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COURSE NAME: Counselling Skills

Homework Assignments

ATLANTIC INTERNATIONAL UNIVERSITY

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**INTRODUCTION**

In deciding on a course work assignment that I would submit for grading; it became clear that researching the homework assignment given for each course area would be the best method. By so doing, I will and have learnt a lot about counselling skills and the best techniques or approaches to employ while dealing with patients.

Therefore, this assignment will take the form of answering the questions given in the Lecture regarding the ten-lessons covered in this topic. I have researched and expounded a little more for my own learning benefit.

The areas covered are as follows

#### **Lesson 1: COUNSELING PSYCHOLOGY**

#### **Lesson 2: PRIMARY COUNSELING THERAPIES**

#### **Lesson 3: PSYCHOANALYTIC COUNSELING**[Video Lesson](http://videos.i.edu.mx/default.aspx?action=play&conferenceGUID=2c8a9e30-d287-48d9-a0bd-e286460531e8)

#### **Lesson 4: GRIEF COUNSELING**

#### **Lesson 5: BEHAVIORAL APPROACH TO COUNSELING**

#### **Lesson 6: REALITY THERAPY COUNSELING**

#### **Lesson 7: SCHOOL COUNSELING SKILLS & TECHNIQUES**

#### **Lesson 8: FAMILY COUNSELING**

#### **Lesson 9: RELATIONSHIP/COUPLES COUNSELING**

#### **Lesson 10: BASIC COUNSELING SKILLS & TECHNIQUES**

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**ASSIGNMENT 1.**

**BRIEFLY DESCRIBE THE FOLLOWING COUNSELLING TECHNIQUES. COGNITIVE, BEHAVIOUR MODIFICATION AND PSYCHANALYTIC.**

In reading the information given Counselling techniques is said to be the various methods used or implemented by a counselor to help persons get pass varied issues, such as mental illness, life problems or additions, such as substance abuse.

**The Cognitive technique**

It is important to guard one's thoughts, as they eventually lead into action, which can be either negative or positive. Therefore, one of the techniques used by a counsellor is to understand the patient's way of thinking and how it affects their behavior. The main aim is to try and change how an individual thinks and in so doing, help to change any contrary behavior.

This technique is mostly used in cases such as mental conditions, personality disorder and Alzheimer's to name a few. The most frequent methods that counsellors use when practicing the Cognitive technique are role playing, guided discovery and journaling.

Behavior **modification**

This technique is also to correct negative behavior. It is more a teaching method and so the counsellor has the responsibility to ensure that the patient is taught new behaviors to fix the negative ones. In essence it’s a technique used for issues such as eating disorders and insomnia, although medication is sometimes used with this form of therapy, this technique is also used for patients who abuse substances.

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The techniques that aid the counsellor in practicing behavior modification are homework assignments, conditioning and desensitization.

**Psychanalytic**

This is called the “talk therapy” it is said that most times the patient has the solution to their problems, and a counsellor is there to help them find it. Talk therapy is the most popular technique and it is used to treat emotional issues. The main aim is to let the patients express themselves while the counsellor actively listens.

**ASSIGNMENT 2.**

**WHAT ARE HUMANISTIC THERAPIES?**

It is said that humanistic therapy, which is a form of counselling technique, is also classified as talk therapy. This technique, however, differs from the others, in the sense that it does not take into account the past, but rather deals with the present, the here and now, as well as the future. Humanistic therapies mainly focus on persons taking responsibility for their own life, their personal growth and self-development. It is said that these therapies are more geared at getting people to have a deeper understanding of themselves, their purpose and their place in this world. The advantage of this technique is that the whole person is taken into consideration and not just specific aspects of an individual's life.

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The humanistic therapies are as follows:

1. E**xistential Therapy**- this is used for people who are suffering from issues such as mental health, depression anxiety. This therapy is said to be more focused on one finding the true meaning and purpose in life. So therefore, counsellors normally use this technique to treat persons who are struggling with issues related to death, their identity and the meaning of life. A non-judgmental and open dialogue between counsellor and patient is the approach normally used.
2. **Gestalt therapy** focuses on all aspects of an individual's experience and takes into consideration the here and now facet of their life. It stresses making an individual understand the context of their life even though they are facing challenges. It is more geared to make the patient take responsibility rather than blaming others or situations. What stood out to me is that a gestalt therapist understands when it's time for healing, things such as painful memories or events will come to awareness. Additionally, it is not just about an individual sitting still and talking, it is an active approach which involves guided imagery, role play and the use of props. The advantage of this is that it helps when there is difficulty for the person to communicate verbally or to express themselves properly. In essence, the therapy is focused on the notion that individuals are influenced by their present environment and experiences. The main goal of counselors, when using Gestalt therapy, is to get people to understand themselves from a deeper perspective and where they stand in the world.

