

CHAPTER

1

Conceptualizing Counseling

PURPOSE OF THIS CHAPTER

In this chapter, we introduce a number of concepts and conditions that are fundamental to the counseling process. In so doing, we provide a structure for the remainder of the book. Counseling must be viewed within a context. The factors that contribute to that context include philosophy, current theoretical premises, and culture—in other words, the social milieu. That milieu changes as a society changes. And, of course, it changes when one moves from one society or culture to another. In addition, we address helper qualities that are universal, crossing cultures and time. Our ultimate objective is to help you, the reader, begin to identify yourself within these parameters and to do some introspection regarding how your personal qualities match those of the professional counselor.

Considerations as You Read This Chapter

- As you read about the different theoretical approaches to client problems and change, which ones do you find most comfortable?
- How do you view life? Do you believe that most things that happen to people are unplanned and coincidental, or do you believe that life events tend to fit a “larger plan”?
- Is life’s challenge a matter of analyzing situations and developing successful responses to those situations? Or is life’s challenge to become the best person one can be, given the circumstances life presents?
- How do you describe your culture? From whom did you get that culture? Your parents? Your community? Your nation?

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This is a book about the process of counseling. In the hands of a skilled and sensitive person, this process can be used to enhance the lives of people who are seeking to change their relationships, to develop self-understanding, or to learn how to anticipate and meet life's challenges. Although it is almost impossible to define precisely what the counseling experience will be for you, some general parameters of the counseling process will certainly be part of your experience. There are several ways to consider the counseling process, beginning with a clear sense of what the process is, how counseling is applied to human problems, how the client influences the process, and what constitutes successful counseling. In this chapter, we will examine these and other fundamental issues as they relate to the practice of counseling.

WHAT IS COUNSELING?

The process of counseling has a long history. Scholars have traced it to the Enlightenment, with connections to the incantations of ancient priest-healers in Mesopotamia, Persia, and Egypt. Even with that long history, counseling has proven to be a difficult concept to explain. The public's lack of clarity is due, in part, to the proliferation of modern-day practitioners who have adopted the counselor label. They range from credit counselors to investment counselors, and from camp counselors to retirement counselors. Although their services share the common ingredient of verbal communication and possibly the intention to be helpful, those services have little in common with the type of counseling this book addresses.

Professional counseling has emerged as the descriptor for the treatment of interpersonal and intrapersonal issues so common to U.S. culture. It takes the form of individual (one-to-one) and group (multiple clients) modes. The content of professional counseling tends to include both internal and relational concerns. Internal (intrapersonal) concerns can range from issues of self-concept to psychological disturbance. Relational (interpersonal) concerns can range from communication and perceptual problems between the client and others to issues of hostility, aggression, and criminal activity. These problems cross all age groups and developmental stages. It is important to note that these issues, even the "lesser" ones, are diagnostic in nature. That is, the problems must be understood both in their expression (as behaviors, feelings, or thoughts) and in the context in which they are supported (what keeps the problem alive).

The American Counseling Association (ACA) defines professional counseling as "the application of mental health, psychological, and human development principles through cognitive, affective, behavioral and systemic intervention strategies, that address wellness, personal growth, and career development, as well as pathology" (American Counseling Association, 1997). This definition embraces both problems that are considered "normal" and "developmental" and problems that are of a more serious psychological nature. However, that is not to suggest that a professional counselor might be a provider of services for any type of problem. Within the counseling profession are many specialties, including mental health counselors, marriage and family counselors, school counselors, rehabilitation counselors, pastoral counselors, creative arts counselors, geriatric counselors, and so on. Each specialty is based on specific therapeutic skills required by the clientele who would seek that specialty for assistance. Common across these specialties are the relationship, communication, conceptualization, diagnostic, and intervention skills that are covered in this book.

Why Counseling?

It may be necessary to remind some aspiring counselors that the problems of life can be solved in many ways, counseling being one of those ways. The vast majority of the human race has never

experienced professional counseling. Does that mean that they are functioning at some sub-level of life? Of course not. Many people adapt to life's challenges by using personal resources, friends and family, or religious faith. But even with these resources, challenges can sometimes accumulate to the point that an unencumbered, skilled helper can facilitate the process of growth and adaptation to such challenges.

Viewed in this way, counseling can assume the function of change, prevention, or life enhancement. As change, counseling is concerned with situations that, for whatever reason, have become so disruptive that people are unable to continue through the normal passage of life without excess stress, dissatisfaction, or unhappiness. As prevention, counseling is able to take into account those predictable life events that produce stress; cause people to draw on their psychological resources; and, ultimately, demand adaptation to changing life forces. Finally, a third form of counseling, enhancement counseling, goes beyond life's challenges and predictabilities. As a counseling goal, enhancement attempts to open clients' experiences to new and deeper levels of understanding, appreciation, and wisdom about life's many potentialities.

