

**Counselling skills**

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# **1.Introduction**

Counselling is an activity that is at the same time simple yet also vastly complicated. What can be simpler than talking to a concerned and interested listener about your problems? But it is what is involved in the telling and listening, knowing and being known, reflecting and acting, that can be so complex. In counselling, people talk about anything and everything. The relationship between the counsellor and the person seeking counsel is simultaneously taking place at a physical, bodily level, and through language, and in the thoughts, feelings and memories of each participant. This is what makes it so complicated, and this is what makes counselling a big topic. Counselling is an interdisciplinary activity, which contains different traditions and schools of thought, and spreads itself across the multiple discourses of theory, research and practice. Counselling has generated a rich and fascinating literature, and a range of powerful theories and research studies(McLeod, 2013).

There are several different types of counseling skills, such as counseling psychology that includes: (Counseling process and outcome, supervision and training, career development and counseling, prevention, health. In addition, counseling psychologists focus on assets and strengths, interaction between a person and the environment, educational and career development with interactions brevity and focus on a complete personality). Primary counseling treatments (for example: psychological treatments are expressed by, behavioral treatments, psychoanalytic treatments, humanistic treatments and arts treatments). Treatments Psychoanalytic counseling, bereavement counseling, a behavioral approach to counseling that addresses two issues behavioral change, and behavioral therapy, reality therapy (RT) counseling, family counseling and couple/relationship counseling, (for example: between spouses in a family, or employees or employers at a workplace, or between professional to the client).

In this work, I will refer to most of the aforementioned consulting skills in a literature review structured in chapters for each and every topic. In addition, I will refer to what I learned at the end of the work and the conclusions that I drew in the process of this work.

# **2.Literature review**

## **2.1 Initial consultation treatment**

Psychological treatments are generally divided into four categories:

### **2.1.1 Behavioral treatments**

Behavioral treatments focus on cognition and behavior, the term cognitive behavioral therapy (CBT) can be seen as an umbrella term, which is usually used to refer to a group of related treatments that have a theoretical basis in behavioral learning and cognitive psychology, and are derived from scientifically proven theoretical models from these theories, and today is a treatment of choice for disorders Various psychiatry including mood disorders, anxiety disorders, personality disorders (PDs), eating disorders, substance use disorders and psychotic disorders(Bhattacharya et al., 2013).

Cognitive therapy first proposed by Beck in the early 1960s for depression quickly developed into one of the main psychotherapeutic methods in modern psychiatric care. The effectiveness of the treatment of depression, generalized anxiety disorder, panic disorder, eating disorders and other psychiatric conditions has been well proven by many studies. Most psychiatric illnesses now have well-organized treatment guidelines based on cognitive therapy. The goals of cognitive therapy include immediate relief of symptoms and the acquisition of cognitive and behavioral skills that reduce the risk of relapse. With fast modern gadgets, the future challenges of this therapy include computer-aided modeling of easy and cost-effective learning. In conclusion, it would not be wrong to state that any treatment method that is used should address symptom relief from the point of view that cognitive behavioral therapy has proven its usefulness in a variety of mental disorders(Bhattacharya et al., 2013).

