

# [Theories and methods in counseling essay](https://assignbuster.com/theories-and-methods-in-counseling-essay/)

Theories and Methods in Counseling Genevieve Bogusky Liberty University Abstract This paper will take the reader briefly through the three grand theories of counseling in psychology and then onto the two emergent theories, which are based on observation, biology, sociology or anthropology. From that framework, some methods/therapies will be discussed and then a brief look at legal and ethical concerns will be presented in order to prepare the reader for the author’s Biblical perspective, which highlights the obvious missing element in the development of these theories/therapies.

The Biblical references are the author’s personal choices and not the only relevant instances to be found in the Bible for spiritual insight into the theories and methods of psychology. The paper will then conclude with this penman’s personal reflection on this material and how it relates to her future practice of counseling. Keywords: Freud, grand theories, emergent, methods, therapies, ethics, Biblical Theories and Methods in Counseling Psychological theories and the therapies that result from them are of great importance to the counselor who is engaged in helping people through difficult times and/or mental illness.

The modern western tradition of counseling, and in particular psychoanalysis, began with Sigmund Freud. Very little effort is given here to understand where his ideas originated, but, that does not mean his thoughts were independent of his culture, time period, and personal experiences. For Freud, and in fact everyone after him, individual theories and concepts evolve and in time “ new” theories appear as older ideas give way to new-found “ truths”. This paper begins with Freud and then onto the two other grand theories, behaviorism and cognitive theory.

On this journey, the reader will be traveling from the end of the Enlightenment, through modernism and end up in the post-modern world. Although not directly stated, this can be seen as Freud’s opinion that mankind is just incapable of understanding the sub-conscious progressing onto behaviorism where “ reason” should be able to explain all things. Reason failed to solve all the issues that could trouble a person and the pursuit of understanding how people think (cognitive theory) began which lead to new methods and therapies. In parallel, society changed with legal and ethical questions demanding attention.

The paper then progresses toward general Biblical concepts ending in the author’s personal reflection concerning counseling. In the counseling profession, there is support to be eclectic when choosing a therapy and without knowledge of the origins of various therapies and understanding how they are to operate one cannot be effective. Add to this the focus of solving a person’s specific issue with time constraints, demands a counselor who is on firm intellectual and spiritual ground. Grand theories Psychoanalytic Psychoanalytic theory is credited to Sigmund Freud whose practice as a physician involved treating people with mental illness.

He developed his psychosexual theories after hearing patients relate their dreams and fantasies. Freud posited that development in the first six years is characterized by sexual happiness related to a specific part of the body (Berger, 2008). Birth to one year is the oral stage, one to three years of age represents the anal stage, three to six years is the phallic stage, six to eleven years the latency stage, and the adolescent period is described as the genital stage, continuing into adulthood where it remains dominant.

Problems arise in individuals when conflicts in one or more of these stages are unresolved (Berger, 2008). Unresolved conflicts are revealed by the unconscious via dreams, fantasies, slips of the tongue, and the symbolic content of the symptoms, as well as free association, projection, and posthypnotic suggestion symptoms (Corey, 2009). This approach suggests that the unconscious holds the key to resolving neurotic symptoms. Here the therapist can help the patient by being a “ blank screen” where “ transference” can take place thus beginning the work of change.

This can be a long process (Jones & Butman, 2011) and requires a therapist who is well qualified as well as a client who is ready and willing to change (Corey, 2005). Freud also gave modern psychology the concepts of the “ id”, described as instinctual and the principal source of psychic energy, the “ ego” which contacts the external world and provides executive control, and the “ superego” where the moral code resides to decide whether an action is right or wrong, good or bad (Corey, 2009).

The “ working through” described above was termed “ catharsis” and could be considered an energy exchange where the “ id” releases energy in appropriate ways (Jones, & Butman, 2011). Freud does not use the term catharsis in the Stoic sense where it implied “ the separation of the mind from the emotional attachment to external, material things (Robertson, 2005, para. 8). The goal of these efforts was to be able to reconcile the unconscious and conscious, enabling behavior based on reality and not on instincts or guilt (Corey, 2009).