THE PARAMETERS OF COUNSELING

Counselors can talk about counseling as change or growth. Or they can talk about counseling as a process or product. If counselors go very deeply into an examination of these alternatives, it also becomes apparent that they are beginning to talk about philosophical, cultural, and spiritual issues as well as psychological or interpersonal concerns. How counselors view these issues and concerns will determine what they do in the counseling interview. If I happen to hold an optimistic view of human beings and how they adapt to life's ups and downs, my view of what should happen in counseling will be quite different from that of the person who holds a cautious, or even pessimistic, view of human beings and how they adapt. If I have experienced life only in a sheltered or encapsulated culture, then I may view counseling as not involving cultural dimensions. If I solve my problems by careful examination and analysis of issues, decisions to be made, appropriateness of outcomes, and so on, then I might naturally assume that others should approach life problems in a similar fashion. Or if I see life as a multifaceted gestalt, then I might feel less urgency to identify, prescribe, and, thus, control the outcomes of counseling. These are just part of the counselor's context when she or he enters the process of counseling.

Occurring simultaneously with these issues, counseling addresses the personal concerns of the client. These concerns may have a strong basis in reality, or they may be self-generated by the client's discomfort. And it is also obvious that clients come as optimists or pessimists, bold or cautious. Whatever the case, the counselor must have a healthy appreciation of the very broad range of behaviors, attitudes, self-concepts, cultural agendas, and feelings that emerge as people develop. In other words, normal behavior, normal functioning, or normal feelings can include occasional flirtations with abnormal, a kind of testing the limits of one's self. It is best observed in the lives of adolescents, but it is found in people of all ages and stages of development. On the other hand, *normal* does not mean the same as *functional*. Functional behavior is that which facilitates growth, problem solving, and coping. People can behave in ways that are within the range of normal but still not be behaving functionally. When listening to the personal concerns of clients, counselors must seek to understand life as clients see it and the reasons they see life as they do. Only then can counselors begin to participate as helpers in the counseling relationship. Only then can clients begin to move toward more functional behavior. In a similar way, *dysfunctional* does not necessarily mean *abnormal*, which is why many people now refer to their families of origin as dysfunctional.

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Finally, there is no way to understand human existence by separating it from the setting or environment in which existence occurs. Children cannot be fully understood separate from their families of origin, their neighborhoods, or their peer groups; adults cannot be understood separate from their families, careers, or ethnicities; and individuals cannot be dissected into intellectual selves, occupational selves, affective selves, or whatever. Each individual is an ecological existence within a cultural context, living with others in an ecological system. One's intrapersonal dimensions are interdependent with others who share one's life space. A keen understanding and appreciation of this interdependence will facilitate your understanding of yourself as a counselor, and of your clients as people seeking to recover, to grow, or to enhance their lives.

Counseling and Theory

Theory is another way to approach counseling. In its most generic sense, theory is a way of explaining that, which is not directly observable. Thus, counseling theory is an effort to explain the process by which a set of activities begins, develops, and ends. Personality theory, from which numerous counseling theories spring, is an effort to explain the various ways that the psyche emerges, evolves, and matures, both in terms of normal development and in terms of dysfunction. On the other hand, therapy is the application of principles adapted from theory. In the discussion of counseling theories, authors will often refer to person-centered *therapy*, behavioral *therapy*, and so on. These approaches refer to what the counselor is doing with the client, based on the counselor's theoretical orientation.

Within the context of counseling therapies, well over 400 approaches have been identified. Most of these approaches would be better labeled as variations on a much smaller number of theoretical themes. The four dominant themes are the psychodynamic, cognitive/behavioral, humanistic, and transpersonal approaches. To this list, we would add a fifth theme: the systemic approaches that have their origins not in personality theory but in cybernetic theory.

Counseling theories can serve a number of functions. They provide a set of guidelines to explain how human beings learn, change, and develop; they also propose a model for normal human functioning (and ways in which human dysfunction may be manifested); and they suggest what should transpire in the counseling process and what the outcomes of counseling could be. In short, a counseling theory offers a type of map of the counseling process and the route its participants should take to achieve certain goals. Rarely does a counseling theory prescribe what the specific goals of counseling should be. Because there is much room for alternative viewpoints on matters such as normal human functioning, how people change, and what is a desirable outcome, different theories have emerged to reflect these various viewpoints. On a more practical level, counselors use theories to organize information and observations, to explain or conceptualize client problems, and to order and implement particular interventions with clients.

One might think, or even believe, that some theories are more valid than others, but research does not support that belief. In a classic meta-analysis of the effects of over 400 psychotherapy outcome studies, Smith and Glass (1977) concluded that the

results of research demonstrate the beneficial effects of counseling and psychotherapy. Despite volumes devoted to the theoretical differences among different schools of psychotherapy, the results of research demonstrated negligible differences in the effects produced by different therapy types. (p. 760)

So counseling does seem to help people in distress, but no particular counseling theory stands out as better than the rest. Counselors tend to identify with particular theories for a variety of

reasons. Some counselors look for a theory that provides the most utilitarian explanation of the counseling process. Their quest is for a theory that provides concrete guidelines. Other counselors look for a theory that is compatible with their life perspective—that is, a theory that makes similar assumptions about human nature as their own private assumptions. Still other counselors seek a theory that best explains or conceptualizes the types of problems their clients will present. Of course, it is possible for a counselor to obtain all three objectives with the same theory, but this realization tends to emerge only as the counselor gains experience.