### **2.1.2 Psychoanalytic treatments**

These treatments focus on the pattern of unconscious relationships that have developed since childhood. The psychoanalytic theory is past-oriented, based on a disease model of pathology, and focuses on a person's shortcomings as a result of the influence of past experiences in early childhood on current functioning. In essence, psychoanalytic therapy is a reconstruction of a patient's past in the context of adult analysis. Psychoanalytic theory and therapy was developed by Sigmund Freud in the late 19th century, and has undergone many improvements since his work, which reached its peak prominence in the 1960s. Although its validity is currently subject to controversy and criticism, the examination of aspects of personality development yielded important insights into the structure of the personality and how defense mechanisms are activated to balance the identification and the superego with the perceived structure of reality, according to which a healthy state of consciousness is maintained. Essentially, Freud laid the foundations for understanding the aspects of human thought and behavior that arise from our basic instincts and subconscious. From the foundations of early experiences, a person discards his unconscious drives and conflicts. Therefore, in psychoanalytic psychotherapy a client is encouraged to reveal such problems with the help of various techniques such as free association, behavioral observation, transference and dream analysis. Freud believed that changes in personality were possible, but doubted the practical benefits of psychoanalysis to bring about such a change. He admitted that the process of psychoanalysis is a long and difficult process that requires sophisticated verbal, intellectual and analytical skills of the therapist, with a real possibility of inducing anxiety and distress by exploring a patient's past. Despite Freud's tendency to emphasize the challenges facing the psychoanalytic approach, there is empirical evidence for the effectiveness of psychodynamic therapy. In addition, clients seem to maintain therapeutic gains and continue to improve after treatment ends. Long-term psychoanalytic treatment is effective in reducing symptoms, as well as in changing personality, and to a lesser extent, however, it is significant in terms of quality of life and prevention of relapse. However, it is clear that psychoanalytic treatment is a long journey that may not be appropriate or effective for more resistant and younger clients, and patients with severe psychopathology. Freud agreed that this is a long and complicated process: psychoanalytic observation, a return to childhood from a later period, and contemporary observation of children indicate to us other regularly active sources of sexual excitement. Direct observation of children has the disadvantage of working with data that is easy to understand; Psychoanalysis is made difficult by the fact that it can arrive at its data, as well as its conclusions, only after long detours. But by cooperating the two methods can achieve a sufficient degree of certainty in their findings. A number of techniques are used to explore those aspects of the self that are not fully known as they are expressed and influenced in the therapist-client relationship(Ohlmann, 2023).

### **2.1.3 Humanistic treatments (psychotherapy)**

These treatments focus on self-development in the "here and now", psychotherapy which is a science that applies the humanistic aspects to better understand the complex nature of an incredibly effective healing practice(Wampold, 2007).

The process of change in psychotherapy despite its effectiveness is not well understood. Psychotherapy is compared to medicine and cultural healing practices to argue that critical aspects of psychotherapy involve human processes used in religious, spiritual, and cultural healing practices. A model of psychotherapy that determines various aspects involving unique human characteristics is presented. Central to this model is the patient's acquisition of an adaptive explanation of his difficulties. Finally, the research evidence for this model is presented (Wampold, 2007).

Psychology's "dual heritage" involves both the scientific and the humanistic traditions—and this heritage has often divided the discipline. On the one hand, scientists have often found applications of psychology that is not particularly scientific. Those associated with humanistic aspects of psychotherapy, on the other hand, perceived that the scientific studies focus on aspects of psychotherapy that are not relevant to the essence of the effort. However, each perspective brings strategically important contributions to the effort. Although healing practices have existed since the beginning of the human race, the effectiveness of almost all such practices has not been put to what is considered a scientific test. Modern medicine grew out of the multitude of healing methods as a scientific application of biological knowledge to cure and prevent disease, reduce mortality and prolong life. The development of randomized control group designs made it possible to demonstrate that the chemical components of drugs produced effects beyond those generated by the brain and established the efficacy and specificity of these agents. The application of the randomized design by clinical scientists to the study of psychotherapy has clearly shown that this healing practice is remarkably effective—indeed, psychotherapy is as effective as or more effective than many established medical methods. The contribution of science to the establishment of psychotherapy as a legitimate and effective practice should not be underestimated. Those interested in the humanistic aspects of psychotherapy tend to focus on the interpersonal relationship between therapist and patient and the process of psychotherapy. The task of science is to explain, discover and understand(Wampold, 2007).

### **2.1.4** **Psychotherapy**

Psychotherapy is a treatment that uses creative arts in the therapeutic process. Art is one of the oldest forms of communication and self-expression. Even in the early days of our world, humans created works of art, first in the form of cave paintings and later in less "primitive" manners. While people have used the arts as a way to express, communicate and heal for thousands of years, art therapy only began to take shape in the mid-20th century. Doctors noted that people suffering from mental illness often expressed themselves through paintings and other works of art, leading many to explore the use of art as a healing strategy. The early art therapists who published descriptions of their work recognized the influence of aesthetics, psychiatry, psychoanalysis, rehabilitation, early childhood education and art education, to varying degrees, on their work methods. British artist Adrian Hill coined the term art therapy in 1942. Hill, recovering from tuberculosis in a sanatorium, discovered the therapeutic benefits of painting and drawing while convalescing. He wrote that the value of art therapy lies in the "complete mastery of the mind (as well as the fingers) ... in the release of the patient's often inhibited creative energy," enabling the patient to "build a strong defense against his disasters."( Petruzzi et al., 2023).