Erik Erikson also was of the opinion that problems later in life were the result of childhood conflicts and constructed his eight stages of development with the first five being similar to Freud. However, his view was from the cultural and family perspective and was considered psychosocial (Berger, 2008) with the goal of conflict resolution in each stage of development. Erikson saw the conflicts as trust vs. mistrust, autonomy vs. shame and doubt, imitative vs. guilt, industry vs. inferiority, identity vs. role confusion, intimacy vs. solation, generativity vs. stagnation and integrity vs. despair (Corey, 2009). Psychoanalytic theory certainly captured people’s imagination and with a bigger than life champion, Sigmund Freud, it was birthed around the modern world. Behaviorism There is no question that Freud was a “ rock star” however the smoke did clear due in part to the efforts of John Watson. He felt that psychology should, “… limit ourselves to things that can be observed, and formulate laws concerned only with those things …” (Berger, 2008, p. 38).

This began the endeavor to understand how and why people act and think the way they do based on a yet to be discovered set of laws (Berger, 2008). Researchers were known as “ learning theorist”, because it was thought that behavior is learned, deciphering how the learning took place became the focus of this new science. Observing not only people but, animals as well, clues to this mystery were to be uncovered. Ivan Pavlov, a Nobel Prize winner for his insights into animal digestion, uncovered “ conditioning”, or how certain stimuli will consistently result in certain responses (Berger, 2008).

The term classical conditioning, also known as respondent conditioning (Corey, 2005) became an accepted explanation of behavior: however it was not an all encompassing explanation. Recognizing the limitations, B. F. Skinner believed that classical conditioning explained behavior in simple circumstances, but saw that in complex areas of life, behavior will be modified if a reward or avoidance of adverse stimuli occurs (Corey, 2009). He called this operant conditioning that is also known as “ instrumental conditioning” (Berger, 2008, p. 39).

From this, another term, reinforcement came into use to take the place of reward. Reward implies immediacy while reinforcement does not necessarily happen every time an action is taken. Also reinforcement can be positive or negative, which will eventually modify behavior (Corey, 2009). The new science of behaviorism theory (BT) was at odds with psychoanalytic theory (PT) in several areas. Regarding the unconscious, PT posits that it is unknown while BT believes that it can be known and can be a barrier to self-improvement. Behavior that is observed is considered a symptom in PT and BT only looks at what a person does.

PT states that childhood experiences remain an influence throughout one’s entire life while BT looks to current conditioning to unlearn and even reverse habits and patterns learned in childhood. The final dispute is extremely interesting in its far reaching implications, PT believes “… most aspects of human development are beyond the reach of scientific experiment; uses ancient myths, the words of disturbed adults, dreams … as raw material” while BT is described as “ proud to be science, dependent on verifiable data and carefully controlled experiments; discards ideas that sound good but are not proven” (Berger, 2008, p. 8). Behaviorism, as a theory and science, gained acceptance and continued to expand in scope. This mechanistic view of conditioning, although clean and precise, could not explain all behaviors. People can learn from others without the benefit of reward or reinforcement. Again, from the observation of animals and people, another perspective, known as cognitive theory began. Cognitive Moving from the explanations of behavior as a science, interest began to grow in how the thought process works.

Why do different people think the way they do, what formed their individual process, and how are these processes organized? An early pioneer in this work was Jean Piaget who held that thoughts and expectations greatly impact one’s actions, assumptions, beliefs and values (Berger, 2008). Cognitive theory also recognizes that peoples’ thought processes are malleable through time and experience.

As the thought process changes so does behavior and Piaget managed to identify four major periods of cognitive development; sensorimotor from birth to two years of age where learning is active with no conceptual or reflective thought, preoperational takes over from two to six years of age with language being used to understand their egocentric world, concrete operational begins at six years of age and continues to eleven years of age with the child applying logic to interpret experiences objectively, however thinking is limited to what is in their immediate environment and experience, and formal operational beginning at twelve years of age and continuing for the rest of one’s life where abstractions and hypothetical concepts are reasoned analytically as well as emotionally (Berger, 2008). Under this theory, intellectual advancement occurs when a person tries to achieve a mental balance or “ cognitive equilibrium” (Berger, 2008, p. 44).

