

History of the counseling profession essay sample

[Government](#), [Military](#)



Analyze the evolution of the key philosophies of wellness, resilience, and prevention. Key philosophies of wellness, resilience, and prevention is all part of a framework that is a unit that must be used as a core that is unified in a way that can help the client. By using this process, it helps keep the resilience and wellness as well as the prevention strategies in a framework that allows the program that a counselor is using to stay within a collaborative initiatives setup. This helps the development of the unit that he or she is working on with the client to help establish an assessment plan such as interpersonal therapy. In addition, the resilience is going to help the inside-outside process and to help this come together they have to focus on the natural, internal part of the innate capacity of the clients healthy functioning. According to Myers & Sweeny a way of life oriented towards optimal health and well-being in which body, mind, and spirit are integrated by the individual to live life more fully within the human nature community” (Myers & Sweeney, 2008).

Counselors have to look at the personal change as well as the self-righting and document the changes that are being made in therapy. All of these changes will happen in this framework that are tapping into the resilience system, and it will bring out the best and worst of the clients. According to Yeh & Bull “ study the family members providing care for persons with cancer dementia on the factors such as spiritual well-being, coping, availability of resources in ways in which family members adjusted the caregiving role meditated stress and burden. Spiritual well-being might serve as a protective factor in stressful situations and decrease the number of negative mental symptoms. Family caregivers to report by our spiritual well-

being have fewer negative mental health symptoms” (Yeh & Bull, 2012).

Environmental changes are a huge part of the process and councilors have to establish and examine the client’s individual and systematic beliefs on their conditions of empowerment, as well as client’s support and diversity background.

Mental health and well-being and prevention are an important part of assessment and therapy as it is a way to protect our clients. We can study it and address it in research. Humans begin do life from the inside out, we are thinkers we notice the sensations thinking causes, we are also knowers and we connect to the wisdom greater than or intellect. We know more than us thinking. However, what matters, is that we believe, not what we believe. These principles are a practical guide to how we operate mentally and physically and this helps us explain how every human can create and recreate experience day to day and moment by moment. What are the Historic events in your specialization? Historical content in mental health counseling started in World War II.

A nonmedical behavioral and cognitive approaches to psychotherapy florist with some of this growing being stimulated by the community of the mental health centers act of 1963. This act that established funding for the development of the community-based mental health care programs teams that contribute to graduate master level practitioners. These specialists were trained in colleges of education and secured employment under variety of professional titles in a community setting, such as hospitals, private practices community mental health centers.

Even though, these professionals weren't adequately trained and disciplines of social work, psychology, or medicine. Such as psychiatric. These doctors were without a professional medical named home and were unqualified for the traditional licensures. This new group of physicians who had emerged within the healthcare field begin a movement in July 1978 from the American Mental Health Counseling Association to help provide themselves with the professional organization and the identity. The American Mental Health Counseling Association purpose was to pursue recognize the development accountability standards and acquire professionalism status for this practice-oriented master professionals who were already enriched in the marketplace. These pioneering individuals have found professionalism drawn to the newly established identity of mental health counseling because they did believe in the power of counseling. They offer different activity roles and identity from other services provider's profession.

So the uniqueness of their professions was relieved to both themselves and others. Include in your discussion what goals you have a professional working within your chosen specialization. I would like to work with military and the dependents. I will help military members who come from war and or areas that are needing a good mental health councilor that is going to look at the needs of the patients this includes their family. Having a good mental health counselor to talk too will help with defined with emotions, and assist in resolving what is at hand. We can pinpoint if the event is emotional, environmental, or mental or another issue. I want to remind you, at times, only one member is being treated and not the whole family. I think this can cause a huge problem when trying to care for a patient with emotional needs

or mental illness. Everyone has to be on board, or the healing will not be complete. I want to gain employed by a government agency or state facility and to have my office and to be able to treat military members and their families.

References

Myers, J. E., & Sweeney, T. J. (2008). Wellness counselling: The evidence based for practice. *Journal of Counselling and Development*, 86(4), 482-493. Retrieved from <http://search.proquest.com/library.capella.edu/docview/2190297?accountid=27965>

Yeh, P.-M., & Bull, M. (2012). Use of the resiliency model of family stress, adjustment of adaptation in the analysis of family caregiver reaction among families of older people with congestive heart failure. *International Journal of Older People Nursing*, 7(2), 117-126. doi: 10.1111/j1748-3743.2011.00275.x