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1. **Person-centered therapy** (also known as client-centered counseling or Rogerian therapy). This therapy is also non-judgmental and focuses more on an individual's self-worth and values. American psychologist Carl Rogers who is the originator of this approach, believed that every person is unique and, therefore, everyone’s view of his or her own world, and their ability to manage it, should be trusted. The takeaway from this therapy is that each individual has the capacity to arrive at the best way out for us and the capability to make the necessary changes in our lives.
2. **Psychosynthesis**- Focuses on self-development as well as growth and helps a person to change their direction in life based on their values and what life means to them. The key to this therapy is that every human being has the right to grow as a person and discover a higher spiritual level of consciousness. This therapy uses techniques such as meditation, observation, reflection, role play, re-enactment and open-ended questions just to name a few.
3. **Reality therapy**- is also a self-centered approach that focuses on the present. Counsellors use this approach to help individuals take control of the world around them and their behavior. It is more about changing what one does to get results and finding ways to meet one's basic needs. Even if one plan of action fails, then the patient can find other means until that particular mean works. It is said that this approach can be useful in treating highly sensitive problems, such as sexual identity issues, racial issues, and cultural clashes.

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1. **Solution-Focused Brief Therapy** or solution-focused therapy or brief therapy- This is more of a strength-based approach that looks at what an individual wants to achieve rather than the problems of the past. It is more about solution building rather than problem solving which will look at what is already working in a person's life and trying to build on it to make things better. Therefore, this therapy is helpful for those who want to change and who have the zeal to achieve. The sessions are not usually long, it typically involves at least three to five sessions.
2. **Transactional Analysis**- Focuses on a person’s interactions and communications with others. It looks at such things as the complexities of human communication, highlighting the fact that gestures such as body language, facial expression etc. are more important in communicating than just the spoken word. The three ego states behind this theory are: Parent, adult and child.
3. **Transpersonal Psychology** – focuses more on the spiritual side of an individual and considers the whole person, whether it be their emotional, physical, mental and spiritual aspects. What it does is that it allows individuals to be able to discover a greater amount of self-awareness and realization and in so doing, allows one to garner an appreciable sense of happiness, know their purpose and their meaning in life. Transpersonal therapy can be used to treat issues such as Behavorial issues, phobia, anxiety, depression etc. Counsellors can use things such as meditation, guided visualization, journaling to name a few.

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**ASSIGNMENT 3.**

**WHAT IS ANALYTIC NEUTRALITY?**

Analytic neutrality is said to be a concept in psychoanalysis that states that a therapist cannot take sides in the intramural struggles of a patient. It does not mean that the therapist is quiet and even thou it has been stated that it is impossible to be neutral, it is a safe place for counsellors. Neutrality helps the patient to get past their past and in a sense will help them not to lay blame on anything or person. Imagine if a patient has a problem with a parent and their therapist, agrees that the parent is at fault or is the cause for that individual's behavior, such actions will not help in the healing process.

**ASSIGNMENT 4.**

**WHAT IS GRIEF THERAPY?**

In reading the notes I realized that grief counselling is different from grief therapy. So, what is grief therapy? It is also known as bereavement therapy, is a form of psychotherapy that is geared at helping individuals get over the loss of a loved one. It is said that the aim is to help people find ways of moving ahead. Losing a loved one is harder than the loss of possessions and so grief therapy can be beneficial in the immediate term, as well as the long term. I had a coworker whose husband died suddenly, and it took three months for her to make the practical decision of arranging his funeral. She refused therapy and so did not handle the loss positively. Grief Therapy would have allowed her to address her feelings and adapt to life without him.