## **2**.**3 Psychoanalytic consultation**

Psychoanalysis is a group of psychological and psychotherapeutic theories and related techniques popularized by the Austrian physician Sigmund Freud.

A number of techniques are used to explore the aspects of the self that are not fully known as they are expressed and influenced in the therapist-client relationship. In psychoanalysis, the focus areas of inquiry are: 1. Affect and expression of emotion: The psychoanalytic therapist helps the client describe unpleasant, contradictory,

Threatening, disturbing and repressed emotions to cultivate emotional insight. 2. Attempts to avoid disturbing thoughts and feelings: Defense and resistance mechanisms that are intentionally or unintentionally activated to avoid aspects of unwanted experiences are focused on since avoidance is significantly related to negative feelings and problem behavior. The influence and role of the client in the design of the events are examined directly and without compromise. 3. Recurring themes and patterns: A client may be unconscious, or aware but unable to manage painful or self-injuring recurring themes and patterns in his thoughts, feelings, self-concept, relationships and life experiences. The psychoanalytic therapist guides the client to identify and understand these. 4. Past Experience: Our present experience is significantly influenced by past events, especially early experiences of attachment figures. Therefore, the focus is on the past in relation to present problems and the client is encouraged to explore and understand the effects in order to free himself from the shackles of the past. 5. Interpersonal relationships: When object relationships and attachment are unsatisfactory and do not meet emotional needs, psychological difficulties often arise. The client is helped in establishing an adaptive personality and self-concept to improve pro-social skills and attitudes. 6. Treatment relationship: The relationship between therapist and patient is considered essential in the psychoanalytic treatment process since problematic issues and patterns tend to appear in some form in the therapeutic relationship. These aspects of transference and countertransference provide an opportunity to explore and analyze a client's interpersonal issues in vivo. 7. Fantasy life: clients are encouraged to speak freely and engage in free association that provides a rich source of information of their thoughts, desires, fears, fantasies, dreams and hopes, which signals their views of themselves, others and the world, as well as aspects of experiential avoidance and their interpretation of reality(Ohlmann, 2023).

## **2.4 Grief counseling**

HIV/AIDS, poverty, and armed conflicts are creating a growing number of orphans and vulnerable children. These children need the support, care, and love which they traditionally would have received from their families. With the breakdown of traditional support systems, the caregiver must provide the care, love, and support that these children need. As a caregiver, you work daily with children who have suffered the loss of a loved one. This is the worst kind of loss since it is permanent and calls for many changes in the life of a child. Children do not have the resources to deal with this kind of loss on their own, and need an assistance. This must be understood what children are experiencing during this confusing period of loss and change and learn how to support

and counsel these children so they can cope well By now, no one is too young to grieve. When someone we love dies, his or her loss affects us and we need to deal with this loss to help us to continue normally with our own lives. Children grieve differently from adults, depending on their age and maturity level. Moreover, culture, religion, and family traditions will affect the way people mourn and grieve. there are ways in which the above factors will affect a grieving child negatively or positively. Sometimes, a child is unable to come to terms with their loss, and some tools to help him deal with such cases have been discussed(<https://oasis.col.org>).