One tool used to achieve this end is to make sense of new experiences from the vantage point of preexisting ideas, which is termed assimilation. If these new experiences cannot be assimilated then pre-existing ideas may need to be updated in order to achieve “ accommodation’ (Berger, 2008, p. 45). In summary, it can be stated that development using cognitive theory is where growth is an active process in responding to new and challenging ideas, while the psychoanalytic approach maintains that growth is dependent on maturity and behaviorism postulates that repetition is the key to growth (Berger, 2008). The ideas put forth in the three grand theories were formulated nearly a century ago and provided a springboard for new developments. Emergent Sociocultural

In the grand theories one can see that the focus was on the individual and then began to expand to where it was believed our action with others shaped our growth. Surprisingly, the founder of sociocultural theory, Lev Vygotsky, worked in global obscurity in Soviet Russia and his ideas were not accessible until after the Cold War ended (Berger, 2008). Vygotsky had a large group of people who were both economically and ethnically diverse as well as children who were considered mentally retarded to observe (Berger, 2008). His theory is built upon the idea that people live in societies and therefore they must acquire specific capabilities and knowledge in order to function in their society.

Tutors who come in the form of teachers, friends, and even strangers must guide the novice, in society. Together they offer “ guided participation” to help the novice learn in an informal way. This idea must be coupled with the concept of “ zone of proximal development” (ZPD) where the student must be in the “ zone”, an area where the material is not already known and the material is not too difficult at that particular time. A major departure from the grand theories is that guided participation is an active process where the student and the teacher learn from each other (Berger, 2008). There is certainly a great amount of merit in this theory and it can be observed everyday in society.

There is however, a concern that the particular society itself may have questionable values (Berger, 2008). Epigenetic Epigenetic theory is a recent theory that draws from biology, genetics and chemistry. The main construct is that, “… genes interact with the environment to allow development (Gottlieb, 2003)” (Berger, 2008, p. 49) According to this theory all physical and psychological traits are influenced by genes. Combine this with the development process and one can conclude that this interaction results in a specific range of outcomes or a “ reaction range”. These outcomes are not automatic, for example, having a genetic disposition to become an addict simply does not equate to becoming an addict (Berger, 2008).

The next sections will bring the reader closer to some modern day therapies found in psychology and are not an exhaustive list by any means. Methods / Therapies Existential Therapy Existential therapy, whose most famous advocates were Viktor Frankl and Rollo May, is more of a philosophical approach than a major psychological theory (Wilks, 2003) however, it bears mentioning because it has a place in counseling. At the center of this “ therapy’ is that each individual has free will and life is not deterministic (Corey, 2009). The first step is to help the client discover areas where they have acquiesced and relinquished control. This is the beginning of realizing their full potential and next is encouraging them to purposefully act toward that end (Fernando, 2007).

The core concepts of freedom and responsibility are communicated to the client by insightful maneuvering of the counselor (Fernando, 2007). Distinctive to the existential approach is that suffering can be meaningful and a tremendous precipitator for change (Fernando, 2007). Behavior Therapy Behavior therapy is based on behaviorism. B. F. Skinner and Albert Bandura furthered the original premise. The basic concepts have been outlined in the section above; but it is worth mentioning the contribution of Albert Bandura with his development of social learning theory that combined classical and operant conditioning with observational learning (Corey, 2009).

This therapy is non-deterministic and maintains that the individual is the “… producer and product of his or her environment” (Corey, 2009, p. 237). With that said it should come as no surprise that the goals of this therapy are for the client to have greater personal choice and the generation of new conditions for learning (Corey, 2009). Cognitive Behavior Therapy Cognitive behavior therapies are the expansion of behavior therapy. Here we can see variations on the theme as presented by Albert Ellis who developed rational emotive behavior therapy (REBT), Aaron T. Beck’s version of cognitive therapy (CT), and Donald Meichenbaum’s cognitive behavior therapy (CBT) (Corey, 2009).