In recent years, the counseling profession has witnessed an increased convergence among theorists and a growing realization that no single theory can explain or fit all client challenges. The result is an emerging view that theory is meant to serve the user, and when no single theory totally fits the counselor's needs, then a blending of compatible theories is an acceptable practice. This is known as an eclectic or integrative approach. Prochaska and Norcross (2010) report that more than a third of practicing counselors prefer an eclectic approach (37%), followed by existential/humanistic theory (13%), cognitive theories (10%), person-centered therapy (8%), psychodynamic theories (8%), systemic theories (7%), and behavioral approaches (6%). The integrative approach to strategy selection draws from theories based on the characteristics of the client's presenting problems and outcome goals. This approach would rarely select strategies from a single counseling theory.

The following list presents seven elements about counseling that are operative for all of the major theoretical approaches:

1. Counseling involves responding to the feelings, thoughts, and actions of the client. Existing theoretical approaches tend to emphasize one of these to the exclusion of another. Some approaches (person-centered, existential) favor an emphasis on feelings; others (rational-emotive, reality therapy, cognitive-behavioral) emphasize the importance of behaviors and actions; an integrative approach recognizes the importance of being able to identify and respond appropriately to feeling states, behavior patterns, and relationship patterns.
2. Counseling involves a basic acceptance of the client's perceptions and feelings, regardless of outside evaluative standards. In other words, you must first acknowledge who the client is before you can begin to consider who the client might become. Clients need your understanding of their current reality and concerns before they can anticipate growth and change in a new direction.
3. Confidentiality and privacy constitute essential ingredients in the counseling setting. Physical facilities that preserve this quality are important.
4. Counseling is voluntary. Ordinarily, it is not effective when the client is required to participate. Regardless of how the client is referred, the counselor never uses coercion as a means of obtaining or continuing with a client.
5. Generally speaking, the counselor operates with a conservative bias against communicating to the client detailed information about his or her own life. Although there are times when counselor self-disclosure is appropriate, counselors generally do not complicate the relationship by focusing attention on themselves.
6. One skill underlying all systems of counseling is that of communication. Counselors and clients alike continually transmit and receive verbal and nonverbal messages during the interview process. Therefore, awareness of and sensitivity to the kinds of messages being communicated is an important prerequisite for counselor effectiveness.
7. Counseling is a cross-cultural—and probably a multicultural—experience.

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Counseling and Philosophy

Few people consider themselves to be philosophers. And yet everyone has a philosophical outlook on life. Some people see life as a sequence of events and experiences over which they have little or no control. Others view life as a challenge to be analyzed, controlled, and directed. Some see achievement and self-improvement as the purpose of life. Others view life as a process to be experienced. Who is right? Everyone. Philosophical outlooks on life are varied, allowing each individual to choose or to identify with that outlook that seems to fit him or her best.

Counseling theory has drawn from four philosophical positions (Hansen, 2004; Wilks, 2003). The first of these, essentialism, assumes that human beings are rational by nature, that reason is the natural goal of education, and that the classical thinkers are the chief repository of reason. From this orientation come the problem solvers, the analyzers, those who search for patterns in life.

The second philosophical position, progressivism, is concerned with the fundamental question, What will work? Knowledge is based on experimental results, truth is identified through consequences, and values are relative rather than absolute. From this orientation come the persons who rely on data and research for their truths, who believe that pragmatic solutions do exist for human problems, and who are committed to the pursuit of logical and lawful relationships in life.

The third philosophical position, existentialism, holds that life's meaning is to be found in the individual, not in the environment or the event. Lawfulness (progressivism) and rational thinking (essentialism) are meaningless unless the individual gives them meaning. People who align with this view of life believe that values are real and individually determined, and that experiences are subjective rather than lawful or predictable. Individual responsibility is emphasized; human reactions are the result of choice or potential choice.

And the fourth philosophical position, postmodernism, raises the fundamental question, What is real? This question is particularly relevant in terms of the client's experience versus an external reality. Or more specifically, which reality is more important, the client's reality or an outside reality to which the client should adapt? Although there are some similarities between postmodernism and existentialism in this regard, the important point is that one can never know a reality outside oneself and, therefore, must focus on personal reality. From this orientation come persons who believe that reality can have only a personal meaning, that reality gains meaning through one's personal perceptions or explanations of experiences.

Obviously, all counselors enter the profession with some variation of these viewpoints. Each counselor's philosophical view will be reflected in how he or she reacts to client problems and how those problems are addressed. Similarly, clients enter counseling with some variation of these viewpoints, which will be reflected in how they view their problems and what they consider to be viable solutions.

Counseling and Culture

Increasingly, society is becoming aware of the complex role that culture plays in interpersonal relationships. An early advocate of multiculturalism, Pederson (1991) observed that:

Before we were born, cultural patterns of thought and action were already prepared to guide our ideas, influence our decisions, and help us take control of our lives. We inherited these cultural patterns from our parents and teachers who taught us the "rules of the game." Only later and sometimes never, did we learn that our culture was one of the many possible patterns of thinking and acting from which we could choose. By that time, most of us had already come to believe that "our" culture was the best of all possible worlds. (p. 6)

By *culture*, Pederson included demographic variables (e.g., age, sex, place of residence), status variables (e.g., social, educational, economic), and affiliations (formal and informal), as well as ethnographic variables such as race, nationality, ethnicity, language, and religion. This definition is broader than that used by some authors who would limit cultural concepts to ethnic or racial criteria. Even a narrower definition of culture demands an understanding of the context from which a person of another culture functions—the assumptions about relationships; about authority, power, and privilege; about right and wrong, success and failure; and about values worth fighting to preserve.

