

FROM THE EDITOR

In the last issue of the journal, Cordelia Galgut wrote about continuing to work as a therapist after her mother's death¹. Her moving piece prompted many of you to respond, and what seemed to strike a chord in particular was Cordelia's willingness to share her own struggles with clients if she thought it could help to alleviate their distress. Being 'a real person' was something Irvin Yalom spoke about in February this year when he addressed an audience of BACP members live by video link from California: 'Be prepared to come into the session as a real person,' Yalom advised therapists. 'If you are going to deal with interpersonal issues, you have to overcome your training to keep yourself out of the discussion.'

In this issue, Jo Moore presents her study which explored the feelings and experiences of gay and lesbian therapists about the self-disclosure of their sexual orientation. When, if ever, she writes, should gay and lesbian therapists 'come out' to straight (ie heterosexual) clients in therapy? 'With many gay and lesbian therapists experiencing varying degrees of homophobia while growing up, living and working in a predominantly heterosexual society,' Jo writes, 'self-disclosing their sexual orientation to straight clients may be potentially complex, with unknown implications for the therapeutic relationship.' In a powerful piece responding to Jo's article, student counsellor Dan Owens reflects on how being gay impacts on his relationships in the therapy room.

We are always pleased to welcome contributors who write from a range of modality perspectives. Valerie Garrett's fascinating study of the supervision of counselling which takes place in a GP surgery is presented from a psychodynamic perspective, while Michelle Hague and Peter Mabbutt explain an approach which combines clinical hypnotherapy with rational emotive behaviour therapy (REBT). In a courageous piece, CBT practitioner Elaine Davies, who is also a trained and accredited counsellor, expresses her sadness and anger at the ongoing negative attitudes towards CBT she encounters in her work. 'I thought we were all on the same side,' Elaine writes. 'Trying to help the client.'

As ever, we welcome your feedback on any of the articles in this issue. We also welcome ideas for articles relating to counselling and psychotherapy within the healthcare sector. We are particularly interested in new perspectives on current thinking, debate on practical or professional issues, and sharing of experience and practice. For information on how to submit an idea, please contact me at the email address below. I look forward to hearing from you.

REFERENCE

¹ Galgut C. Continuing to work after my mother's death. *Healthcare Counselling and Psychotherapy Journal*. 2013; 13(1):20-23.



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