

# [Personal theory of counseling using a case study](https://assignbuster.com/personal-theory-of-counseling-using-a-case-study/)

The purpose of this paper is to discuss the writer’s personal theory of psychotherapy, which was developed from the amalgamation of aspects of several generally accepted theories. The application of this theory will be done using the case of Stan. According to Prochaska & Norcross (2003), “ psychotherapy is the informed and intentional application of clinical methods and interpersonal stances derived from established psychological principles for the purpose of assisting people modify their behaviours, cognitions, emotions and or other personal characteristics in directions that the participants deem desirable”(p. 4).

In psychotherapy, established psychological principles used by therapist are derived largely from established psychological theories. Norcross (cited in Prochaska & Norcross 2003), defines theory as a consistent perspective on human behaviour, psychopathology, and the mechanism of therapeutic change” (p. 5). According to Boy and Pine (cited in Gladding 2009) psychological theories are used by the psychologist to develop unity and relatedness among diverse existence; develop operational guidelines of how to conduct their work; determining the relevant data and indicators, which will be the focus of attention and assist clients to effectively modify their behavior. In other words, it acts as a guiding blueprint for how psychologists perform their work.

All theories should have some level of empiricalism, however my opinion is that most of the generally accepted theories are heavily influenced by the historical period within which the theorists lived, their family structures, experiences, beliefs and values. It can be said that for a lot of them their experiences were hypotheses that they sought to test and prove in their works.

My theory of psychotherapy was developed on the basis that no one theory totally explains human behavior, psychopathology or therapeutic approach. My psychological disposition is influenced by my experiences, beliefs and values. I consider myself a practical person, who believes in the power of the mind to either empower us or hold us back. In my experience, the past is important in shaping who you are today, however I do not believe it is the only factor. Humans have the capacity to change, and do so constantly, as we adapt to changing situations in our daily lives.

Our social interactions are also an important part of who we are, as we are social beings. My beliefs make me appreciative of Cognitive Behavioural Therapy (CBT) as I share the view that our cognition does affect our emotions and consequently our behaviour. Its related therapeutic approach is also practically based, as it gives clients work to do that will improve functioning in therapy and outside for long term effect (Corey, 2005). CBT approach is very present centered, with very little attention to the past, except for exceptional instances such as lack of change or where the therapist believes an understanding of the past is essential to therapy.

This emphasis on the present in the theory presents a gap and this is where I believe Alderian theory become important in filling that gap. Alderian theory focuses on how a person’s perception of the past and their interpretation of early events continue to have a lasting influence. The details of my personal theory will be presented in three subsections personality, psychopathology and therapeutic approach.

## Theory of Personality

The theory of personality is centered on the belief that human beings by their self determined nature, are the product of biology, social environment including interpersonal relationships and their individual concept of the ideal self (Prochaska & Norcross, 2003). The ideal self represents the picture of the perfect self that each person creates and strives to become throughout their live.

Our striving for perfection/superiority is a reaction to our innate feeling of inferiority which results from organ, psychological or social weakness. These feelings of inferiority drive us to strive for competence and mastery so we can deal more effectively with the world (Corey, 2005). To feel inferior is normal, as it makes us aware of our limitations yet drives us to overcome obstacles. Individuality is characterized by person’s unique methods of striving for competence (Corey, 2005, p. 97). Behavior is driven by our unique lifestyle, which is a cognitive construction of the ideal self that we are striving to become. Our lifestyle consist of our values, perception of self, others and life and accounts for consistency in our actions (Corey, 2005, p. 97).

Persons begin to construct their lifestyle by the age of six out of their childhood experiences. Significant influences during childhood include one’s birth order. The oldest child initially receives a lot of attention when they are the only child. This possibly gives way to resentment and sibling rivalry when other children are added to the family. With the addition of younger children the older child usually has to take on more responsibility and so tends to be responsible and hardworking as an adult. The second child from birth has the experience of sharing the love and affection of parents with another sibling. This results in that child tendency to be competitive (Corey, 2005).

