What is counselling and helping?

that I wish to define. Anybody who provides a service – including shopkeepers, electricians and plumbers – could be regarded as helpers. However, such people are much less likely to be regarded as counsellors. The word ‘helper’ also has connotations of placing the recipients of help in a dependent position. The helper may be doing things to or for the persons being helped rather than with him or her. In addition, the word ‘helper’ obscures the idea of self-help that I want to emphasize. The purpose of counselling and helping is to assist people to become their own best helpers. Throughout the book the term client is used for recipients of both counselling and helping.

What is counselling?

The term ‘counselling’ is used in a number of ways. One dimension, already discussed, is related to the people who counsel. Other considerations for defining counselling include viewing it as a relationship, a repertoire of interventions, a psychological process, and in terms of its goals and clienteles.

Counselling as a relationship

Virtually all counsellors agree that a good counselling relationship is necessary to be effective with clients. Some counsellors regard the counselling relationship as not only necessary, but sufficient for constructive changes to occur in clients (Rogers, 1957). One way to define counselling involves stipulating central qualities of good counselling relationships. Suffice it for now to say that these counsellor-offered qualities, sometimes called the ‘core conditions’, are empathic understanding, respect and acceptance for clients’ current states of being, and congruence or genuineness. Terms like ‘active listening’ and ‘rewarding listening’ are other ways of expressing the central skills of the basic counselling or helping relationship. Those viewing counselling predominantly as a helping relationship tend to be adherents of the theory and practice of person-centred counselling (Rogers, 1961; Raskin and Rogers, 2005).

Counselling as a repertoire of interventions

Most counsellors would regard the counselling relationship as neither sufficient in itself nor sufficiently expeditious in its outcome for constructive client changes to occur. Consequently, they set store by a set of interventions in addition to the counselling relationship. Alternative terms for interventions are counselling methods or helping strategies.
Counsellors who deploy a repertoire of interventions need to consider carefully which interventions to use, with which clients, and with what probability of success. Counsellors' repertoires of interventions reflect their theoretical orientations: for instance, psychoanalytic counsellors use psychoanalytic interventions, rational emotive behaviour counsellors use rational emotive behaviour interventions, and Gestalt counsellors use Gestalt interventions. Some counsellors are eclectic and use interventions derived from a variety of theoretical positions. Corsini has come to believe that what counts in psychotherapy is who does it and how and to whom it is done, what he calls the 'who-who-whom factor' (Corsini, 2005). He suggests that counsellor personality and counsellor-client match are also important, along with specific interventions.

**Counselling as a psychological process**

In this book the word counselling is used as a shorthand version of the term psychological counselling. Whether viewed either as a relationship characterized by the core conditions or as a repertoire of interventions derived from different theoretical positions, counselling is a psychological process. There are various reasons for the fundamental association between psychology and counselling. The goals of counselling have a mind component in them. In varying degrees, all counselling approaches focus on altering how people feel, think and act so that they may live their lives more effectively. So the process of counselling is psychological. Counselling is not static, but involves movement between and within the minds of both counsellors and clients. In addition, much of the process of counselling takes place within clients' minds between sessions and when clients help themselves after counselling ends. The underlying theories from which counselling goals and interventions are derived are psychological (Corsini and Wedding, 2005; Dryden, 2002; Nelson-Jones, 2001). Many leading counselling theorists have been psychologists: Rogers and Ellis are important examples. Most of the other leading theorists have been psychiatrists: for instance, Beck and Berne. Finally, psychological research contributes both to creating counselling theories and to evaluating counselling processes and outcomes.

**Goals and clienteles for counselling**

Counsellors may have different goals with different clients. They may assist clients, for instance, to heal past emotional deprivations, manage current problems, handle transitions, make decisions, manage crises, and develop specific lifeskills. Sometimes goals for counselling are divided
What is counselling and helping?

between remedial goals and growth or developmental goals. However, the dividing line between remedying weaknesses and developing strengths is often unclear. Attaining both remedial and developmental goals can have a preventive function in helping clients to avoid future difficulties.

