to a deepening of the relationship (Schnellbacher, & Leijssen, 2009);

Ambiguity-clarity (labo-linaw) emphasizes the situations where clients and therapists are clear about the direction and intention in therapy (Braga et al., 2019). Furthermore, there may be doubt or trust regarding the therapy or therapist (Rosenzweig et al., 1996). Likewise, therapists may either perceive that their clients need or do not need treatment (Hill et al., 2023), and this

may also be further compounded by their doubt or trust toward their clients regarding commitment to therapy (Crits-Christoph et al., 2019).

It can be argued that the client-therapist relationship develops into a therapeutic alliance when both clients and therapists share the same level of engagement toward each other as one-of-us (*Hindi-ibang-tao)*. This is facilitated through a series of interactions ranging from civility *(pakikitungo)* to mutual understanding *(pakikipagpalagayang-loob)*, increased involvement and empowerment *(pakikisangkot)*, and eventually being one with each other *(pakikiisa)*. Given this structure, shared reality *(pakikibahagi)* provides the pathways by which the established therapeutic alliance is enhanced via shared reality to achieve positive outcomes, such as psychological well-being or a sense of *ginhawa ng kalooban. Pakikibahagi* was used as an indigenous term to emphasize social unity (Tapales & Alfiler, 1991) and was applied at the societal level (when the citizens share and co-identify with sociocultural experiences). This indigenous concept is applied in the context of psychotherapy to refer to the unity between clients and therapists via reality-sharing. In this process, clients and therapists establish shared realities through a shared inner world or *pakikibahagi ng katangiang panloob* (i.e., similarities or compatibilities of personalities, values, and beliefs) and a shared relational world or *pakikibahagi ng ugnayang panloob* (i.e., congruence of therapeutic alliance behaviors and experiences). The more they establish shared realities, the more it is hypothesized that there is a stronger direction toward positive treatment outcomes.

There are empirical studies showing the effects of a shared inner world between clients and therapists. When both clients and therapists share the following personality traits and characteristics: high original thinking, high vigor, high sense of responsibility, high affiliation, low assertiveness, and low order (Shir & Tishby, 2023; Taber et al., 2011),

Figure 1
Cultural Model of Therapeutic Alliance
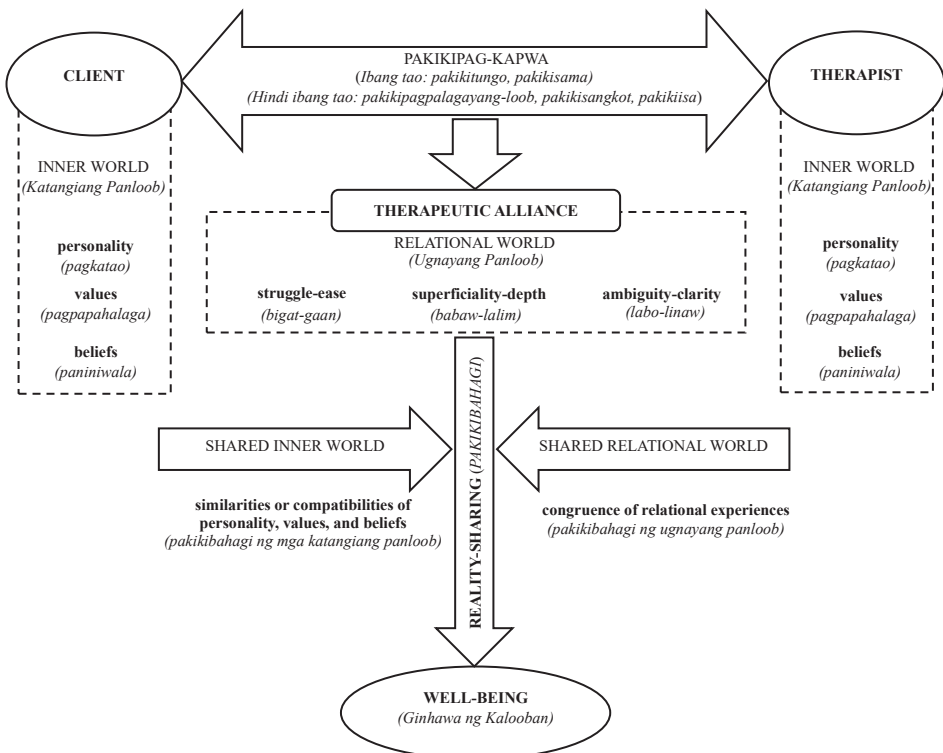
the therapeutic alliance is strengthened. Furthermore, when both have relatively similar or compatible value orientations (Hogan, 2015; Jackson et al., 2013; Arizmendi et al., 1985) and belief systems (outcome expectancies, Gaines, 2022; locus of control, Foon, 1985; spiritual beliefs, Beutler, 1981), a positive therapeutic outcome follows. Likewise, growing evidence shows the significant effects of a shared relational world. Research has consistently shown that when both clients and therapists rate their alliance together as high in terms of agreement on treatment goals, engagement in tasks, and development of emotional bond across treatment sessions, it leads to greater client symptom improvement, treatment satisfaction, and well-being (Chen et al., 2022; Coyne et al., 2018). In relation to the framework, the shared relational *loob* also pertains to both clients and therapists experiencing ease *(gaan)*, depth *(lalim)*, and trust *(linaw)* in the psychotherapy relationship.

