

## **Chapter Four**

### **An overview of Counseling Theories**

A theoretical approach presents a single position regarding the theory and practice of counselling and therapy. A school of counselling and therapy is a grouping of different theoretical approaches that are similar to one another in terms of certain important characteristics that distinguish them from theoretical approaches in other counselling and therapy schools. Probably the three main schools influencing contemporary individual counselling and psychotherapy practice are the psychodynamic school, the humanistic school, and the cognitive-behaviour school. Sometimes the humanistic school incorporates existential therapeutic approaches and then can get the broader title of being the humanistic-existential school. A fourth school, the postmodern school, comprises some more recent approaches. Be careful not to exaggerate the differences between counselling and therapy schools, since there are similarities as well as differences among them.

#### **1.1. The psychodynamic school**

Psychodynamic approaches emphasize the importance of unconscious influences on how people function. Therapy aims to increase clients' abilities to exercise greater conscious control over their lives. Analysis or interpretation of dreams can be a central part of therapy.

The proponents of psychoanalytic perspectives believed that behaviour is motivated by inner forces and conflicts that the individual has little or no awareness and control. These hidden forces, shaped by childhood experiences, play an important role in energizing and directing our everyday behaviour (Robert S, Feldman, 1997 pp. 373). The Freudian view of human nature is deterministic. According to Freud, our behaviour is determined by irrational forces, unconscious motivation and biological and instinctual drives as these evolve through key psychosexual stages in the first six years of life (Gerald Corey, 2009 p. 61)

#### **Goals of counseling**

Two goals of Freudian psychoanalytic therapy are to make the unconscious conscious and to strengthen the ego so that behaviour is based more on reality and less on instinctual cravings or irrational guilt. Successful analysis is believed to result in significant modification of the

individual's personality and character structure. Therapeutic methods are used to bring out unconscious material. Then childhood experiences are reconstructed, discussed, interpreted, and analysed. It is clear that the process is not limited to solving problems and learning new behaviours. Rather, there is a deeper probing into the past to develop the level of self-understanding that is assumed to be necessary for a change in character. Psychoanalytic therapy is oriented toward achieving insight, but not just an intellectual understanding; it is essential that the feelings and memories associated with this self-understanding be experienced.

### **Counselling techniques**

- Free association
- Dream analysis
- Hypnosis
- Use of slip of tongue

### **1.2. Behavioural Theory**

Is geared toward targeting specific symptoms. The therapist usually proposes certain actions to change certain behaviours. It is best suited to treat phobias and unwanted habits like smoking. It includes techniques employing Ivan Pavlov's classical conditioning, John B. Watson's experimental methods, and B.F. Skinner's who operant conditioning.

Behavioural therapies differ dramatically from psychodynamic and humanistic therapies. Behavioural therapists do not explore an individual's thoughts, feelings, dreams, or past experiences. Rather, they focus on the behaviour that is causing distress for their clients. They believe that behaviour of all kinds, both normal and abnormal, is the product of learning. By applying the principles of learning, they help individuals replace distressing behaviours with more appropriate ones.

Typical problems treated with behavioural therapy include alcohol or drug addiction, phobias (such as a fear of heights), and anxiety. Modern behavioural therapists work with other problems, such as depression, by having clients develop specific behavioural goals—such as returning to work, talking with others, or cooking a meal. Because behavioural therapy can work through nonverbal means, it can also help people who would not respond to other forms of therapy. For example, behavioural therapists can teach social and self-care skills to children with

severe learning disabilities and to individuals with schizophrenia who are out of touch with reality.

Behavioural therapists begin treatment by finding out as much as they can about the client's problem and the circumstances surrounding it. They do not infer causes or look for hidden meanings, but rather focus on observable and measurable behaviours. Therapists may use a number of specific techniques to alter behaviour. These techniques include relaxation training, systematic desensitization, exposure and response prevention, aversive conditioning, and social skills training.

### **Counselling Goals**

The goal of behaviourists counsellors like other theories is to improve the life of the client through better adjustments to life and to achieve personal goals professionally and personally.

Four steps in developing therapeutic goals are:-

- i. Define the problem concretely specifying when, where, how and with whom the problem exists.
- ii. Take a developmental history of the problem eliciting conditions surrounding the beginning of the problem and what solutions the client has tried in the past.
- iii. Establish specific sub goals in small incremental steps toward the final goal.
- iv. Determine the best behavioural method to be used help the client change.

### **Counselling Goals**

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Four steps in developing therapeutic goals are:-

- v. Define the problem concretely specifying when, where, how and with whom the problem exists.
- vi. Take a developmental history of the problem eliciting conditions surrounding the beginning of the problem and what solutions the client has tried in the past.
- vii. Establish specific sub goals in small incremental steps toward the final goal.
- viii. Determine the best behavioural method to be used help the client change.