If *multiculturalism* embraces variables such as gender, ethnicity, race, religion, and sexual orientation, then it is almost certain that every counseling relationship will cross at least one of these dimensions and probably several. Thus, all counseling is multicultural. Even if both counselor and client are Caucasian, one may be gay and the other straight, or one may be male and the other female, or one may be older and the other younger, or one may be privileged and the other poor. Crossing such multiple boundaries becomes a multicultural relationship with all the complexities inherent in multiple interactions of social variables.

The implications for counseling and for the counselor are quite clear. If understanding and acceptance of the client are to occur, then the counselor must understand the cultural factors that have shaped and continue to influence the client's worldview. Even before that can happen, the counselor must understand his or her own worldview and how it is shaped in ways similar to the client's experience even when the two worldviews are substantially different from one another. To do less is to flirt with what Wrenn (1962) termed *cultural encapsulation*. Cultural encapsulation involves defining reality according to one set of cultural assumptions and stereotypes, becoming insensitive to cultural variations among individuals, and assuming that one's personal view is the only real or legitimate one, thus embracing unreasoned assumptions that one accepts without proof. Clearly, successful counseling cannot go forward when the counselor is handicapped by cultural encapsulation.

Ivey, D'Andrea, Ivey, and Simek-Morgan (2007) identify three major abilities that are necessary in working with clients of different cultures:

1. Maximizing the amount of thoughts, words, and behaviors that allow communication within a given culture
2. Maximizing the amount of thoughts, words, and behaviors that allow communication across a variety of diverse groups and individuals
3. The ability to formulate plans and actions that respond to the many possibilities existing in a culture and then to evaluate those actions

COUNSELING CONDITIONS AND THEIR EFFECTS

Many clients find seeking counseling to be a major life decision. Apart from the fact that mainstream society associates personal problems with weakness or inadequacy, the process of finding a person who is trustworthy, confidence-inspiring, and competent is a daunting challenge. For the most part, clients are ill-informed about counseling. If the experience is new, they may be unprepared to appraise the situation, determine the counselor's personal qualities, and make the judgment to commit to the process. The counselor must also make an initial assessment of the situation, determine that his or her skills are appropriate to the client's presenting concerns, and that the interaction of personalities and personal values are a good match for counseling success. What conditions or events provide signals both to clients and counselors that the prospective relationship holds promise for success?

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Clients feel encouraged by factors such as feeling support and understanding from another person, beginning to see a different and more hopeful perspective, or experiencing a more desirable level of relating to others. Similarly, counselors feel reinforced as they are able to establish those conditions that lead to successful counseling outcomes. Although different theoretical orientations emphasize somewhat different counseling outcomes, most practitioners agree on some rather basic outcomes. When counseling has been successful, clients often experience the following four types of outcomes:

1. Clients begin to perceive their problems and issues from quite different contexts. Many times, clients have formulated a set of explanations for their problems. Such explanations may reflect cultural factors, societal factors, or familial factors. In the Eurocentric context (reflecting a northern European cultural heritage), the issue might be one of helping clients to “own” their problems. *Own*ing means that clients begin to accept responsibility for themselves, their problems, and solutions. However, there are other ways of viewing the source of client problems. It is generally agreed that many problems experienced by people of color can be traced to active or passive forms of racial discrimination. Similarly, for people with physical disabilities, many of the problems they face may be associated with societal insensitivities involving access, employment skills, or misinformation. Thus, many clients enter counseling inappropriately blaming their problems on others, whereas other clients may enter counseling inappropriately blaming their problems on themselves.

Example: DiShawn, a 19-year-old black male, seeks counseling for a recent bout with depression. Raised in an upper-middle-class home in an integrated suburban neighborhood, he has been a college student for about 18 months. During this time, DiShawn has found himself pulled between the majority white culture of his college and the sizeable body of minority students. He has started to question some of his earlier views about race and opportunity, particularly because he has come to know an increasing number of other black students—many more, in his words, than he ever knew in high school. He is beginning to move from the conformity stage to the integrative awareness stage of racial identity (Helms & Cook, 1999). Thus, it would be important for the counselor to determine whether DiShawn’s depression is related to racial identity development or to pathological factors, or both.

2. Clients develop a more useful understanding of problems and issues. Once clients begin to view the sources of their problems more appropriately, they frequently develop greater understanding or insight into the problem. There are four aspects of problem awareness that understanding brings into client awareness: feelings and somatic reactions (affect) associated with the problem, thoughts (cognitions) related to how clients perceive or explain their problems, behavior patterns that may be associated or attributed to experiencing the problem, and interpersonal relationships that affect or are affected by the problem occurrence. Understanding these different dimensions of a problem helps clients to perceive their reality more clearly and to gain or experience more control over their reactions to an issue.