Though much counselling is remedial, its main focus is likely to be on the skills or lifeskills needed for satisfactorily handling the developmental tasks which confront most ordinary people rather than on the needs of the more severely disturbed minority. Developmental tasks are tasks which most people inevitably face at various stages of their life: for instance, becoming independent, achieving intimacy, raising children, and adjusting to old age. Developmental tasks often involve both managing negative qualities and fostering positive qualities.

At its highest level counselling's focus is on helping clients to develop skills or lifeskills in ways that assist their process of being fully human (Nelson-Jones, 2004). Maslow's description of the characteristics of self-actualizing people represents an attempt to state goals positively (Maslow, 1970). His self-actualizing characteristics include creativity, autonomy, social interest and problem-centredness. Other characteristics of the fully mature human being include demonstrating high levels of goodwill, compassion, generosity and service.

Whatever the theoretical position, counselling goals emphasize increasing clients' personal responsibility for creating and ordering their lives. Clients need to make choices that enable them to feel, think and act effectively. They require the capacity to experience and express feelings, think rationally and to take effective action to attain their goals. Counsellors tend to be most effective when they enable clients to help themselves after counselling has ended. Thus the ultimate goal of counselling is self-helping, so that former clients become their own best counsellors.

What is the lifeskills counselling approach?

The theoretical model underlying this book is cognitive humanistic. Elsewhere, in *Cognitive Humanistic Therapy*, I have presented the idea that counselling and therapy can be thought of as consisting of two broad areas: adaptation CHT and mental cultivation CHT (Nelson-Jones, 2004). Adaptation CHT aims to help moderately to slightly impaired clients to attain the mind skills and communication/action skills they need so that they can function comfortably in their societies. Such adaptation assumes that the societies are not themselves pathologically
dysfunctional in terms of Western society’s norms. Mental cultivation CHT aims to help clients and others to attain higher levels of functioning that go beyond the norms. Some important goals for mental cultivation CHT, for instance demonstrating high levels of compassion, generosity and service, were mentioned in the previous section. Though there is overlap between adaptation CHT and mental cultivation CHT, it is appropriate for a textbook such as this one to focus primarily on adaptation CHT. Readers who are interested in mental cultivation CHT are referred to *Cognitive Humanistic Therapy*, which mainly deals with higher levels of counselling.

**Why focus on client skills?**

The goals of the adaptation CHT can include providing emotional support, managing specific problem situations better, managing problems, and improving poor skills that sustain problems. In many instances, counsellors aim to attain all four goals with the same client. Adaptation CHT is appropriate for the kinds of problems that form much of the caseload of counsellors. Concerns involving feelings and physical reactions include being depressed, anxious, confused, stressed, tense, and dealing with conditions such as heart attacks or cancer. Possibly most clients come to counsellors because of relationship difficulties including shyness, difficulty in showing affection or managing anger, and conflicts with partners. Many clients also come with work-related concerns including procrastination, public speaking anxiety, problems relating to colleagues and customers, inappropriate risk-taking behaviour, dealing with negative performance appraisals, stresses attached to managerial, supervisory and sales roles, and sexual harassment.

There are at least two important ways that goals may be stated for adaptation CHT concerns. One way is to state them as overall or outcome goals. For example, the overall or outcome goal for a client who seriously procrastinates over work or study assignments is to do this much less often. Counsellor and client could work together to define how to measure the outcome of procrastinating less. Another way is to state the concerns as process, skills or lifeskills goals. For example, ‘What are the mind skills and the communication/action skills that the client needs to foster in order to start work/study assignments more quickly?’ These two ways of stating goals are both important. Overall or outcome goals indicate where clients want to go, whereas process or lifeskills goals indicate how clients can attain their overall goals both now and in future.