## **Counselling Techniques**

- Relaxation Training
- Systematic desensitization
- Exposure therapy
- Aversive conditioning
- Social skills training

### **1.3. Cognitive Theory**

Is geared toward providing help to enable people change their way of thinking and correct their distorted thinking. Cognitive therapy seeks to identify and change "distorted" or "unrealistic" ways of thinking, and therefore to influence emotion and behaviour. It includes Aaron T. Beck's ABC in which his clients perceived and interpreted and attributed meaning—a process known scientifically as cognition—in their daily lives was a key to therapy.

Cognitive therapy, a system developed by Aaron Beck, stresses the importance of belief systems and thinking in determining behaviour and feelings. The focus of cognitive therapy is on understanding distorted beliefs and using techniques to change maladaptive thinking while also incorporating affective and behavioural methods. In the therapeutic process, attention is paid to thoughts that individuals may be unaware of and to important belief systems.

Working collaboratively with clients, cognitive therapists take an educational role, helping clients understand distorted beliefs and suggesting methods for changing these beliefs. In doing so, cognitive therapists may give clients assignments to test out new alternatives to their old ways of solving their problems. As the therapist gathers data to determine therapeutic strategies, clients may be asked to record dysfunctional thoughts and to assess their problems through brief questionnaires developed for a variety of different psychological disorders. In their approach to treatment, cognitive therapists have outlined types of maladaptive thinking and specific treatment strategies for many psychological disturbances, including depression and anxiety disorders.

Cognitive therapies are similar to behavioural therapies in that they focus on specific problems. However, they emphasize changing beliefs and thoughts, rather than observable behaviours. Cognitive therapists believe that irrational beliefs or distorted thinking patterns can cause a

variety of serious problems, including depression and chronic anxiety. They try to teach people to think in more rational, constructive ways.

### **Goals of Therapy**

The basic goal of cognitive therapy is to remove biases or distortions in thinking so that individuals may function more effectively. Attention is paid to the way individuals' process information, which may maintain feelings and behaviours that are not adaptive. Patients' cognitive distortions are challenged, tested, and discussed to bring about more positive feelings, behaviours, and thinking. To remove biases or distortions in thinking, therapists attend not just to automatic thoughts but also to the cognitive schemas that they represent. Thus, changing cognitive schemas is an important goal of cognitive therapy.

### **The cognitive behaviour school**

Traditional behaviour therapy focuses mainly on changing observable behaviours by means of providing different or rewarding consequences. The cognitive behaviour school broadens behaviour therapy to incorporate the contribution of how people think to creating, sustaining and changing their problems. In cognitive behaviour approaches, therapists assess clients and then intervene to help them to change specific ways of thinking and behaving that sustain their problems.

Cognitive behaviour therapy, which combines both cognitive and behavioural principles and methods in a short-term treatment approach, has generated more empirical research than any other psychotherapy model. Even though, the cognitive behavioural approaches are quite diverse, they do share these attributes:

- ψ a collaborative relationship between client and therapist,
- ψ the premise that psychological distress is largely a function of disturbances in cognitive processes,
- ψ a focus on changing cognitions to produce desired changes in affect and behaviour, &
- ψ a generally time-limited and educational treatment focusing on specific and structured target problems.

All of the cognitive behavioural therapies are based on a structured psycho educational model, emphasize the role of homework, place responsibility on the client to assume an active role both

during and outside of the therapy sessions, and draw from a variety of cognitive and behavioural strategies to bring about change.

To a large degree, cognitive behaviour therapy is based on the assumption that a reorganization of one's self-statements will result in a corresponding reorganization of one's behaviour. Behavioural techniques such as operant conditioning, modelling, and behavioural rehearsal can also be applied to the more subjective processes of thinking and internal dialogue. The cognitive behavioural approaches include a variety of behavioural strategies as a part of their integrative repertoire.

There are almost no pure cognitive or behavioural therapists. Usually therapists combine cognitive and behavioural techniques in an approach known as *cognitive-behavioural therapy*. For example, to treat a woman with depression, a therapist may help her identify irrational thinking patterns that cause the distressing feelings and to replace these irrational thoughts with new ways of thinking. The therapist may also train her in relaxation techniques and have her try new behaviours that help her become more active and less depressed. The client then reports the results back to the therapist.

Cognitive-behavioural therapy has rapidly become one of the most popular and influential forms of psychotherapy, in part because it takes a relatively short period of time compared to humanistic and psychoanalytic therapies, and also because of its ability to treat a wide range of problems. Sometimes cognitive-behavioural therapy takes only a few sessions, but more often it extends for 20 or 30 sessions over four to six months. The length of therapy usually depends on the severity and number of the client's problems.

#### **1.4. The humanistic school**

The humanistic school is based on humanism, a system of values and beliefs that emphasizes the better qualities of humankind and people's abilities to develop their human potential. Humanistic therapists emphasize enhancing clients' abilities to experience their feelings and think and act in harmony with their underlying tendencies to actualize themselves as unique individuals.