Example: Jim, a white college student, complains of being depressed since his girlfriend ended their relationship. He describes his situation as feeling down, hurt, lonely, and unlovable. He shows no clinical signs of depression (e.g., sleeplessness, weight loss, or isolation). Rather, he has taken

on a “mopey” demeanor, looking for all the world like someone who needs to be taken care of. Through counseling, Jim begins to realize that his reaction is similar to how he would respond as a child when his mother would get on his case. Then, he reports, she would start to feel sorry for her effect on him and would try to repair the obviously damaged relationship. In other words, Jim began to understand that his style of dealing with stressful relationships was to manipulate the other person into repairing the damage. In so doing, Jim never had to assume any responsibility either for the initial issue or for the solution to the relationship problem. Thus, his reaction involved feelings, how he explained the problem to himself (as someone else’s doing), his mopey appearance, and how he would manipulate relationships. Through counseling, Jim also began to understand the relationship between his problem resolution style and his resulting behaviors that reflected passivity and inertia. Finally, Jim came to understand that his interactional patterns with his mother were intruding and controlling his relationships with women.

3. Clients acquire new responses to old issues. Many counseling theorists now agree that, for most clients, insight or understanding of problems is not a sufficient counseling outcome. In addition to developing greater understanding of issues, clients also need to acquire more effective ways of responding, verbally and/or behaviorally, to problematic situations. Otherwise, they tend to repeat their ineffective interactional style and fail to make any connection between how they understand their problem and what they do when experiencing their problem.

Example: Maria and Juan see a counselor because of “poor communication” in their marriage. Gradually, they are realizing that part of the problem is that Juan is at work all day in a very intense environment and wants to come home to relax, to sit down with the TV or paper, and to be left alone. Maria, on the other hand, has been at home alone all day with a young child. She seeks out Juan for some adult conversation until he pushes her away. Maria retreats in tears. Although an understanding of the dynamics of this scenario may be useful to both Maria (she might be able to understand that it is not she, personally, whom Juan was rejecting) and to Juan (he, in turn, might realize that Maria had reasonable and understandable needs), it is unlikely that they will be able to alter or interrupt their reentry behavior patterns through understanding alone. They must also develop new behavioral patterns or interactions that will meet each person’s unique end-of-the-day needs.

4. Clients learn how to develop effective relationships. For a significant number of people who end up in a counselor’s office, adults and young people alike, effective and satisfying interpersonal interactions are nonexistent or rare. Because change is often created and enhanced by a social support network, it is essential for clients to begin to develop more adequate relationships with other people. Often, the counseling relationship is the initial vehicle by which this occurs.

Example: Renee comes to see a counselor because she wants to lose a significant amount of weight. In talking to her, the counselor realizes that Renee’s obesity has also shielded her from having significant relationships with other people, particularly males. (Renee may have perceived this as

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having prevented her from having significant relationships.) It is unlikely that Renee will have much success in losing weight unless she also learns to feel more comfortable in initiating and developing a greater social support network.

To summarize, counseling usually results in more than one single, all-inclusive outcome for clients. Effective change is multifaceted and comprehensive, and includes keener understanding of the dynamics of problem sources and maintenance, new insights, different and more facilitative behavioral responses, and more effective interpersonal relationships.

CASE ILLUSTRATION OF POSSIBLE COUNSELING OUTCOMES

The Case of Janet

Janet is a 35-year-old single parent of two teenage girls. She has been employed as a bookkeeper for a local auto parts company for 12 years and is considered to be “the glue that holds the operation together” by her colleagues. Within her work context, Janet feels competent and comfortable. At home, her self-confidence disappears and she has overwhelming doubts about her parenting role and her relationship with neighbors “who see what a bad job I am doing.” These doubts also invade her relationship with her parents, her ex-husband and in-laws, her church, and social relationships. The result is that she has been spending increasing amounts of time in her job, thus accentuating her feelings toward her nonwork world. These feelings seem locked into a downward spiral from which she cannot escape. Lately, she has been experiencing some physical symptoms involving her digestive system, inability to sleep more than four to five hours, and a nagging sense of despair.

Given an effective counseling experience, Janet might realistically expect to see some of the following kinds of change:

- Development of a more positive perception of herself as a parent and adult.
- Increased awareness of the relationship between her satisfying work setting and her overcommitment to time at work rather than at home.
- A more objective (and possibly enhanced) personal view of herself as a mother.
- A more realistic view of how others see her as a single parent and adult.
- Awareness that her physical symptoms might be related to her emotional reactions.
- A plan that would help her extract herself from these various “traps” she is experiencing at work, at home, in her neighborhood, in her church, and in her social relationships.

CHARACTERISTICS OF EFFECTIVE HELPERS

Research on the effectiveness of counseling does not provide clear evidence of the relative contributions of factors that influence counseling (Sexton, Whiston, Bleuer, & Walz, 1997). Nevertheless, the professional literature is consistent in its emphasis on counselor characteristics as important to the success of counseling. Among the characteristics that are considered important are

- Self-awareness and understanding
- Good psychological health
- Sensitivity to and understanding of racial, ethnic, and cultural factors in self and others
- Open-mindedness

- Objectivity
- Competence
- Trustworthiness
- Interpersonal attractiveness
- Ethical behavior

Other characteristics that have been identified include the ability to be empathic, genuine, and accepting (Neukrug, 2007); belief in the personal meaning of another person (Combs, 1986); power (Cormier, Nurius, & Osborn, 2009); and striving for internality (Neukrug, 2007).