4.0. Conclusion

Therapeutic alliance remains an elusive topic in clinical psychology, especially in practice and research in the Philippines. Most practitioners focus on techniques and strategies while ignoring the relational processes underlying psychotherapy. Similarly, researchers emphasize diagnostic and outcome research and program developments while brushing over transdiagnostic and common factor frameworks. Therefore, the author encourages the reiteration of psychotherapy as a social process and emphasizes three agents of change: the client, the therapist, and the therapeutic alliance. Furthermore, the concepts of *loob* or psychological reality and *pakikibahagi* or reality-sharing have only been conceptualized and applied in social and personality psychology frameworks. It has not yet been utilized in the field of clinical psychology, particularly in the context of psychotherapy relationships. It turns out that these are terms articulated by Filipino clients and therapists as they describe their journey in psychotherapy.

This paper provides a dynamic integrative model of therapeutic alliance that depicts the structure and the relevant processes in the context of Filipino psychotherapy experiences. The model serves as a guiding framework for clinicians in looking at intrapersonal characteristics and interpersonal experiences of both their clients and of themselves and for researchers to capture dyadic experiences and utilize dyad-level analyses in psychotherapy process research.

5.0. Limitation of the Findings

The proposed integrative model of therapeutic alliance focuses on the relational processes between Filipino clients and therapists, emphasizing the

clinical relevance of shared realities, identities, and experiences. The model is argued to be compatible with various psychotherapy frameworks, and it remains open to further research and inquiry in exploring specific therapeutic strategies guided by the model. Since this model advocates for the phenomenon of "sharedness" between clients and therapists as a critical element in establishing therapeutic alliances and facilitating positive treatment outcomes, it views client-therapist dissimilarities or incongruences as potentially unfavorable for developing therapeutic alliances. However, the model has only been developed at the theoretical level and has not yet been empirically tested.

While the phenomenon of reality-sharing (*pakikibahagi*) is argued to be relevant in any relational context, the scope of the proposed model is within the area of individual psychotherapy relationships. Group-based dynamics are not considered, and the systemic nature of alliances where one has multiple care providers is not explored in the framework.

6.0. Practical Value of the Paper

Shared reality in psychotherapy implies the need for dyadic reflections of one's *loob*. Awareness of one's *loob* can be enhanced through clear communication between clients and therapists regarding their intrapersonal characteristics *(katangiang panloob),* interpersonal relations *(ugnayang panloob*), and shared realities *(pakikibahagi ng loob)*. In the shared inner world, clients and therapists may form more meaningful interactions in therapy if they have undergone an explicit assessment of their characteristics (in terms of personality, values, and beliefs) and explicit evaluation for similarities and discrepancies. This can be a starting point for them to get to know each other better and manage expectations during psychotherapy. Client-therapist similarities in certain areas can be utilized to build rapport and facilitate a sense of relatedness. When clients realize their therapists understand them and can relate with them based on shared characteristics, they are more likely to develop positive alliances. Nonetheless, even if there are dissimilarities in personalities or incompatibilities in values and beliefs between clients and therapists, effective psychotherapy can still be facilitated by being mindful of such differences, suspending biases, and avoiding tendencies to impose.