The middle child often feels squeezed out and convinced that life is unfair. They can develop a poor ‘ me attitude’ and become a problem child (Corey, 2005, p. 98). The youngest child is considered the baby of the family and tends to be pampered. An only child shares some of the characteristics of the older child, however they may not learn to share or cooperate with others. Our birth order and our interpretation of the meaning of the position in the family affects how, as adults, we interact in the world. It is from our childhood experiences that we develop our style of relating to others and a view of ourselves.

While our inferiority complex and birth order influences our lifestyle construct, they are not the ultimate determinant of who we are and how we live our lives. The ultimate determinant of our lifestyle is our creative self. This is the subjective power that allows us to translate objectives factors into personally meaningful events (Prochaska & Norcross, 2003). This individual interpretation of experiences prevents us from becoming mere products of biological and social circumstances. This accounts for two persons sharing identical life experiences developing different lifestyles and perfect self.

Our lifestyle/style of life occurs within a social context which reflects our nature as social beings that exist and strive on interpersonal relationships. The importance of interpersonal relationships is seen from how human develop, where newborns are dependent on others for care and survival. Over our lifespan we change from total dependence to independence and interdependence as our relationships with each other changes. Our relational interaction is reflected in our lifestyle/style of life as social interest which is the inherent potential of all persons. Social interest is characteristic of a healthy personality and reflects a sense of identification and empathy with others (Corey, 2005). Social interest is developed through nurturing within a healthy family atmosphere of trust, support and mutual respect. This environment encourages children to reject purely selfish interest for greater social interest of all humanity (Prochaska & Norcross, 2003, p. 69). Additionally, persons must master several universal life tasks such as building friendships (social task), establishing intimacy, contributing to society and getting along with ourselves. Mastery of these life tasks are so important that dysfunction in any one of them is often an indicator of psychological disorder. (Corey, 2005).

## Theory of psychopathology

Abnormal personalities develop when there is a distortion within personality development. This distortion occurs within the cognitive construct of the lifestyle/style of life and the interpretation of our social environment and experiences by the creative self. These affect the perception of the perfect self and our behavior in striving for superiority. The distortion in cognition leads to generalization, overgeneralization, selective abstractions and excessive responsibility thoughts about society, our experiences and ourselves. Different pathologies relate to different cognitive construct and the interpretation of social environment and experiences. Cognitive construct become distorted in hostile or overindulgent family settings, which discourage the ability to obtain superiority and develop social interest (Prochaska & Norcross, 2003).

These social environments lead to personalities that strive for superiority at the expense of others in the following ways: attention seeking, power seeking, revenge taking and defeat. The attention seeking personality develops when children are pampered by their parent. Child who experiences this parenting suffers from feelings of inadequacy in their abilities which leads to an inferiority complex. The inferiority complex develops as persons lack belief in self to overcome, prevents them from striving for superiority and so they believe they are less than others and cannot change. This leads persons to avoid basic life tasks. These persons world view is that they should be taken care of by society regardless of the fact that they are non contributing adults (Prochaska & Norcross, 2003).

Children reared under a dominant parenting style also develop an inferiority complex based on a sense of powerlessness to direct their own life; they feel unable to seek the development of the perfect self. These persons will reject basic life tasks in favour of the goal of seeking power so they will not be dominated again. Persons reared in an abusive environment are likely to want to take revenge on society and seek superiority by aggressing against society. Passive aggressive person’s style of life may be to hurt others through constant inconsiderateness (Prochaska & Norcross, 2003, p. 71). Persons raised with neglect and indifference are likely to declare defeat. They do not expect to succeed and so withdraw from society as their way of demonstrating their superiority.

All of these personalities also use their experiences to draw incorrect conclusions about society and themselves and so develop maladaptive automatic thoughts such as overgeneralising, where one situation is used as the benchmark for any other situation that is even remotely similar or selective abstraction, in which the only measure of self is the failures experienced. Other maladaptive thoughts include excessive responsibility in which persons believe that they are responsible for all bad things or life failures and dichotomous thinking where everything is viewed in extremes.