Self-Awareness and Understanding

On the road to becoming an effective counselor, a good starting place for most counselors is a healthy degree of introspection and self-exploration. We suggest you might examine and seek to understand the following four specific areas:

1. Awareness of your needs (for example, need to give or to nurture, need to be critical, need to be loved, need to be respected, need to be liked, need to please others, need to receive approval from others, need to be right, need for control)
2. Awareness of your motivation for helping (for example, what do you get or take from helping others? How does helping make you feel good?)
3. Awareness of your feelings (for example, happiness, satisfaction, hurt, anger, sadness, disappointment, confusion, fear)
4. Awareness of your personal strengths, limitations, and coping skills (for example, things you do well or things about yourself that you like, things about yourself you need to work on, how you handle difficulties and stress)

Self-awareness and understanding are important in counseling for a variety of reasons. First, they help you see things more objectively and avoid “blind spots”—that is, difficulties that may arise because you do not understand some aspects of yourself, particularly in interpersonal interactions. One such difficulty is projection. Counselors who do not understand their needs and feelings may be more likely to project their feelings onto the client and not recognize their real source (for example, “I had a very angry client today” instead of “I felt angry today with my client”). Projection is one example of a process we discuss later in this chapter called countertransference, or the emotional reactions of the counselor to the client.

Self-awareness and understanding also contribute to greater security and safety for both counselor and client. Lack of self-awareness and understanding may cause some counselors to personalize or overreact to client messages and respond with defensiveness. For example, a client questions whether counseling “will do her any good.” The counselor’s need to be respected and approved of are jeopardized or threatened, but the counselor is not aware of this. Instead of responding to the client’s feelings of uncertainty, the counselor is likely to respond with personal feelings of insecurity and portray defensiveness in his or her voice or to portray other nonverbal behavior.

Good Psychological Health

Although no one expects counselors to be perfect, it stands to reason that counselors will be more helpful to clients when they are psychologically intact and not distracted by their own overwhelming problems. In a classic study of the psychological health of mental health providers, White and

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Franzoni (1990) reported that studies of the psychological health of psychiatrists, psychologists, and psychotherapists in general reveal higher rates of depression, anxiety, and relationship problems than the general population. Even those counselors-in-training at the master's degree level showed evidence of higher levels of psychological disturbance than did the general public (White & Franzoni, 1990, p. 262).

Unfortunately, some counselors do not recognize when their own psychological health is marginal, or they realize it but continue to counsel anyway, often using counseling as a defense mechanism to reduce the anxiety they feel about their own issues. At selected times in their lives, counselors may need to refer clients with similar life problems to other counselors and/or seek out the services of a competent counselor for themselves.

Sensitivity to and Understanding of Racial, Ethnic, and Cultural Factors in Self and Others

Many clients live in two worlds, the world of their cultural and racial-ethnic heritage and the world of their reality. In recent years, the counseling profession has begun to act on this awareness and examine its implications for clients, counselors, and the counseling process. As society has become more multicultural, people have begun to understand the oversimplifications of earlier worldviews. Even counseling theory (e.g., Rogerian theory, psychodynamic theory, and cognitive-behavioral theory) tends to reflect an individual worldview with minimal attention to contextual issues (Ivey et al., 2007).

Where culture and ethnicity once were defined in terms of race, there is increasing emphasis on viewing ethnic variations within race and variations within ethnicity as shapers of one's reality. We have already noted that good psychological health allows the counselor to be more helpful to clients. It is just as true that awareness of one's own ethnic and cultural heritage and how that heritage shapes one's worldview contributes to one's effectiveness as a counselor.

There are two views of how counselors should be aware of their own and their clients' cultural and ethnic contexts. These are referred to as *etic*, or focused culture-specific, and *emic*, or universal, approaches. The focused culture-specific approach holds that all cultures are unique and must be understood for their uniqueness. The universal approach argues for a more subjective or inclusive understanding of how culture affects the counseling process by broadening the definition of *minority* to include all oppressed groups (Atkinson & Hackett, 1998). Concerns have been raised that the inclusivity of the universal approach (taking into account variables such as gender, sexual orientation, physical disabilities, etc.) could make the concept of multiculturalism less clear or even meaningless. Proponents of the universal approach believe that culture is defined by more than racial or ethnic factors alone. Others (Ivey et al., 2007) believe that both the universal and the focused cultural-specific approaches are important and can be found in the blended theory approach called multicultural counseling and therapy (MCT).

Open-Mindedness

Open-mindedness suggests freedom from fixed or preconceived ideas that, if allowed expression, could affect clients and counseling outcomes. Open-mindedness must include enlightenment and knowledge of the world outside the counselor's world. It must also include an acute understanding of one's inner world and how those internal standards, values, assumptions, perceptions, and myths can be projected on clients if the counselor is not vigilant.

Open-mindedness serves a number of significant functions in counseling. First, it allows counselors to accommodate clients' feelings, attitudes, and behaviors that may be different from their own. Second, it allows counselors to interact effectively with a wide range of clients, even those regarded by society at large as unacceptable or offensive. Finally, open-mindedness is a prerequisite for honest communication.

Objectivity

Objectivity refers to the ability to be involved with a client and, at the same time, stand back and see accurately what is happening with the client and in the relationship. It has also been described as a component of empathy—the ability to see the client's problem as if it were your own while maintaining personal distance (Rogers, 1957). It is extremely important to maintain objectivity for the client's benefit. Most clients are bombarded with views and advice from many well-meaning persons, such as friends and family, who are also part of the problem and thus are not objective. Counselor objectivity gives the client an additional set of eyes and ears that are needed to develop a greater understanding or a new perception of (or reframe) the issue.