## **2.5 Behavioral approach to counseling**

The terms behavior modification and behavior therapy are often used interchangeably, but they have slightly different meanings. Behavior modification is an approach to assessment, evaluation and behavior modification that focuses on developing adaptive, pro-social behaviors and decreasing behavioral maladjustment in everyday life. Behavior modification is used by therapists and paraprofessionals to help people improve some aspect of daily life. Behavioral therapy is a clinical approach that can be used to treat a variety of disorders, in different types of settings, and with a wide variety of special population groups. The behavioral approach originated in the 1950s and early 1960s and was a radical departure from the dominant psychoanalytic perspective. Contemporary behavioral therapy arose simultaneously in the United States, South Africa, and Great Britain in the 1950s. Despite severe criticism and opposition from traditional psychotherapists, the approach survived. Its focus was on demonstrating that behavioral conditioning techniques were effective and were a viable alternative to traditional psychotherapy. In the 1960s, Albert Bandura developed a social learning theory that combined classical and operant conditioning with observational learning. During the 1960s, a number of cognitive behavioral approaches emerged, and they still have a significant impact on therapeutic practice. During the 1970s, the Behavioral therapy as a central force in psychology and has had a significant impact on education, psychology, psychotherapy, psychiatry and social work. Behavior therapy is characterized by an active role for both therapist and client. A large part of the therapist’s role is to teach concrete skills throughout the provision of instructions, modeling, and performance feedback. The client engages in behavioral rehearsal with feedback until skills are well learned and generally receives active homework assignments (such as self-monitoring or problem behaviors) and are expected to cooperate in carrying out therapeutic activities, both during therapy sessions and in everyday life. They are helped to generalize and to transfer the learning acquired within the therapeutic situation to situations outside therapy. It is clear that clients are expected to do more than merely gather insights; they need to be willing to make changes and to continue implementing new behavior once formal treatment has ended. Clients are as aware as the therapist is regarding when the goals have been accomplished and it is appropriate to terminate treatment. A good therapeutic relationship increases the chances that the client will be receptive to therapy. Most behavioral practitioners contend that factors such as warmth, empathy, authenticity, permissiveness, and acceptance are necessary but not sufficient for behavior change to occur. Behavior therapists assume that clients make progress primarily because of the specific behavioral techniques used rather than because of the relationship with the therapist(<https://courses.aiu.edu>).

## **2.6 Reality therapy (RT)**

Reality therapy (RT) is an approach to psychotherapy and counseling. Developed by William Glasser in the 1960s, RT differs from conventional psychiatry, psychoanalysis and medical model schools of psychotherapy in that it focuses on what Glasser calls psychiatry's three Rs: realism, responsibility, and right-and wrong, rather than symptoms of mental disorders. Reality therapy maintains that the individual is suffering from a socially universal human condition rather than a mental illness. It is in the unsuccessful attainment of basic needs that a person's behavior moves away from the norm. Since fulfilling essential needs is part of a person's present life, reality therapy does not concern itself with a client's past. Neither does this type of therapy deal with unconscious mental processes. In these ways reality therapy is very different from other forms of psychotherapy. The reality therapy approach to counseling and problem-solving focuses on the here-and-now actions of the client and the ability to create and choose a better future. Typically, clients seek to discover what they really want and how they are currently choosing to behave in order to achieve these goals. According to Glasser, the social component of psychological disorders has been highly overlooked in the rush to label the population as sick or mentally ill. Reality therapy attempts to separate the client from the behavior. Just because someone is experiencing distress resulting from a social problem does not make him sick, it just makes him out of sync with his psychological needs(<https://courses.aiu.edu>).

## **2.7 Family counseling**

Family counseling is a program of providing information and professional guidance to members of a family concerning specific health matters, such as the care of a severely retarded child or the risk of transmitting a known genetic defect. Family is a group of people related by heredity, such as parents, children, and siblings. The term is sometimes broadened to include related by marriage or those living in the same household, who are emotionally attached, interact regularly, and share concerns for the growth and development of the group and its individual members. Family counseling, is a program that consists of providing information and professional guidance to members of a family concerning specific health matters Legal Definition of family counselling Family counselling is a process in which a family counsellor helps: Family counseling is a process in which a) one or more persons to deal with personal and interpersonal issues in relation to marriage; or b) one or more persons (including children) who are affected, or likely to be affected, by separation or divorce to deal with either or both of the following: i) Personal and interpersonal issues; ii) Issues relating to the care of children. Family therapy provides a safe environment and temporary structure for people during these difficult times. People can re-build and create new ways of being that are more effective for their current life(<https://www.egyankosh.ac.in>).

Family therapy is based on family systems theory, in which the family is viewed as a living organism rather than just the sum of its individual members. Family therapy uses systems theory to evaluate family members in terms of their position or role within the system as a whole. Problems are treated by changing the way the system works rather than trying to fix a specific member. Family systems theory is based on several major concepts(<https://www.egyankosh.ac.in>).