## Therapeutic Approach

A collaborative therapeutic relationship needs to be developed between the therapist and the client. Through this relationship, the client’s maladaptive thoughts/beliefs, mistaken goals and faulty assumptions are identified. The identification of the thought brings into awareness the thoughts and the resultant impact on behaviour. These thoughts are challenged with the aim of having the client restructure their thought process so that they look at themselves and life in a new way. Additionally, clients that demonstrate lack of mastery of basic life tasks or have an improper way of developing superiority, are reeducated and coached so that they can develop the self confidence and an understanding of purpose of their behavior and a new cognition.

The techniques involve establishing the proper therapeutic relationship and exploring the psychological dynamics operating in the client by gathering life history data such as family constellation and early recollections (Corey, p. 104). Additionally, in teaching clients how to identify, monitor and change automatic self talk, behavioural techniques such as rehearsing, role playing and homework will be used.

## Application to the case of Stan

## History and Presenting Problem

Stan is a 25 year old divorced male. He is currently employed in the construction industry, but has aspirations of going back to school to become a counselor. Currently he lives alone and is not in a committed relationship. Despite being married before, he admits that he is afraid of persons his age or older and is particularly afraid of strong attractive women. He was raised in a nuclear family and was the third of four children. He explained that is mother dominated his father. He felt his mother treated him similarly to how she treated his father and that he was unloved and unwanted in the family. He recalled his mother telling him she wished she never had him.

His parents also made unfavourable comparisons between him and his two older siblings, who were considered perfect and academically brilliant, while his younger brother was pampered and spoiled. Some of his childhood recounts included his mother’s dominance and constantly “ bitching” at his father who never stood up to her. He also recalled his mother telling him he was her biggest mistake, accusing him of hurting her and demanding that he be a man. He recalled been hurt by these words and crying himself to sleep.

Stan stated that his marriage was brief and that his wife had left him because she could not stand to be near him. He also mentioned that a major problem in their marriage was there sex life, which was negatively affected by bouts of impotency. This he stated made him see him self as sexually inadequate. When asked to describe his wife he commented that she was strong and dominant.

Stan came to see me because he wanted to get over his fear of strong confident women, and get some control over his life; he feels that he is a failure because he has not done anything right in his life as he is always making wrong decisions.

## Therapeutic Approach

The first few sessions would be spent building rapport with Stan as well as gathering information on his experiences. Stan has identified the areas that he wants to work on so specific attention would be paid to these areas and his past experiences that may have contributed to his current behaviour. Information was gathered on Stan family constellation and some of his early recollections as summarized in the historical information. Stan’s fear of strong, attractive women and his feelings of sexual inadequacy seems to be linked firstly to his relationship with his mother and then to his ex-wife.

Both women dominated him and made him feel inadequate by belittling him. This has resulted in Stan believing that this is how he will be treated by all women. He has developed the belief, that he is not much of a man and so is fearful, that in interacting with other women they will view him in a similar fashion and will dominate him. His experience has resulted in him overgeneralising about how future relationships will progress based on his experience with two persons in his life.

Stan would be educated on the importance of examining his automatic self talk as well as assisted in discovering some basic cognition that influence his self talk, feelings and actions. Once Stan is able to identify his automatic self talk and understand its effect on him, we would move onto helping him monitor and evaluate the ways in which he keeps telling himself these thoughts.

Stan would be given homework to list some of the negative self talk and challenged to go see a doctor to rule out any medical/physical link to the incidence of impotency. The issue of Stan perceived impotency is connected in my opinion to his belief that he is less of a man. Male identity is intricately linked to their ability to perform sexually and so his self esteem would be negatively affected by these experiences. This may cause anxiety and avoidance of sexual encounters or relationship that may become sexual. We would discuss his list and the results of his doctor visit at the start of our next session. Assuming everything is okay medically, it would be highlighted that the only thing affecting him sexually was his thoughts.

