

Counselling theory case study

[Psychology](#), [Behaviorism](#)



Counselling theory

The essay aims to address person-centred theory in detail including the main features of this theory with regard to how useful they are even in real life situations. The essay will also take into account how this model is different from other therapeutic models in particular cognitive behavioral approaches and psychodynamic approaches. It also takes into account the similarity of the models listed.

Personal-centred therapy which originally was known as non-directive therapy is a therapy that was developed by the psychologist Dr. Carl Rogers (1902-1987) that moves the idea that the expert is the therapist to a direction where one should trust their innate tendency to provide therapy to themselves (also called actualizing tendency). In this therapy method human beings become fulfilled from their potentials on a personal level. It includes being sociable and the need for someone to be in touch with other people and the wanting to be known and know other people. Personal-centered therapy also involves one being exposed to experiences, trustworthiness and trusting people, being compassionate and creative, and being inquisitive about what happens in the world.

Person-centred therapy as explained by Rogers creates a psychological environment where someone feels that they are free from any form of threat either psychological or physical. This type of environment is achievable when the patient is involved in an association with another person who understands them deeply (empathic), accommodating (having positive regard that is unconditional), and being genuine (congruency).

Person-centred therapy aims at creating a fully-functional person. It states

that optimal development results to a process that is certain rather than a state that is static. Roger says that this is the 'good life', which involves the organism in being in a continuous process that is aimed at achieving its own full potential as explained earlier. A fully functional person therefore has the following characteristics:

A lifestyle that is increasingly existential- this involves living to fullest each moment- meaning not disrupting the moment to fit self-concept or personality, but letting self-concept and personality grow from ones experience. This leads to one being daring, excited, tolerant, spontaneous, being daring, and lacking rigidity. This suggest one being trustworthy. " To open one's spirit to what is going on now, and discover in that present process whatever structure it appears to have" (Rogers 1961)

An openness that grows to experience- it involves moving away from defensiveness disregarding the need for subception (this is where someone applies ways that will prevent one something that troubles the mind from entering the conscious).

Increasing trust in oneself-it involves trusting your own judgment and one's ability to select behaviors that for each moment are appropriate. It also means one not depending on existing social norms and codes but trusting in their own experiences to trust their sense of wrong and right.

Creativity- it involves feeling the freedom to be creative. This also means that one's creativity will increase even in the way one adapts to circumstances of their own without feeling to conform.

Freedom of choice- not being bound by limitations that impacts an individual who is incongruent. This makes one make choices of a wider range in a more

fluent way. This makes them feel that they are responsible for behaviors of their own.

Constructiveness and reliability- this means that one can trust them to act in a constructive manner. A balance between them is attained by an individual who shows openness to all their requirements.

A rich full life- it involves one living a life that is exciting, rich, and full and it involves experiencing pain and joy, heartbreak and love courage and fear in an intense manner. Rogers's description of a life that is good is:

This process of the good life is not, I am convinced, a life for the faint-hearted. It involves the stretching and growing of becoming more and more of one's potentialities. It involves the courage to be. It means launching oneself fully into the stream of life. (Rogers 1961).

Main features of person-centred therapy

As explained earlier person-centred therapy revolves around three central ideas or concepts. This include empathy, unconditional positive regard, and congruence.

Congruence in counselling

Congruence also refers to being genuine or real. According to Rogers, congruence is the most vital attribute when it comes to counseling. This means that the therapist does not have to hide their personality during the therapy sessions. Rogers explains that the therapist should let the client experience who they are. Moreover, the therapist should not disguise him/herself and their external and internal experiences should be one and the same. This calls for the therapist to be authentic. The therapist is urged

to drop off the white coat and see the client as another person, while still maintaining the therapist role. The therapist should drop the authoritarian role which makes them act as a people who fix broken patients.

Once the therapist treats the client as someone equal, communication starts.

However, if the therapist decides to turn on the expert or authoritative side the client will respond to this by tailoring answers that they give to their therapists to suit the current situation. In this core, realness is required.

I experienced this at a time when I went to a showroom. The guy who greeted me was over-zealous and claimed to be a sales person. I easily noticed that he was not genuine and that the attention he paid to me was not because he wanted to attend and care for my demands but only to make a sale. Therefore, I acted accordingly and also provided him with the wrong information since even he, was willing to give me wrong information about the products they sell just to make me buy them.