Concepts in Family Therapy:

1**) The identified client** The identified client is the family member with the symptom that has brought the family into treatment. Children and adolescents are frequently the identified client in family counseling. The concept of the identified client is used by family counselors to keep the family from scapegoating the client or using him or her as a way of avoiding problems in the rest of the system(<https://www.egyankosh.ac.in>).

2) **Homeostasis (Balance**) Homeostasis means that the family system seeks to maintain its customary organization and functioning over time, and it tends to resist change. The family counsellor can use the concept of homeostasis to explain why a certain family symptom has surfaced at a given time, why a specific member has become the client, and what is likely to happen when the family begins to change(https://www.egyankosh.ac.in).

3) The extended family field The extended family field includes the immediate family and the network of grandparents and other relatives of the family. This concept is used to explain the intergenerational transmission of attitudes, problems, behaviors, and other issues. Children and adolescents often benefit from family counseling that includes the extended family(https://www.egyankosh.ac.in).

4) Differentiation refers to the ability of each family member to maintain his or her own sense of self, while remaining emotionally connected to the family. One mark of a healthy family is its capacity to allow members to differentiate, while family members still feel that they are members in good standing of the family(https://www.egyankosh.ac.in).

5) Triangular relationships Family systems theory maintains that emotional relationships in families are usually triangular. Whenever two members in the family system have problems with each other, they will “triangle in” a third member as a way of stabilizing their own relationship. The triangles in a family system usually interlock in a way that maintains family homeostasis. Common family triangles include a child and his or her parents; two children and one parent; a parent, a child, and a grandparent; three siblings; or, husband, wife, and an in-law(<https://www.egyankosh.ac.in>).

6) Preparation In some instances the family may have been referred to a specialist in family therapy by their pediatrician or other primary care provider. It is estimated that as many as 50 percent of office visits to pediatricians have to do with developmental problems in children that are affecting their families. Some family doctors use symptom checklists or psychological screeners to assess a family’s need for counselling. For children and adolescents with a diagnosed psychological disorder, family therapy may be added to individual therapy if family issues are identified as contributing factors during individual therapy(<https://www.egyankosh.ac.in>).

## **2.8 Marriage counselling**

Marriage counselling encompasses a wide range of technical interventions aimed at reducing marital discord. Mariage counseling's focus and goals are generally the resolutions of the immediate presenting problems and the provision of emotional support to the spouses as well as the enhancement of their self-esteem and optimism. Two people usually attend counselling sessions together to discuss specific issues. In their study, Hampson, Prince, and Beavers (1999) investigated the effectiveness of couple's therapy to identify the characteristics and qualities of couples who fare best in treatment. Significant family functioning qualities were discovered to be related to success, and more competent couples performed better in therapy. Furthermore, couples who did not have children fared better in treatment than those who did. Overall, remarried couples with no children outperformed first-married couples with no children, first-married couples with children, and remarried couples with children in treatment. The marriage counsellor works with the couple to help them understand that, in most cases, both partners are contributing to the relationship's problems. When this is grasped, the two can learn to alter their interactions with one another to solve problems. The partners may be encouraged to create a contract in which each partner describes the behavior that he or she will strive to maintain. Marriage is not required for two people to seek marriage counselling. Anyone who wants to improve his or her relationship can get assistance with behavioral issues, relationship issues, or mental or emotional disorders(<https://www.researchgate.net>).

# **conclusions**

I learned in this work that counseling skills include different types of counseling, **1. Psychological counseling** which is defined as a broad specialization within professional psychology concerned with using psychological principles to enhance and promote the positive growth, well-being, and mental health of individuals, families, groups, and the broader community.

**2. Primary counseling treatments**, such as psychological treatments which are usually divided into four categories:

**-1Behavioral treatments** that focus on cognition and behaviors**. 2- Psychoanalytic and psychodynamic treatments** that focus on the unconscious relationship patterns that have developed since childhood. **3-Humanistic treatments** that focus on self-development in the "here and now"**. 4-Art therapies** that use creative arts in the treatment process**.**

**3. Psychoanalytic counseling** which is characterized by psychoanalysis popularized by the Austrian doctor Sigmund Freud. Psychoanalysis is simultaneously a theory of how the mind functions, a research method for studying the contents of the mind, and a therapy for modifying those contents to make them more adaptive and conducive to a happy, fulfilling life. The psychoanalytic approach focuses on deciphering how the unconscious mind governs conscious processes in ways that interfere with healthy psychological functioning.