The more serious and complicated types of grief are dealt with in grief therapy which is used to

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point out to the patient the negative reactions and to find ways to resolve what is thought to be any conflict surrounding the separation that would hinder the completion of mourning. It stands to reason that the main aim of grief therapy, as outlined in the notes, “is to identify and solve the psychological and emotional problems which appeared as a consequence”. There are clinical tools used in grief therapy when an individual's reaction is labeled traumatic or complicated. These can be issues of prolonged or abnormal mourning or behaviors that are not considered healthy. It is noted that there are different types of grief reactions such as exaggerated grief, chronic grief, masked grief, and delayed grief.

**Exaggerated grief** is different from normal grief as it tends not to get better over time. This form of grief occurs when an individual experiences a more intense reaction than what is typically seen in normal grief. Reactions such as suicidal thoughts, frequent nightmares, destructive tendencies and substance abuse are common.

**Chronic grief.** When an individual experiences this type of grief, the grieving period is longer as they do not accept it. This makes it impossible to go through the grieving stage, hence preventing any form of improvement or moving on.

**Masked Grief** is a type of complicated reaction to loss, as an individual will try to suppress their feelings of grief hoping that it will go away without any effort. It is said that abnormal tendencies and physical illnesses are normally associated with this condition.

**Delayed grief** is considered to be when an individual postpones dealing with coping with the loss and grief. The symptoms of grief are also delayed and may occur most or even years after.

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**ASSIGNMENT 5.**

**WHAT IS THE DIFFERENCE BETWEEN BEHAVIOR MODIFICATION AND BEHAVIOR THERAPY?**

It is said that **behavior modification** and behavior therapy are somewhat different from each other but are used interchangeably. The aim of behavior modification is to change how individuals behave using varied motivation skills, mainly positive and negative reinforcement, extinction, and punishment to name a few. However, it's not a therapy that should be used by itself but in conjunction with other therapies. Based on my research, this therapy does not give individuals a choice as to how they are treated, as the process of changing one’s behavior does not take into account their feelings or what they think. Behavior modification is used to treat numerous mental illnesses such as anxiety disorder, depression and substance abuse to name a few.

In reading what Behavior Therapy is all about, there is a recognizable thin line between the two definitions. **Behavior Therapy** is about treating or changing maladaptive behaviors using the same motivational techniques as quoted in Behavior modification. However, Behavior therapy has a number of varied types of therapies to treat maladaptive behaviors. It is also a broader term than Behavior modification but what is noted is that the treatment goals are agreed upon by the client and therapist. It is a teaching approach that involves the patient's active participation and current situations are used to modify behaviors. Patiences are responsible to practice as well as learn coping mechanism and to keep track on their behaviors both during and outside the therapy sessions, they are also encouraged by the therapist to do role-play. The hope is that whatever is taught by the therapist, the patient will transfer the same into their everyday life.

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**ASSIGNMENT 6.**

**DESCRIBE REALITY THERAPY?**

In describing Reality Therapy, it is important to discuss its origins. It is said to have originated or developed by William Glasser in the 1960s and is very different from the other school of thought. It does not focus on symptoms of mental disorders but that individuals are suffering from “socially universal human conditions”. The main focus, however, is on what Glasser calls psychiatry's three Rs: realism, responsibility, and right and wrong. It is interesting to note that Reality Therapy does not dwell on the individual's past nor unconscious mental processes, which makes it very different from other therapies.

In researching further, it is said that Reality Therapy is also called Choice therapy, which states that humans only have five generically driven traits, that cannot be changed. Emphasis is placed on psychology principles or needs such as to receive and get love, to have power, that feeling of belonging ; the need to learn, achieve, to feel worthwhile, the need to win and be competent; the need to be free, independent and a sense of autonomy with personal responsibility; the need for fun, pleasure, enjoyment and relaxation. All of which is needed for good psychological health.

In addition, there are some basic principles that makes Reality Therapy a success, they are as follows:

1. To avoid discussing the past and focus on the present
2. Never hold on to unsatisfying relationships. As much as possible, avoid discussing symptoms and complaints as these are ineffective ways to deal with situations,
3. Total behavior should be the main focus which takes into account that more time is spent ***Page 10.***

on what the client can do as it relates to how they act or think, rather than what they cannot do.