Objectivity also helps the counselor avoid getting caught up in certain client behaviors or dysfunctional communication patterns. For example, clients sometimes try to manipulate the counselor to “rescue” them, using a variety of well-learned and sophisticated ploys. Counselors who remain objective are more likely to recognize client manipulation for what it is and respond with therapeutic appropriateness. It must sound like a contradiction to ask you to be both empathic and involved with your clients and, at the same time, be objective. Clearly, we are asking for an involved and caring objectivity.

Also, objectivity acts as a safeguard against developing inappropriate or even dysfunctional emotional feelings about or toward a client. Counselors must learn to recognize when countertransference develops in the relationship. As we mentioned earlier, countertransference involves either a counterproductive emotional reaction to a client (often based on projection) or the entanglement of the counselor's needs in the therapeutic relationship. Some of the more common ways in which countertransference may manifest itself include the need to please one's clients, overidentification with certain client problems, development of romantic or sexual feelings toward clients, need to give constant advice, and a desire to form friendships with clients (Corey, 2011). Astute counselors gradually learn to identify certain kinds of clients who consistently elicit strong positive or negative feelings on their part and also certain kinds of communication patterns that entice the counselor into giving a less objective and nonhelpful response.

Competence

Ethical standards of all mental health professions call for maintaining high standards of competence. According to Egan (2010), *competence* refers to whether the counselor has the necessary information, knowledge, and skills to be of help and is determined not by behaviors but by outcomes. The profession generally agrees that counseling competency includes knowledge in areas such as psychological processes, assessment, ethics, and other areas relevant to professional work, as well as clinical skills, technical skills, judgment, and personal effectiveness. And, of course, competence also includes multicultural competence, which we have already discussed.

Counselor competence is necessary to transmit and build confidence and hope in clients. Clients need to develop positive expectations about the potential usefulness to them of the coun-

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seling experience. Competent counselors are able to work with a greater variety of clients and a wider range of problems. They are more likely to be of benefit to their clients and to make inroads more quickly and efficiently. Sometimes referred to as expertness, competence is often associated with a model of counseling known as the social influence model. The two basic assumptions of this model are:

1. The helper must establish a power or a base of influence with the client through a relationship comprising three characteristics or relationship enhancers: competence (expertness), trustworthiness (credibility), and attractiveness (liking).
2. The helper must actively use this base of influence to effect opinion and behavior changes in the client.

An increasing amount of evidence on this model suggests that clients' respect for the counselor increases in direct proportion to their perceptions of the counselor's expertness or competence.

Trustworthiness

Counselor trustworthiness includes qualities such as reliability, responsibility, ethical standards, and predictability. Trust can be hard to establish, and it can be destroyed by a single action and in a brief moment. Counselors who are trustworthy safeguard their clients' communications, respond with energy and dynamism to client concerns, and never let their clients regret having shared information. The essence of trustworthiness can be summarized in one sentence: Do not promise more than you can do, and be sure you do exactly as you have promised. Trustworthiness is essential, not only in establishing a base of influence with clients, but also in encouraging clients to self-disclose and reveal often very private parts of their lives. Counselors cannot act trustworthy; they must *be* trustworthy.

Interpersonal Attractiveness

Clients perceive counselors as interpersonally attractive when they see them as similar to or compatible with themselves. Clients often make this assessment intuitively although it is probably based on selected dimensions of counselors' demeanor and attitude, particularly their likability and friendliness. In other words, it is helpful to be down to earth, friendly, and warm rather than formal, stuffy, aloof, or reserved. Interpersonal attractiveness can be influenced by race and gender factors, too. However, a counselor's worldview is probably of greater importance than either race or gender. Counselors who are perceived as interpersonally attractive become an important source of influence for clients and may also inspire greater confidence and trust in the counseling process.

Perhaps the most important point we should make about the qualities of effective helpers involves awareness and growth. Few beginning helpers will feel prepared, either technically or personally, to begin working with clients. In part, this is a matter of developing self-confidence in the new skills that have been learned. But it is also associated with their personal growth as human beings. Experienced counselors find that they learn much about themselves and about the process of living through their work with clients. We have certainly found that to be true in our own experience. Each new client introduces us to ourselves in another way. Very often, that experience reveals aspects of our own life adjustment that merit attention and exploration. When this happens, we become increasingly aware of both our strengths and our limitations. It is around those personal strengths that effective counselors

build their approach to helping. And it is around those personal limitations that effective counselors attempt to structure growth experiences, with the expectation that the counselors will either reduce their limitations or will attempt to circumscribe their effect on clients and counseling practices.

Ethical Behavior

How the counselor performs under conflicting or challenging conditions affects all of the other conditions. But what determines ethical behavior? The American Counseling Association has established guidelines for ethical counselor performance in a variety of settings and under a broad spectrum of problem situations. Ethical behavior is primarily a self-determined adherence to these standards. However, there are conditions in which failure to perform ethically could lead to malpractice and lawsuits. The ACA Ethical Standards may be found and downloaded at the American Counseling Association's website: www.counseling.org.