**4.Grief counseling** is a form of psychotherapy that aims to help people cope with the physical, emotional, social, spiritual, and cognitive responses to loss**.** Grief is the anguish experienced after significant loss, usually the death of a beloved person. Grief often includes physiological distress, separation anxiety, confusion, yearning, obsessive dwelling on the past, and apprehension about the future.

**5. Behavioral approach to counseling** The behavioral approach to counselling focuses on the assumption that the environment determines an individual's behavior. How an individual responds to a given situation is the result of past learning, and usually behavior that has been reinforced in the past.The goal of behavior therapy is usually focused on increasing the person's engagement in positive or socially reinforcing activities. Behavior therapy is a structured approach that carefully measures what the person is doing and then seeks to increase chances for positive experience.

**6.Counseling reality therapy** Reality therapy is a client-centered form of cognitive-behavioral therapy that focuses on improving present relationships and circumstances, with less concern and discussion of past events.The primary goal of reality therapy is to help clients find better ways to fulfill their needs. The counselor teaches the client how to evaluate their behavior, make plans for change, and set goals for themselves.

* Survival (food, water, shelter, sexual fulfillment)
* Love and Belonging (via family, friendships, community, etc.)
* Power (sense of accomplishment, self-confidence, self-esteem)
* Freedom (independence, sufficient personal space, autonomy)
* Fun (satisfaction, pleasure, and enjoyment)

**7.family Counselling :** Family counseling, or family therapy, is a method to develop and maintain healthy and functional family relationships. The goal is to identify and address problems in the family. These issues could be emotional, psychological, or behavioral.Family therapy techniques are ways to address family conflict by improving the communication and interaction of family members. There are numerous family therapy techniques, but four main models dominate the spectrum. This blog reviews the main therapy family techniques: structural, Bowenian, strategic and systematic.

**8.Marriage/relationship counseling**

Couple counseling is a counseling process for the parties in the relationship may be:

-1A relationship between family members or a couple

2-Employees or employers at a workplace

3-between a professional and a client

Short couple counseling may be between 1 and 3 sessions, while long-term couple therapy may be between 12 and 24 sessions. Counseling tends to be more "here and now", with new coping strategies being the result. And it deals with solving relationship problems where emotions are the goal and the agent of change.

# **Bibliography**

Bhattacharya, L., Chaudari, B., Saldanha, D., & Menon, P. (2013). Cognitive behavior therapy. Medical Journal of Dr. DY Patil University, 6(2), 132-138.

McLeod, J. (2013). *An introduction to counselling*. McGraw-hill education (UK).

Ohlmann, C. V. (2023). Biopsychosocial Factors Influencing the Age of Onset of Eating Disorders (Doctoral dissertation, The Chicago School of Professional Psychology).

Petruzzi, L., Ewald, B., Covington, E., Rosenberg, W., Golden, R., & Jones, B. (2023). Exploring the Efficacy of Social Work Interventions in Hospital Settings: A Scoping Review. *Social Work in Public Health*, *38*(2), 147-160.

Wampold, B. E. (2007). Psychotherapy: the humanistic (and effective) treatment. American Psychologist, 62(8), 857.2.1.4 טיפול אומנויות

**Links**

Counselling for caregivers, unit 7, grief counselling

https://oasis.col.org/server/api/core/bitstreams/e88a66ca-9001-42de-a7dd-

1cacda20654a/content

Counseling skills and techniques 5. behavioral approach to counseling [https://courses.aiu.edu/counseling%20skills/5/5.pdf](https://courses.aiu.edu/COUNSELING%20SKILLS/5/5.pdf)

Counseling skills and techniques 6. reality therapy counseling

[https://courses.aiu.edu/counseling%20skills/6/6.pdf](https://courses.aiu.edu/COUNSELING%20SKILLS/6/6.pdf)

Role of counseling in marriage

[https://www.researchgate.net/publication/360611380\_role\_of\_counseling\_in\_marriage](https://www.researchgate.net/publication/360611380_Role_of_counseling_in_marriage)

Unit 1 family counseling

https://www.egyankosh.ac.in/bitstream/123456789/23980/1/unit-1.pdf