Looking at the shared relational world, clients and therapists should be clear about their interaction level, whether they see each other as *Ibang-Tao* or *Hindi-Ibang-Tao.* While it is normal to begin therapy with a perception of the other as an outsider, the progression to a perception as one-of-us can be set as part of the goal for treatment. More often than not, the therapeutic alliance is just taken for granted

and assumed as an implicit and inherent part of the psychotherapy process, but in fact, efforts to build an alliance (or repair an alliance rupture) should be made explicit either as a therapy goal or agenda for therapy conversations. This can be done by becoming deliberate in attaining the status of *Hindi-Ibang-Tao* by progressing the level of interaction *(pakikipag-kapwa)* and employing the necessary behaviors. It is considered essential to evaluate how both clients and therapists navigate their therapeutic alliance whether there is struggle or ease *(bigat o gaan)*, superficiality or depth *(babaw o lalim)*, and ambiguity or clarity *(labo o linaw)*. Evaluating the alliance according to these dimensions allows the therapist to gauge cooperativeness, commitment, and motivation in therapy. Should there be a realization of a struggling, superficial, and doubt-ridden relationship, efforts to transform this into a healthier and meaningful relationship can be explored.

7.0. Directions for Future Research

Basic research questions may be empirically tested to find evidence in support of the proposed model of therapeutic alliance and the principles of shared reality: Do client-therapist similarities in personality, values, and beliefs (shared inner world or *pakikibahagi ng katangiang panloob*) contribute to developing a therapeutic alliance? Does client-therapist alliance congruence in how they carry their alliance (shared relational world or *pakikibahagi ng ugnayang panloob*) facilitate outcomes? Is there a difference in the quality of therapeutic alliance and outcome based on the level of client-therapist interactions *(pakikipag-kapwa)?*

Client-therapist similarities and alliance congruence should be assessed from a dyadic point of view. For example, client-rated and therapist-rated profiles of their personality traits, values, and beliefs may be captured. Moreover, both client-rated and therapist-rated reports about their alliance (in terms of quality and experience) may also be obtained. Analyzing the effects of similarities and congruences is possible using multilevel modeling (e.g., Kahn, 2011), actor-partner interdependence model (e.g., Kivlighan et al., 2014), and dyadic response surface methodologies (e.g., Schönbrodt et al., 2018).

It would also be interesting to assess the perceived levels of interaction between clients and therapists to characterize *Ibang-Tao* or *Hind-Ibang-Tao* kind of therapeutic alliance and how shared perceptions of social relationships relate to the experience of well-being. In addition, a more contextualized assessment tool for therapeutic alliance may be recommended. The existing tools measuring therapeutic alliance focus on the tripartite model, where the alliance is composed of goals, tasks, and bonds. An alliance tool

may be developed to emphasize the tri-dimensional quality of the alliance in terms of struggle or ease *(bigat o gaan)*, surface or depth *(babaw o lalim)*, and doubt or trust *(labo o linaw)*. More in-depth qualitative investigations of the psychotherapy process are warranted in these directions.

8.0 Declaration of Conflict of Interest

The author declares no potential conflict of interest.

REFERENCES

Alejo, A. E. (2018). Loob as relational interiority: A contribution to the philosophy of the human person. *Social Transformations: Journal of the Global South, 6*(1), 29–53. https://doi.org/10.13185/2866

Alejo, A. E. (2020). Tao po! Tuloy! Halina sa loob ng tao. *Magisterial Lectures, 22*. https://archium.ateneo.edu/magisterial-lectures/22

Ardito, R. B., & Rabellino, D. (2011). Therapeutic alliance and outcome of psychotherapy: Historical excursus, measurements, and prospects for research. *Frontiers in Psychology, 2*, 270. https://doi.org/10.3389/fpsyg.2011.00270

Arizmendi, T. G., Beutler, L. E., Shanfield, S. B., Crago, M., & Hagaman, R. (1985). Client– therapist value similarity and psychotherapy outcome: A microscopic analysis. *Psychotherapy: Theory, Research, Practice, Training, 22*(1), 16–21. https://doi.org/10.1037/h0088520

Asnaani, A., & Hofmann, S. G. (2012). Collaboration in multicultural therapy: Establishing a strong therapeutic alliance across cultural lines. *Journal of Clinical Psychology, 68*(2), 187–197. https://doi.org/10.1002/jclp.21829

Baumann, E. C., & Hill, C. E. (2016). Client concealment and disclosure of secrets in outpatient psychotherapy. *Counselling Psychology Quarterly, 29*(1), 53–75. https://doi.org/10.1080/09515070.2015.1023698

Bautista, V. V. (2011). Gaan at gana sa buhay: Sikolohiya ng sarap, ligaya at ginhawa sa pananaw ng sikolohiyang pang klinika. In J. A. R. Cantiller & J. A. Yacat (Eds.), *ISIP: Mga kaisipan sa sikolohiya, kultura at lipunang Pilipino* (Tomo 1, pp. 15-44). Pambansang Samahan ng Sikolohiyang Pilipino.