Most approaches to counselling and therapy focus more on counsellor skills than client skills. In fact, they rarely acknowledge that the role of...
the counsellor is to build client skills. Even in the cognitive-behavioural approaches, the concept of skills tends to be mainly reserved for behavioural aspects of social skills. Nevertheless, there are good reasons for thinking of counsellors building and helping clients to maintain their skills. First, it can encourage greater specificity as to the skills that humans require to live effectively. Any listing of such skills inevitably includes developing mind skills as well as communication/action skills. This enables counsellors and clients to assess what poor mind skills and/or communication/action skills sustain clients’ difficulties. Counsellors and clients can then work on improving specific skills. The notion of skills implies that individuals need to assume responsibility for maintaining them after counselling. Accordingly, this can be a feature of work during counselling and a continuing challenge for former clients once regular counselling ceases.

Process of counselling

All major approaches to the practice of counselling have the idea of process or progression built into them. A counselling process model is one that explicitly rather than implicitly articulates the stages of the counselling and therapy process. Adaptation CHT is structured around the lifeskills counselling model that is described more fully in the remainder of the book. The lifeskills counselling model has three major stages — relating, understanding and changing — each of which is divided into three phases. The model provides a framework or set of guidelines for counsellor choices. The lifeskills counselling model is useful not only for managing or solving problems but also for addressing underlying problematic skills.

An early version of a process model was that of Carl Jung, who cited four stages of analytical therapy: confession, elucidation, education and transformation (Jung, 1966). However, for the most part, the major theorists have refrained from stating the practice of their counselling and therapy approaches in clearly numbered stages. Nevertheless models of the counselling process abound (for instance, Carkhuff, 1987; Corey and Corey, 2003; Egan, 2002). An important point about these psychotherapy and counselling process models is that, in the main, they apply the concept of learning and using skills to counsellors rather than to clients. These problem management models may insuffiently address the task of helping clients to improve their skills for preventing and managing similar problems.

If we are to have skilled counsellors, why not have skilled clients too? It is inconsistent to teach and learn about counselling skills and then insufficiently to acknowledge that thinking about clients and their
problems in skills terms can be equally useful. In the final analysis the purpose of using counselling skills is to enable clients to become more skilled in their own right. Whether explicitly acknowledged or not, arguably all positive changes from counselling involve clients in learning and using better skills. Counsellors are only skilled to the extent that they can be successful in skilling clients.

The lifeskills counsellor

Clients are much more likely to become skilled in specific ways and as human beings if they work with skilled counsellors. Lifeskills counsellors hold humanistic values either within or outside of religious frameworks (Kelly, 1995). These values include respect for each individual, acknowledgement of human fallibility, belief in human educability, belief in the human potential for reason and social living, and a sincere desire for a better world. Furthermore lifeskills counsellors subscribe to a theoretical framework that integrates elements of existential-humanistic and cognitive-behavioural psychology.

Lifeskills counsellors are practitioner-researchers who constantly make, implement and evaluate hypotheses about helping clients change. At least four sources of knowledge enlighten and inspire their counselling. First they attend to theoretical knowledge. Their underlying theoretical framework requires continuous updating in light of new knowledge about human development and change. Second, lifeskills counsellors endeavour to keep abreast of relevant research findings into the processes and outcomes of counselling. When working in a speciality area, for example career counselling or marriage and family counselling, they focus on pertinent research literature. Third, lifeskills counsellors continue to learn from their practical counselling experience. They actively seek to counsel more effectively by evaluating their counselling and, where necessary, modifying what they do. Fourth, lifeskills counsellors are alive and vibrant human beings who learn from personal experience outside of counselling. This is especially important for counsellors operating within a framework that assumes that fundamentally both counsellors and clients require the same skills of living. Counsellors who can acquire, maintain and develop good mind skills and communication/action skills are likely to be better placed to help clients.