Empathy

It is the ability of the therapist to understand the client's feeling. The therapist has to have an ability accurately and sensitively (no sympathy) understand the feelings and experience of the client here-and-now. The therapist reflects back on the feelings of the client. This is where the therapist provides support to a client by showing them that therapist is also going through their emotions. It involves the therapist putting himself/herself in the shoes of the client. Empathy involves become one, empathizing, and getting into an understanding with something until it becomes fused to one's self. Most importantly the therapist has to precisely follow what feeling the client has and aim at communication between the two. Empathy is

established through reflective counselling and so far in person-centred therapy this part is the most teachable.

Unconditional positive regard (UPR)

It is the next Rogerian core. Rogers believes that in order for one to fulfill and grow their potential it is crucial that they themselves are valued. This refers to the therapist genuine and deep caring towards the client. In this core, some of the client's actions may not be approved by the therapist. However, the therapist still approves the client's actions. In short an outlook of " I'll accept you as you are" has to be adopted by the therapist. Therefore, the person-centred therapists has to be vigilant by maintaining a positive attitude always towards the client, even at times that the client's actions disgust the therapist. This core comprises of caring, validation, respect, and non-possessive warmth. It does not involve assessment or judgment. The therapist can transmit unconditional positive regard non-verbally (includes warm voice, smiling, and head nods) or verbally.

In addition, the counselor needs to belief that the client good intrinsically in spite of the individuals behavior or thinking. A person exhibits behaviors and attitudes that are unhelpful not because they come from them themselves, but because of expecting or wanting to get approval from another person or in other words wanting to get positive regard from people other than themselves. In relation to this the therapist brings about change in the thoughts and subsequently the behaviors of their clients through the information gathered from the client's unconditional positive regard.

UPR ties makes listening and healing possible. It ties continuum to congruence in a nice way. The reason for this is that for communication to

occur, it has to be between two individuals who are equals.

At first when I thought that I could not hold this concept with every person.

Then I was in this extreme case where I had to deal with an abuser and I was forced to apply UPR. The abuser often used vulgar language when referring to things and in a way I did not like, so I had to cope with the situation. I realized that he was also trying to tell me something about him although he did it in a way that is not ethically right. This proved to me that it is possible to distinguish a person from his/her behaviors.

I have faith that UPR is promising since no matter how much one slips from the grace of the society, they will manage to achieve UPR for others and themselves and start afresh. Rogers in his wisdom says that up to the moment where we die, everybody has a potential to change.

Personal-centred approach

Key Concepts

The following are the key concepts to personal-centred approach

Humanistic influence of person-centred therapy- humanistic approach is a key in influencing person-centred therapy. A person-centred therapist believes in client's trustworthiness and capability and they concentrate on the ability of the client to change themselves.

Actualization -normally people tend to aim at self-actualization. Self-actualization is evolving in a way that is complete. It happens throughout one's lifespan as one aims at achieving intrinsic goals, fulfilment, and self-realization, which involves self-regulation and autonomy.

Fully-functional person- a fully-functional person is who has an ideal emotional health. Generally this person when it comes to experience is open-

mindful, living with purpose and meaning that is sensible, and trusts others and self. Being a fully functioning person is among the core goals of therapy that is person-centred.

Conditions of worth- conditions of worth impact on a person's self-concept which is shaped by people in her/his life that are important. Conditions of worth denote the critical and judgmental messages coming from people who are important, influencing the reaction and acting of individuals to specific situations. When conditions of worth are enforced on a person, they have a low self-image. Negative self-image occurs when an individual is open to overprotective environments.

Phenomenological perspective- phenomenological approach talks about the perception that is unique that each individual has in their own world. This makes the individual to perceive and experience their world and makes them react in a way that is of their own. It concentrates on the experience of an individual regarding the working of the treatment process.

Psychodynamic therapy

Key concepts

The following are the key concepts of psychodynamic theory

Level of consciousness- human beings mind consists of three levels of consciousness: conscious, pre-conscious, and unconscious. The fully conscious part of the brain is small. In the mind the largest part is the unconscious part, it contains impulses and baser drives.

Personality structure- it is the ego, Id, and the superego. Id- occurs in the unconscious, it symbolizes wishes and instinctual repository that claim instant gratification. Ego- it aims to satisfy the ids demands through

channels that are acceptable socially without going against the superego which is personalities' moral guardian.