1. Blaming and/or complaining as well as criticizing, should be avoided on both sides.
2. Being non-judgmental and non-coercive, is encouraged
3. Making excuses can be a hinderance in the ability to make connections that are needed.
4. Help clients who are disconnected to focus on specifics and reconnect as soon as possible.
5. Specific, workable plans that help the client to reconnect with the people they need, should be made and reviewed when needed,
6. Patience and support are key, but focus should remain on the source of the problem and disconnectedness.

**ASSIGNMENT 7.**

**WHAT IS GROUP COUNSELING?**

Group Counselling can be beneficial for people who would be unsure to open up, may do so seeing that others have. On the flip side it could also have its disadvantages, as, if individuals are not confident of the group, especially one that is full of strangers, it can be a deterrent. It is said that group counselling is a pool of people, often four to ten people who will meet with either one or two therapists for up to two hours. The group will discuss matters of concern or things that affect them. At my organization group counselling is mostly done when there is trauma, either the loss of a coworker or issues that will affect the mental state of the team. The main aim of this therapy technique is to offer support and feedback. It is normally best if it is done face to face. It, ***Page 11.***

however, differs from individual counselling as the entire group would have similar issues and are all treated at the same time.

There are various types of group counselling such as, Counseling groups, (explore and resolve personal or interpersonal problems) Task group (which focus on completing specific task); Self-help groups, ( led by peers who share similar experiences and offer mutual support) Psycho-educational groups, (information provided on conditions or issues); Psychotherapy groups, (address deeper psychological issues and helps in personality change).

The stages in group counselling are very important to know, in order to be able to effectively carry out guidance to a group, The first stage is getting to know, this is where goals and norms are established; the second stage is where the group deals with issues such as anxiety, conflict and any form of resistance, this stage is said to be the confrontation or transitional stage. The third stage is where the group members establish factors such as collaboration, trust and support; this is the working or cohesiveness stage. The fourth stage, which is the action/production stage, allows the group members to put into effect plans and ways to solve their problems. The termination, final and fifth stage, results in group evaluation of their progress and then end the group.

The **three basic** group counselling **rules** that stands out the most to me are:

1. **Confidentiality**. This is the foremost rule in counselling; if there is no confidentiality, especially on the part of the therapist, then the aim of effective intervention cannot be accomplished. Confidentiality is said to be the Code of Ethics for psychologists. Group members need to feel safe when they open up without fear that the information will be

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leaked.

1. **Listening.** This to me is not only on the part of the therapist but also on all the members of the group. Everyone one needs to listen to what is said and also what is not being said. To listen is also a form of respect in every regard, only one person can speak at a time, so once that ground rule is set, people will actively listen. Listening is an important skill, and it encourages a strong relational bond. It ensures that there is understanding in every regard. Active listening is key.
2. **Respect**. If there is no respect, then group counselling cannot be effective. Mutual respect is key, there should be no fear of judgement, criticism, disrespect or putting down of others. No group member should be humiliated, abused or forced. No one should have their dignity violated by disrespect.

**Assignment 8.**

**What are the licensing requirements to become a marital and family therapist?**

This is the area of counselling that sparks my interest and an area that I would love to specialize in. Family Therapy is said to be the part of psychotherapy that involves the work with families and persons in intimate relationships(couples) to help bring about the necessary change and development. It focuses on improving communication and resolving conflict between family members and couples.

Family therapists are commonly known as relational therapists: whose main role is to aid families and couples. These therapists normally use various techniques and work with individuals to address issues such as depression, anxiety or substance abuse. They are trained in special areas to deal with ***Page 13.***

certain issues. To be a family therapist one has to have certain licenses. It is noted that licensing is not required in some jurisdictions and requirements vary from place to place. Generally, to be a Marriage and Family therapist, one needs to have a master's degree in Marriage and Family therapy or a related field. Additionally, it is required that the therapist in most states or counties complete a certain number of clinical hours and licensing exams. In the UK, family therapists must complete a four-year (MSc) and then register with the professional body the Association of Family Therapy (AFT), and with the UK Council for Psychotherapy (UKCP). In the United States and Canada an accredited Masters or Doctoral programs recognized by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), a division of the American Association of Marriage and Family Therapy is required. It is said that only after completing one’s education. internship and passing the state licensing exam, can an individual be classified as a Marital and Family Therapist and work unsupervised.