Beutler, L. E. (1981). Convergence in counseling and psychotherapy: A current look. *Clinical Psychology Review, 1*(1), 79-101. https://doi.org/10.1016/0272-7358(81)90020-9

Botella, L., Corbella, S., Belles, L., Pacheco, M., María Gómez, A., Herrero, O., Ribas, E., &

Pedro, N. (2008). Predictors of therapeutic outcome and process. *Psychotherapy Research: Journal of the Society for Psychotherapy Research, 18*(5), 535–542. https://doi.org/10.1080/10503300801982773

Braga, C., Ribeiro, A. P., Sousa, I., & Gonçalves, M. M. (2019). Ambivalence predicts symptomatology in cognitive-behavioral and narrative therapies: An exploratory study. *Frontiers in Psychology, 10*, 1244. https://doi.org/10.3389/fpsyg.2019.01244

Bulatao, J. C. (2002). Oh, that terrible task of teachers to teach psychology in the Philippines. *Philippine Journal of Psychology, 35*(1), 33-37. https://www.ejournals.ph/article.php?id=1375

Chapman, A. L., & Rosenthal, Z. (2016). *Managing therapy-interfering behavior: Strategies from dialectical behavior therapy.* American Psychological Association.

Chen, R., Bar-Kalifa, E., Sade, A., & Ziv-Beiman, S. (2022). Client-therapist congruence in session-helpfulness ratings and its association with therapy outcomes. *Psychotherapy research: Journal of the Society for Psychotherapy Research, 32*(4), 484–496. https://doi.org/10.1080/10503307.2021.1974598

Coyne, A. E., Constantino, M. J., Laws, H. B., Westra, H. A., & Antony, M. M. (2018). Patient-therapist convergence in alliance ratings as a predictor of outcome in psychotherapy for generalized anxiety disorder. *Psychotherapy Research: Journal of the Society for Psychotherapy Research, 28*(6), 969–984. https://doi.org/10.1080/10503307.2017.1303209

Crits-Christoph, P., Rieger, A., Gaines, A., & Gibbons, M. B. C. (2019). Trust and respect in the patient-clinician relationship: Preliminary development of a new scale. *BMC Psychology, 7*(1), 91. https://doi.org/10.1186/s40359-019-0347-3

Degillo, J. L. L., & Gayoles, L. A. M. (2020). The effect of religiously integrated cognitive behavioral therapy on the psycho-spiritual well-being of people living with HIV. *Philippine Social Science Journal, 3*(3), 33-43. https://doi.org/10.52006/main.v3i3.245

Deleña, M. O. (2021). A hermeneutic framework for Filipino psychotherapy: A (Filipino) psychotherapist's guide to interpretation of Filipino narratives. https://animorepository.dlsu.edu.ph/etdd_philo/2

Dixon, K. M., Kivlighan, D. M., Hill, C. E., & Gelso, C. J. (2022). Cultural humility, working alliance, and Outcome Rating Scale in psychodynamic psychotherapy: Between-therapist, within-therapist, and within-client effects. *Journal of*

Counseling Psychology, 69(3), 276–286. https://doi.org/10.1037/cou0000590

Duan, C. (2019). Multicultural considerations in the working alliance. In J. N. Fuertes (Ed.), *Working alliance skills for mental health professionals* (pp. 137–158). Oxford University Press. https://doi.org/10.1093/med-psych/9780190868529.003.0007

Dy-Liacco, G. S., Piedmont, R. L., Murray-Swank, N. A., Rodger-son, T. E., & Sherman, M. F. (2009). Spirituality and religiosity as cross-cultural aspects of human experience. *Psychology of Religion and Spirituality, 1*, 35–52. https://doi.org/10.1037/a0014937

Echterhoff, G., Higgins, E. T., & Levine, J. M. (2009). Shared reality: Experiencing commonality with others' inner states about the world. *Perspectives on Psychological Science, 4*(5), 496–521. https://doi.org/10.1111/j.1745-6924.2009.01161.x

Enriquez, V. G. (1986). Kapwa: A core concept in Filipino social psychology. *Philippine Social Sciences and Humanities Review, 42*, 100-108.