THE DEVELOPMENTAL NATURE OF LEARNING TO COUNSEL

Over the years, counselor educators have participated in a recurring debate regarding the experience of learning to counsel. The two poles of this debate are (1) that potential counselors already possess the “skills” of counseling but must learn how to differentiate these skills and use them selectively with clients and (2) that the skills of counseling have been rather specifically defined and can be taught to potential counselors with a reasonably high degree of success, whether or not they possessed the skills initially. Obviously, most counselor preparation programs fall somewhere between these two poles. But regardless of the source of those skills, whether they are inherent in the candidate's personhood or are imbedded in the curriculum of the preparation program (or both), the process of bringing them into dominance is worthy of attention.

Almost everyone has known someone who was untrained and yet was a natural counselor. In getting to know such people, one often finds that they assumed the helper role as children. They may even have been identified by their families as the peacemaker, the facilitator, the understanding one, or the one to whom other family members could turn. Such a role emerges both from temperament and from expectations. Such helpers evolve into the role as their sensitivities, skills, and confidence grow over time. Similarly, students entering counselor preparation programs find that the process is a developmental experience. That is to say, early in the training, the focus tends to be on professional issues external to the person and the context for helping. Gradually, the focus of preparation turns to the personal qualities of helpers, and the process then becomes more personal. From this, attention turns to the skills of counseling—what effective counselors are doing and thinking as they work with clients. Finally, preparation begins to integrate these skills with the practical experience of counseling clients in professionally supervised settings.

Beyond these anticipated changes lie the personal changes that will take place within you. Counseling scholars have identified these changes as (1) personal issues that arise and must be addressed; (2) conflicts between personal values and professional role demands, which sometimes are resolved by deciding not to become a counselor; (3) being in constant change during the learning process; and (4) becoming viewed differently by your circle of friends as you take on the identity of professional helper.

Summary

In this chapter, our aim has been to describe the various parameters of the counseling process; to relate the process to counseling theory, philosophy, and culture; to illustrate the purposes of effective counseling; and to highlight the major personal characteristics of effective counselors. The counseling relationship has certain features that set it apart from other professional or social relationships or even friendships. One of the most significant features of the counseling relationship is that the counselor is a trained professional capable of providing assistance in a competent and trustworthy manner.

In Chapter 2 we will examine the skills of counseling. These include the basic skills of communication that occur intentionally or unintention-

ally between counselor and client, and the more advanced verbal and nonverbal skills that the counselor uses as interventions into the process and the client's experience.

Then, in Chapter 3, we take a more focused look at the landscape of the counseling process. Subsequent chapters examine portions of this landscape in greater detail. The larger intentions of this book are to provide the skills dimension of the learning process and to offer some structure for the implicit and explicit interactional nature of these skills. Each chapter will conclude with suggested exercises as well as discussion questions to assist your integration of the content. A list of additional resources will allow you to explore certain topics in greater depth.

Exercises

I. Purposes and Goals of Counseling

Two client case descriptions are presented in this activity. Based on the case description for each client, identify possible counseling outcomes that also appear feasible and realistic. You may wish to share your responses with your instructor or another student.

- A. Ben is in his early fifties. He has been fairly happily married for 25 years and has two grown children. Ben has run a successful business for the past 20 years; however, his business took a nosedive due to the 2008 recession. He had to lay off several employees and take a 50% reduction in his own salary. Going to work each morning has become a punishing experience because each day seems to bring only more bad news. Ben is very nervous about his ability to hold on to the company and his marriage during this stressful time.
- B. Margaret is an older woman (in her late seventies). Her hearing has begun to deteriorate and she finds that often she must ask people to repeat themselves when they speak to her. She has also had a couple of bad falls in the past year, one of which resulted in a severe back sprain. Margaret lives alone in a two-room apartment and receives only a Social Security

check. She has no means of transportation other than public transportation. She often complains of loneliness and boredom.

II. Qualities of Effective Counselors

Listed here are the eight qualities of effective counselors described in this chapter. With a partner or in a small group, discuss what you believe is your present status with respect to each quality. For example, how open-minded are you? What makes it easy (or difficult) for you to be open-minded and relatively tolerant of different values and ideas? Then identify several areas that you may need to work on during your development as a counselor. Refer to the case description about Margaret in I.B. above. Which factors do you believe would have the greatest impact on Margaret's psychological health?

- A. Self-awareness and understanding
- B. Good psychological health
- C. Sensitivity to and understanding of racial, ethnic, and cultural factors in self and others
- D. Open-mindedness
- E. Objectivity
- F. Competence
- G. Trustworthiness
- H. Interpersonal attractiveness

Discussion Questions

1. Counseling has been described by some as a “purchase of friendship.” Do you agree with this statement? How do you believe counseling differs from a close friendship?
2. Do you know someone who possesses the qualities to be an effective counselor? What are some of this person’s qualities? How do you suppose these qualities were acquired?
3. Considering your age, background, racial/ethnic heritage, and life experiences, what do you think you have to offer to clients that is different from what they would receive from their friends or family members?
4. What are the most important reasons why you want to be a counselor? How might a typical client react to your reasons for choosing counseling as a career?
5. How likely are you to see a counselor yourself? In what ways do you think counseling could help you in your own development as a person and as a counselor? For which reasons might you resist getting involved in this experience?