These are all short term approaches and share the following; collaboration between the therapist and the client, the premise that psychological distress is a result of cognitive disturbances, changing cognition will result in improvement, and that the goal is resolution of a specific problem in a short period of time (Corey, 2009). The client plays an active role during the entire process including “ homework”. It has been posited that these theories do not put forth any objective truth and perhaps their purpose is to provide a narrative structure (Hansen, 2006). There has been research into “ third wave” or mindfulness based cognitive therapy that is showing promise (Bhanji, 2011) and focuses on changing the “ relationship to inner experiences” (Bhanji, 2011 p. 65) as opposed to modifying thought content. Legal Issues Regarding Theory and Method The previous sections have introduced basic information about various theories and methods.

One would not say that a theory is unlawful but once the theory gets integrated into a method and the therapeutic processes are about to begin the legal aspects of this arrangement must be considered. It is important to distinguish between legal and ethical issues since they are closely joined, and in fact overlap (Corey, G. , Corey, & Callanan, 2011). Therapists are expected to be in compliance with federal and state laws (Affsprung, 2010) such as Family Educational Rights and Privacy Act, Health Insurance Portability and Accountability Act (HIPAA) to name just a few, as well as state licensure boards which include continuing education responsibilities (The Pennsylvania Code, 2012). In addition the therapist has a duty to warn and a duty to protect where harm or threats of harm are discovered (Corey, et al. , 2011).

The fact that lawsuits are becoming commonplace and universities including Brown, Harvard, Massachusetts Institute of Technology have been involved in legal contests involving student counseling, or mental health services (Affsprung, 2010), together with therapists interacting among clients who are in the midst of their own crucial life issues (Kaslow, 2006) clearly indicates that practitioners require assistance from knowledgeable legal counsel (Woody, 2008). The increase of government intervention and third party interest continue to reshape therapy (Kaslow, 2006) not only in the U. S. , but all over the world as reported by Ian Parker, “ Psychoanalysts in Britain are faced with a serious attempt by the government to regulate psychotherapy through a Health Professions Council (HPC)” (Parker, 2007, p. 76). The scope of legal issues can be overwhelming and one view that can be valuable is, “ If psychologists are having difficulty seeing the ethical orest for the legal trees, what they need is not more legal training, but clearer ethics based training” (Corey, et al. , 2011, p. 158). However, there will be times when legal and ethical issues are in conflict and an easy answer is not possible. Accurate record keeping, along with honest personal evaluation of what one is doing and why, will help ensure that the expected standard of care is met (Corey, et al. , 2011). Ethical Considerations A therapist is trained in their profession by learning theories and then therapies to implement those theories. Next, legal matters are highlighted, then onto an area where the therapist would appear to have very good direction and freedom to exert control – ethics or “ right conduct” (Corey, et al. , 2011, p. 14).

At the beginning of the interaction with the client “ Informed Consent” needs to be reviewed and agreed upon (Corey, et al. , 2011). This process should begin to establish the ethical principle of “ autonomy” (Younggren, Fisher, Foote, & Hjelt, 2011, p. 166). The minimum guidelines for this document are outlined in the American Psychological Association (APA) publication “ Ethical Principles of Psychologists and Code of Conduct (2010). One source regarding informed consent is not enough and additional ethical guidelines as outlined by American Counseling Association (ACA) (2005) and the American Association of Christian Counselors (AACC) (2004) should also be consulted.

Informed consent will also include legal aspects of the relationship as well (Corey, et al. , 2011). During the Informed Consent process a method of therapy should have been discussed and this raises an ethical issue concerning its selection. Current counseling practices have become eclectic and the selection and delivery of a method must match the counselors’ area of competence (ACA) (2005). The counselor also must keep good notes and records (ACA) (2005) including why a therapeutic methodology was chosen. Another, often overlooked aspect is patient duties (Younggren et. al, 2011) and reasons to terminate therapy can include lack of cooperation from the client.