In Jamaica, we have adopted the American **Association for Marriage and Family Therapy (AAMFT)**, licensure or certification laws for marriage and family therapists (MFTs) as it provides a mechanism for the public and third-party payors to identify qualified practitioners of marriage and family therapy. Marriage and Family Therapists who (1) obtain the MFT license or certificate and (2) have met high educational and clinical experience criteria, are qualified to practice.

**Assignment 9.**

**What is a negative interaction cycle?**

A negative interaction cycle has to do with Couples therapy or Relationship therapy. This kind of therapy is said to be more about relationship history and the seemingly intractable problem. ***Page 14.***

The targeted agent of change is focused on emotions. It is said that most relationships get strained at some point or the other, leading to a failure to optimally function and as such, produce self-reinforcing maladaptive patterns. These patterns are called “negative interaction cycle”. It is persistent behavior that couples are “stuck in” when there is a conflict. These cycles can have negative effects on the couple's relationship and are deemed destructive, they can also lead to many negative emotions such as anger, depression etc. Based on my readings, couples may act out in various ways, for example, even if one partner is willing to pursue the relationship, the other may withdraw. The negative aspect is that it can lead to the feeling of abandonment and rejection. This can further lead to them in turn blaming and shaming each other. The emotions of defensiveness and resentment will automatically come into play here. If these couples do not get the required help, then, relationships that are in this stage normally end in separation.

A couple’s therapist will then have to work with the individuals to identify the negative reaction cycle and implement various plans/strategies to help them overcome. The therapist will have to also look at the many reasons that have caused the couple to be in this negative interaction cycle and to help them go forward. This might be a challenging task as issues such as illness, financial challenges and influence of other family members may be problematic for a therapist, to effectively help in implementing any form of change. Personality maturity of all parties is essential.

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**Assignment 10.**

**Describe the three specific counselor behaviors which are important to outcome.**

To be a counselor can be very taxing and draining and so I believe that Indvidual's need to have that passion to drive them to do this line of work. One thing is for sure, Counsellors are humans too and may have their own personal issues as well.

Although there are different types of therapies that a counsellor will use in helping their client to arrive at a desired outcome, there are three specific behaviors that are key. It must be noted however, that a counsellor will get great outcomes when there is a good and positive relationship that exists between them and their client. It is therefore safe to reason that the most powerful tool a counselor has in helping is how they interact with their clients.

In this regard, the three specific behaviors that a counsellor should have which are important to outcomes are (1) Enthusiasm, (2) Confidence, and (3) Belief in the patient’s ability to change.

**Enthusiasm**

When a counsellor is enthused it sets the pace for positive results. It is such an important quality that a counselor should have. It creates that positive energy needed and shapes the supportive environment that a client needs to make them more self-aware and insightful.

A counselor who shows enthusiasm, will do so by showing empathy to their client (trying to be understanding); will exercise active listening (paying close attention to what the client has to say and show that they have understood what the client has said); have a positive attitude (Being hopeful about their client's future) and be encouraging throughout( positive feedback and

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support).

**Confidence**

When a counsellor shows confidence in their client, confidence in their work and knowledge in their field, it will help the client to feel comfortable sharing their thoughts and at peace. They are more relaxed to disclose personal information without fear.

**Belief in the patient’s ability to change**

To believe is to trust and give credence to something or someone. In this case, once the counselor has shown the client that they believe in them, that, in and of itself, gives rise to encouragement to the client that whatever the circumstances someone believes in them. In essence, giving them that zeal to change for the better. This is very important to outcome for any counsellor, as once a client knows that they have the support and backing of their therapist positive outcomes will ensue.

**CONCLUSION**

I decided to do the homework questions asked at the end of each tutorial, for my course work assignment. This stance allowed me to go back over all the areas in the course and to even do further research on the topics. By so doing I can confidently say that I have learnt a lot about counselling techniques.

In my current job, I supervise four counsellors, but I have never undertaken extensive studies in the area. This course has taught me a lot and I am even seriously considering pursuing further studies to become a licensed Marriage and Family Therapist, as this is a passion of mine. I truly ***Page 17***.

enjoyed the journey, in learning, discovering and researching more about Counselling Skills. It has made me better equipped to carry out my daily functions. I must say Thank you Professor Antonya Walker for this experience. It was indeed a pleasure working with you and I will ensure that I adopt your motto of “being the best leader that I can be”.

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