Flückiger, C., Del Re, A. C., Wampold, B. E., & Horvath, A. O. (2018). The alliance in adult psychotherapy: A meta-analytic synthesis. *Psychotherapy, 55*(4), 316. https://doi.org/10.1037/pst0000172

Foon, A. E. (1985). Similarity between therapists' and clients' locus of control: Implications for therapeutic expectations and outcome. *Psychotherapy: Theory, Research, Practice, Training, 22*(4), 711–717. https://doi.org/10.1037/h0085557

Gaines, A. N. (2022). Patient–therapist expectancy convergence and outcome in naturalistic psychotherapy. *Masters Theses.* 1156. https://doi.org/10.7275/26968030

Goldstein, L. A., Adler Mandel, A. D., DeRubeis, R. J., & Strunk, D. R. (2020). Outcomes, skill acquisition, and the alliance: Similarities and differences between clinical trial and student therapists. *Behaviour Research and Therapy, 129*, 103608. https://doi.org/10.1016/j.brat.2020.103608

Grimm, S. D., Church, A. T., Katigbak, M. S., & Reyes, J. A. (1999). Self-described traits, values, and moods associated with individualism and collectivism. Testing I-C theory in an individualistic (U.S.) and a collectivistic (Philippine) culture. *Journal for Cross-Cultural Psychology, 30*, 466–500. https://doi.org/10.1177/0022022199030004005

Hartmann, A., Joos, A., Orlinsky, D. E., & Zeeck, A. (2015). Accuracy of therapist perceptions of patients 'alliance: Exploring the divergence.

Psychotherapy Research, 25(4), 408–419. https://doi.org/10.1080/10503307.2014.927601

Hathaway, W. L. (2008). Clinical practice with religious/spiritual issues: Niche, proficiency, or specialty. *Journal of Psychology and Theology, 36*(1), 16–25. https://doi.org/10.1177/009164710803600102

Hays, P. A. (2008). Addressing cultural complexities in practice: Assessment, diagnosis, and therapy (2nd ed.). *American Psychological Association.* https://doi.org/10.1037/11650-000

Hill, C. E., Knox, S., & Duan, C. (2023). Psychotherapist advice, suggestions, recommendations: A research review. *Psychotherapy, 60*(3), 295–305. https://doi.org/10.1037/pst0000476

Hogan, L. R. (2015). *The role of values in psychotherapy process and outcome.* University of North Texas.

Høgend, P. (2004). Analysis of transference in psychodynamic psychotherapy: A review of empirical research. *Canadian Journal of Psychoanalysis, 12*(2), 279.

Horvath, A. O., Del Re, A. C., Flückiger, C., & Symonds, D. (2011). Alliance in individual psychotherapy. *Psychotherapy (Chicago, Ill.), 48*(1), 9–16. https://doi.org/10.1037/a0022186

Jackson, A. P., Hansen, J., & Cook-Ly, J. M. (2013). Value conflicts in psychotherapy. *Issues in Religion and Psychotherapy, 35*(1), Article 3. https://scholarsarchive.byu.edu/irp/vol35/iss1/3

Javier Jr., R. E. (2017). Ang tao sa ka-taw-an at sa ka-tau-han: Pag-uugnay sa pagpapakatao, pakikipagkapuwa-tao, at pagkatao. *MALAY, 30*(1)

Kahn J. H. (2011). Multilevel modeling: overview and applications to research in counseling psychology. *Journal of counseling psychology, 58*(2), 257–271. https://doi.org/10.1037/a0022680

Kivlighan, D. M., Marmarosh, C. L., & Hilsenroth, M. J. (2014). Client and therapist therapeutic alliance, session evaluation, and client reliable change: A moderated actor-partner interdependence model. *Journal of Counseling Psychology, 61*(1), 15–23. https://doi.org/10.1037/a0034939

Labor, P. D. P., & Gastardo-Conaco, M. C. C. (2021). Viewing your kapwa: Elaboration of a social-relational construct through language. *Philippine Social Science Journal, 4*(4), 10-19. https://doi.org/10.52006/main.v4i4.418