In some cases a Psychiatric Advance Directive (PAD), which outlines what treatments and steps are to be taken, as well as naming a proxy decision maker, are ready in advance of a crisis relapse (Nicaise, Lorant, & Dubois, 2013). Another important aspect of Informed Consent is that it must be in language that can be easily understood by the client (Younggren et. al, 2011). Although it has already been mentioned in this paper there will be conflicts between legal and ethical concerns requiring difficult decisions by therapists. It is of extreme importance that the counselor be aware of ethical and legal concerns, however one cannot allow these concerns to make their practice ineffective (Corey, et al. , 2011). Biblical Values and Insight

Although this paper has outlined the major theories of psychology, examined some of the methods, and then legal and ethical concerns, there is a major source of information not presented and that is the Biblical perspective. Freud, the founder of modern psychotherapy, believed that God was an illusion (Jones & Butman, 2011) and that in these modern times was no longer necessary. However, nothing could be further from the truth and even his own existence was dependent on God as scripture informs us (Gen 1: 26, King James Version). Freud went on to describe the operation of the human mind and here a deeper understanding of scripture would have been beneficial since wisdom comes from God (James 1: 5). Freud, apparently having never sought the Holy Spirit, came to his own conclusions.

It is remarkable that his views were embraced since by his own admission “ the end result of analysis was the replacement of neurotic misery by everyday unhappiness” (Jones & Butman, 2011, Model of Psychotherapy, para. , 8). In addition, his own rejection of God kept him from joy as stated in Romans 14: 17. Those who followed Freud also did not see fit to include the Biblical perspectives of life, which left gaping holes in the development of a cohesive construct for life. Presuming to know, they ignored scripture once again and missed what we are told, “ For who hath known the mind of the Lord? or who hath been his counsellor” (Rom. 11: 34)? There is value in the work that all of the theorists and shapers of modern therapy have put forth.

A Christian knows that their own understanding is limited and seeks God for discernment as shown in Proverbs 2: 6. In fact, the number of published articles on spirituality is increasing, although not all Biblically based, the increase is encouraging (Powers, 2005). Personal Reflections The undertaking of this assignment has made me better informed on the theories and methods used in psychotherapy. A therapist can have a tremendous influence on a person’s life due to the position they occupy in the therapeutic setting (Wilks & Rahteal, 2009). I recognize that I must guard my heart (Proverbs 4: 23) because it can lead me to incorrect and harmful decisions.

I also know that I must first seek the counsel of the Lord in prayer. It has also served as a cautionary tale not to lean on my own understanding from a scriptural viewpoint, “ Without counsel, plans go awry, but in the multitude of counselors they are established” (Proverbs 15: 22). I also believe that it is important to understand the role that sin plays in disorder and the noetic effects it can cause (Mutter, 2012). I believe that integration is foundational to counseling and without it all the therapies are just narratives to a self-serving goal. Also, as so elegantly put, “ Education which is not based on caring love causes harm and moral decay” (Ruzicka, 2010, p. 199).

In researching this paper I came across an article that discussed “ virtue ethics” and it stated that, “…with guidance and practice … grow in goodness, becoming more fully what human beings are supposed to be” (Stewart-Sicking, 2008, p. 157). The article discussed the modern era using reason to understand life and how reason could not determine what one is “ supposed to be”, and that today an ethical statement is regarded as personal preferences. With this perspective the secular therapist helps the client achieve goals that the client sees fit with no moral imperative or communal responsibility. The secular counseling profession, in general, uses theories that are based in reason and guided by ethical standards. If all can be achieved through reason why isn’t there a “ Code of Reason”? The answer is obvious; man is not God. We cannot even begin to know what we do not know.

As a person I realize that I have limitations and that I must go outside of my own understanding, however, I do realize that God uses people to help others and will give us wisdom if we only ask. What I learned thus far on my academic journey has certainly increased my knowledge and understanding. I pray that humility and openness to God’s truth will guide all the actions of my life most especially in my quest to help others. References Affsprung, E. H. (2010). Legal action taken against college and university counseling centers 1986-2008. Journal of College Student Psychotherapy, 24(2), 130-138. doi: 10. 1080/87568220903558711 American Association of Christian Counselors. (2004). Code of ethics. Retrieved January 25, 2013, from http://www. aacc. net/about-us/code-of-ethics/ American Counseling Association. (2005).

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