Lifeskills counsellors are developmental educators. Taking into account the state of readiness, expectations and skills levels of each client, they flexibly use both relationship and training skills. The focus of counselling includes nurturing and healing vulnerable clients, assisting clients with specific problems and decisions, crisis management work and preventive and developmental lifeskills training. The clientele for counselling is diverse and includes clients who are upstaged, unloved, homeless, marginalised, temporally disabled or grieving.

We train counsellors to attend to what defines their clients, to choose their hypotheses about skilling clients, and to develop the sufficient skills to make what is necessary.

Another important aspect of what defines clients is what they are exceptional at. Counsellors must assess each client's own potential and what can be done for them. Lifeskills counsellors must enable clients to make a rational decision about what they want to be or do.

Lifeskills counsellors are practitioners who are skilled at enabling clients to become skilled in a variety of ways, as well as being skilled counsellors. Lifeskills counsellors are developmental counsellors who work with clients in all areas of life, whether they be personal, occupational or social.
for counselling may be an individual, a group, or an organization. Lifeskills counsellors are always conscious of ways to ‘seed’ or disseminate counselling skills. Furthermore, they realize that sometimes ‘upstream’ counselling focusing on organizational policies, practices and personalities that create and sustain problems may be necessary either instead of or in addition to ‘downstream’ counselling with individuals or groups of clients (Egan and Cowan, 1979).

Within an educational framework, lifeskills counsellors use a range of training interventions focusing on feeling, thinking and action. They tend not to be psychological archaeologists or historians – instead they choose to focus mainly on clients’ present and future. In particular, counsellors collaborate with clients to identify specific poor skills that sustain difficulties. Then counsellors assist clients in shifting the balance from deficiencies to strengths.

Another way of presenting what lifeskills counsellors are is to indicate what they are not. Lifeskills counsellors are no different from other people except that they possess better counselling skills. They still have their own struggles, imperfections and difficulties in affirming their positive potentials. They are not superficial manipulators. They genuinely care for the growth and development of clients. They are neither magicians nor snake-oil doctors promising instant cures. Clients usually come to counselling with long-established poor skills. Counsellors emphasize that relinquishing these and developing good ones requires much work and practice.

Lifeskills counsellors cannot do clients’ work and they discourage dependency. Rather they quietly and sometimes more forcefully challenge clients with their existential responsibility to create their own lives. Lifeskills counsellors do not encourage conformity. They help each client to think through which choices have the highest probability of being best for them in their unique life circumstances. Furthermore lifeskills counsellors do not view themselves as having a monopoly on counselling skills. Many counselling skills are similar to skills needed for other roles such as being a partner, friend, parent or supervisor. In addition, many counselling skills can be used for self-helping. The more people who possess good counselling skills the better.

Introduction to activities

Each chapter in this book contains one or more activities to help readers develop their knowledge and skills. Though it is assumed that readers are learning counselling and helping skills in training groups, this may not always be the case. Nevertheless, they may still want to perform the activities either with a partner or, if possible, on their own. Readers will enhance
the value of this book if they undertake the activities diligently. While practice may not make perfect, it certainly can increase competence.

Trainers and trainees can decide how to proceed with each activity: for instance, whether the activity should be done as a whole group exercise, in threes, pairs, individually or using any combination of these approaches. When doing the activities, all concerned should ensure that no one feels under pressure to reveal any personal information that she or he does not want to. To save repetition, I mention these instructions only once here and not at the start of each activity.

### Activity 1.1 What is counselling?

Either on your own, with a partner, or in a group answer the following questions.

1. What does the term 'counselling' mean to you?
2. How, if at all, might you distinguish counselling from helping?
3. How, if at all, might you distinguish counselling from psychotherapy?
4. What do you view as the goals of counselling?
5. What do you think of applying the concept of skills to clients as well as to counsellors?
6. Critically discuss the idea that counsellors are primarily educators whose role is to develop clients' lifskills.