Lee, E. (2008). *Cross-cultural dialogue and its impact on the alliance in cross-cultural psychotherapy process* (Order No. 3339646). ProQuest Dissertations & Theses Global;

ProQuest One Academic. (304458295). https://www.proquest.com/dissertations-theses/cross-cultural-dialogue-impact-on-alliance/docview/304458295/se-2

Lucerna, E., & Gayoles, L. A. (2018). The effect of pastoral counseling on the psycho-spiritual well-being of seminarians. *Philippine Social Science Journal, 1*(1), 21-40. https://doi.org/10.52006/main.v1i1.7

Marmarosh, C. L., & Kivlighan, D. M., Jr. (2012). Relationships among client and counselor agreement about the working alliance, session evaluations, and change in client symptoms using response surface analysis. *Journal of Counseling Psychology, 59*(3), 352–367. https://doi.org/10.1037/a0028907

Martinez, A. B., Co, M., Lau, J., & Brown, J. S. L. (2020). Filipino help-seeking for mental health problems and associated barriers and facilitators: a systematic review. *Social Psychiatry and Psychiatric Epidemiology, 55*(11), 1397–1413. https://doi.org/10.1007/s00127-020-01937-2

Melgar, M. I. E. (2013). Counseling and psychotherapy in the Philippines: A discipline in transition. In R. Moodley, U. P. Gielen, & R. Wu (Eds.), *Handbook of Counseling and Psychotherapy in an International Context* (pp. 237–246). Routledge/Taylor & Francis Group.

Muran, J. C., & Barber, J. P. (Eds.). (2011). *The therapeutic alliance: An evidence-based guide to practice.* The Guilford Press.

Nissen-Lie, H. A., Solbakken, O. A., Falkenström, F., Wampold, B. E., Holmqvist, R., Ekeblad, A., & Monsen, J. T. (2021). Does it make a difference to be more "on the same page"? Investigating the role of alliance convergence for outcomes in two different samples. *Psychotherapy Research, 31*(5), 573–588. https://doi.org/10.1080/10503307.2020.1823030

Orlinsky, D. E., Ronnestad, M. H., & Willutzki, U. (2004). "Fifty years of process-outcome research: continuity and change," In M. J. Lambert (Ed.), *Bergin and Garfield' Handbook of Psychotherapy and Behavior Change*, (pp. 307-365). Wiley.

Pe-Pua, R., & Protacio-Marcelino, E. A. (2000). Sikolohiyang pilipino (Filipino psychology): A legacy of Virgilio G. Enriquez. *Asian Journal of Social Psychology, 3*(1), 49–71. https://doi.org/10.1111/1467-839X.00054

Prusiński, T. (2022). The strength of alliance in individual psychotherapy and patient's well-being: the relationships of the therapeutic alliance to psychological well-being, satisfaction with life, and flourishing in adult patients attending individual psychotherapy. *Frontiers in*

psychiatry, 13, 827321. https://doi.org/10.3389/fpsyt.2022.827321

Ramos, C. C. R. (2020). Filipino Concept of "Loob". Respons: *Jurnal Etika Sosial, 25*(02), 143-157. https://doi.org/10.25170/respons.v25i02.2467

Repique, G. T., & Gayoles, L. A. M. (2019). The effect of Spiritually Informed Cognitive Behavioral Therapy (SICBT) group counseling on students' psychological well-being. *Philippine Social Science Journal, 2*(2), 37-52. https://doi.org/10.52006/main.v2i2.47

Reyes, J. R. (2015*). Loób and kapwa*: An introduction to a Filipino Virtue Ethics. *Asian Philosophy, 25*(2), 148–171. https://doi.org/10.1080/09552367.2015.1043173

Rounsaville, B. J., Chevron, E. S., Prusoff, B. A., Elkin, I., Imber, S., Sotsky, S., & Watkins, J. (1987). The relation between specific and general dimensions of the psychotherapy process in interpersonal psychotherapy of depression. *Journal of Consulting and Clinical Psychology, 55*(3), 379–384. https://doi.org/10.1037/0022-006X.55.3.379