I would use several sessions to dispute and challenge some of Stan current self talk. These include Stan belief that he is like his father. This belief in his mind was reinforced by his martial experience, plus his acceptance of his parents’ opinion of him as a person lacking worth. He would be asked to provide evidence to support these beliefs and then we could use reframing techniques to change the meaning that Stan has attached to these life events. He would be encouraged to develop new self talk

Assertiveness training and role play would be used to assist Stan to overcome his fear of women. The change in his self talk should help Stan to improve his view of self /or self confidence. Role play would be used to see how Stan interacts with women and provide the opportunity for him to practice identifying and changing any negative thoughts and anxiety attached to these interpersonal interactions. Stan would then be given some graduated homework assignments where we would begin with a low anxiety situation such as just approaching a strong attractive woman and striking up a conversation and gradually progressing to more high anxiety situations such going on a date. The aim would be to challenge Stan and lessen his anxiety, by reconditioning through assertion. At each phase of the exposure through role play, we could deal with any catastrophic expectations associated with the experience (Prochaska & Norcross, 2003).

The information gathered from the objective interview regarding Stan’s family constellation and birth order, functioning in relation to the basic life tasks and interpretation of early recollections would be used to conduct a lifestyle assessment. This assessment would be used to generate a summary of basic convictions and interfering ideas. Based on Stan’s recount his basic convictions are the world is harsh and unkind and that no one cares about him. He believes he has failed to achieve anything worthwhile in his life and that he is a disappointment to everyone. Success is measured by doing well academically and having a good job. Some of Stan’s interfering ideas are that he is a failure, he is not good enough compared to others, he is not bright enough to achieve his goals.

My aim would be to help Stan meet the challenges of contributing to society (occupational task) in the manner he has identified as desirable (becoming a counselor) and self acceptance. This would be done by assisting Stan to understand his basic beliefs and feelings about himself and how he acquired these beliefs. Help him develop insight into how these faulty assumptions affect his behaviour and assist him to develop alternate ways of thinking, feeling and behaving and to translate these into action to change his life.

Stan’s faulty style of life has developed out of his belief that he is worthless, and as a result, he has developed an inferiority complex where he sees himself as less than others. His experience of being negatively compared to his academically successful siblings and his failure to achieve similar academic success and the resultant benefits has contributed to his feelings. He also doubts his ability to succeed academically probably based on the fact that he did not do well in high school. In his mind, his mistakes outweigh any good in his life. His desire to help children in trouble seems to stem from his childhood experiences and wanting to help others avoid some of the mistakes that he made. This demonstrates that despite his experiences he has developed social interest.

We would start by challenging Stan’s belief that he should have finished college by now. Stan would be asked how that time was determined and if achieving his desired goal was less worthwhile if he achieved it after age 25. This would be aimed at helping him to see that this was a self imposed timeline that was causing him to feel like a failure. He would be encourage to reframe his perception of where he is currently, to see that he has achieved the goal of going to college and that he was on a path to achieving his goal.

Stan would also be challenged to view his mistakes as learning experiences that could assist him in becoming a better counselor particularly in assisting persons with similar experiences.

Stan would be challenged to make a list of positives in his life and a list of ten things that he likes about himself. This would be aimed at helping him focus on the positives about his life so that he would start to have a different frame of reference to view his life. Positive aspects of his life that could be highlighted includes his ability to leave some of his past behind, he was in college, the support of his youth camp supervisor and his job..

Along with the changes in Stan cognition we would also explore how he was managing his time given that he had work and study. This would be important as it could affect his ability to do well in school and cause a setback in progress. Stan would be encouraged to see that although he may encounter challenges and setback in life he could overcome by not dwelling on the negatives and moving purposefully towards his goals.

I have proposed one psychological view point on how human behavior and psychopathology occurs and the therapeutic approach that that can be used to help person’s better cope with the challenges of life. Its application has been successfully demonstrated in the case of Stan, however other psychologist will have other approaches to the same problems and these cannot be discounted as there is no ‘ one size fit all’ approach to understanding and treating human behavior.