Governing principles- this are the reality and pleasure principles. Pleasure principle is followed by the Id, it warrants for gratification that is instant regardless of necessities that are social. The ego now follows principle of reality through which weighing of gratification of impulses is done regarding to social practicality and acceptability.

Defense mechanisms- this is where the ego to distort or conceal impulses that are unacceptable uses mechanisms of defense, therefore inhibiting their increasing into consciousness. Main mechanisms of defense include regression, repression, rationalization, projection, reaction formation, denial, displacement, and sublimation.

Psychosexual development stages- motivation for sex is shown when the erogenous zones or body parts are stimulated as a child develops. The stages of psychosexual maturity are five and include `anal, oral, phallic, genital, and latency. Under gratification or over gratification during any stage may result to personality fixations or features that characterize that stage.

Cognitive behavioral therapy

Key concepts

The key concepts of cognitive behavioral therapy are as follows:

Cognitive theory- it insists on cognitions or thoughts, beliefs, schemas, and attitudes that have an impact on the feelings of a person and facilitate a relationship between behavior and antecedent. Inferential processes (attributions, fallacies, and heuristics) that lead to judgmental errors and

cognitive distortions are also part of this form of therapy.

Behavior theory- it concentrates on both operant learning and classical conditioning. The main notion behind this therapy of behavior is that, behavior that is observed is knowledgeable, verbal transfer of information and modeling.

Social learning theory- it denotes that individuals acquire knowledge through ways other than to experience them directly: example is observational learning, cognitive and modelling expectancies, which all determine behavior. A number of similar principles as those of direct learning are followed by observational learning.

Self-concept

According to Rogers, self-concept is the set of beliefs and perceptions about a person that are organized and consistent. It comprises of all values and ideas that characterize ' me' and ' I' and it includes the view of what someone can do and what they are. Rogers believes that self-concept has three components that are different:

- Self-image or ones view of themselves.
- Self-esteem or the value that one places on themselves.
- Ideal self or what one wishes they were.

Self-image

It necessarily does not have to reflect on reality. Indeed a person may be suffering from anorexia but their self-image makes them think they are plump. The self-image of a person is influenced by a number of factors like, friends, parental influences, and even media. People often describe

themselves in terms of social roles, physical descriptions, personal traits, and existential statements.

Self-esteem and self worth

Self-esteem is the degree to which people approve or accept themselves or the value they put in themselves. Self-esteem involves a point of evaluation and people may either have negative and positive image of ourselves. One may have high or low self-esteem. Self-esteem is influenced by reaction others have, comparison with others, identification, and social roles.

Ideal self

It is what one would like to be. A mismatch between one's self-image and ideal self affects the value someone in their self. Consequently, a relationship is intimate between ego-ideal, self-image, and self-esteem is there. The self-ideal of a person might not be reliable with what happens actually in their life and experiences of that person. Therefore, the actual experience and ideal self may have a difference.

Comparisons of the approaches

The approaches all have one similar aim, that is to assist persons improve in a way that is positive and aiming at moving forward.

Psychodynamic theory looks into one's soul, mind, and spirit. It deals with consciousness and unconsciousness. The person-centred theory looks from the personal point of view and how one can change from within. The behavioral approach looks into the social, behavioral and cognitive aspects of the person.

Person-centred therapy involves therapists viewing those in therapy as

clients and not as patients like the other two cognitive and psychodynamic approaches. This is because they view the client and therapist as partners who are equal rather than an expert handling a patient.

In person-centred therapy the client has the responsibility of improving her/his life and it is not the work of the therapist. This is an intentional change from behavioral and psychodynamic approaches where diagnosis and treatment is conducted by the doctor.

Person-centred therapy bases its approach on the future and the present and does not take much concern on liberating one from ones past.

Psychodynamic unlike person-centred, dwells on the past of the patient.

Person-centred therapy involves their being a therapeutic relationship. This is where the therapist and client are in a relationship that makes them act as one, or rather the therapist helping the client to solve hi/her problem. This is unlike behavioral and psychodynamic therapies where there is no such relationship, it is strictly professional where one is in charge, and the other follows instructions.

In conclusion the essay explains the features of person-centred theory, illustrating how useful they are using even personal experiences, and how this model is different from other approaches like psychodynamic and cognitive-behavioral approaches and their similarity.

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