Rosenzweig, D. L., Farber, B. A., & Geller, J. D. (1996). Clients' representations of their therapists over the course of psychotherapy. *Journal of Clinical Psychology, 52*(2), 197–207. https://doi.org/10.1002/(SICI)1097-4679(199603)52:2<197::AID-JCLP11>3.0.CO;2-F

Samaco-Zamora, M. C. F., & Fernandez, K. T. G. (2016). A grounded theory of Filipino wellness (*kaginhawaan*). *Psychological Studies, 61*(4), 279–287. https://doi.org/10.1007/s12646-016-0373-7

Schönbrodt, F. D., Humberg, S., & Nestler, S. (2018). Testing similarity effects with dyadic response surface analysis. *European Journal of Personality, 32*(6), 627–641. https://doi.org/10.1002/per.2169

Schnellbacher, J., & Leijssen, M. (2009). The significance of therapist genuineness from the client's perspective. *Journal of Humanistic Psychology, 49*(2), 207–228. https://doi.org/10.1177/0022167808323601

Shir, R., & Tishby, O. (2023). Therapy matchmaking: Patient-therapist match in personality traits and attachment style. *Psychotherapy research: Journal of the Society for Psychotherapy Research*, 1–13. Advance online publication. https://doi.org/10.1080/10503307.2023.2195054

Stefana A. (2015). The origins of the notion of countertransference. *Psychoanalytic Review, 102*(4), 437–460. https://doi.org/10.1521/prev.2015.102.4.437

Taber, B. J., Leibert, T. W., & Agaskar, V. R. (2011). Relationships among client-therapist personality congruence, working alliance, and therapeutic outcome. *Psychotherapy (Chicago, Ill.), 48*(4), 376–380. https://doi.org/10.1037/a0022066

Tapales, P. D., & Alfiler, M. C. P. (1991). Sustaining Filipino unity: Harnessing indigenous values for moral recovery. *Philippine Journal of Public Administration*.

Teh, L. A. (2003). A survey on the practice and status of psychotherapy in the Philippines. *Philippine Journal of Psychology, 36*(1), 112–133.

Tickle, E., & Murphy, D. (2014). A journey to client and therapist mutuality in person-centered psychotherapy: A case study. *Person-Centered and Experiential Psychotherapies, 13*(4). https://doi.org/10.1080/14779757.2014.927390

Tsang, A. K. T., Bogo, M., & Lee, E. (2011). Engagement in cross-cultural clinical practice: Narrative analysis of first sessions. *Clinical Social Work Journal, 39*(1), 79–90. https://doi.org/10.1007/s10615-010-0265-6

Tuason, M. T. (2011). Those who were born poor: A qualitative study of Philippine poverty. *Journal of Counseling Psychology, 55*, 158–171. https://doi.org/10.1037/00220167.55.2.158

Tuason, M. T. G., Fernandez, K. T. G., Catipon, M. A. D. P., Trivino-Dey, L., & Arellano-Carandang, M. L. (2012). Counseling in the Philippines: Past, present, and future. *Journal of Counseling & Development, 90*(3), 373–377. https://doi.org/10.1002/j.1556-6676.2012.00047.x

Vinluan, L. R. (2013). The Filipino as counsellor and counseled: Issues in developing a Filipino counselling psychology. *Scribd*. https://www.scribd.com/document/402761029/The-Filipino-as-Counselor-and-Counseled-3#

Welkowitz, J., Cohen, J., & Ortmeyer, D. (1967). Value system similarity: Investigation of patient-therapist dyads. *Journal of Consulting Psychology, 31*(1), 48–55. https://doi.org/10.1037/h0024209

Yacat, J. A. (2008). *Sikolohiya ng kapwa: Rekonseptuwalisasyon at panimulang imbestigasyon*. 33rd National Conference on Sikolohiyang Pilipino, Holy Angel University, Pampanga.

Zane, N., Sue, S., Chang, J., Huang, L., Huang, J., Lowe, S., Srinivasan, S., Chun, K., Kurasaki, K., & Lee, E. (2005). Beyond ethnic match: Effects of client-therapist cognitive match in problem perception, coping orientation, and therapy goals on treatment outcomes. *Journal of Community Psychology, 33*(5), 569–585. https://doi.org/10.1002/jcop.20067

Zilcha-Mano, S. (2017). Is the alliance really therapeutic? Revisiting this question in light of recent methodological advances. *American Psychologist, 72*(4), 311–325. https://doi.org/10.1037/a0040435

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