

## Module 1 Introduction

- What counselling is and isn't
- Why counselling might be needed

### By the end of this module, you will:

- Understand what counselling is
- Understand what counselling isn't
- Be aware of the history of counselling
- Understand why counselling may be necessary

### What counselling is and isn't



British Association for  
Counselling & Psychotherapy

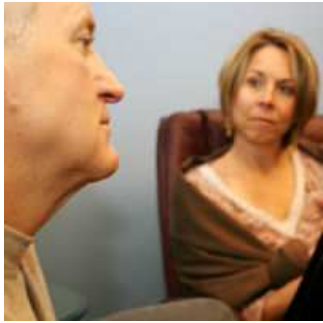
The BACP (British Association for Counselling and Psychotherapy) definition of counselling - counselling takes place when a counsellor sees a client in a private and confidential setting to explore a difficulty the client is having, distress they may be experiencing or perhaps their dissatisfaction with life, or loss of a sense of direction and purpose. It is always at the request of the client as no one can properly be 'sent' for counselling.

[www.bacp.co.uk](http://www.bacp.co.uk)

Through the use of attentive listening and patience a counsellor can begin to identify the difficulties from the client's point of view, and can help them to see things more clearly and possibly from a different viewpoint. Counselling is a way of enabling choice or change or of reducing confusion. It does not involve giving advice or directing a client to take a particular course of action. Counsellors do not judge or take advantage of their clients in any way.

During counselling sessions the client can explore various aspects of their life and feelings, talking about them freely and openly in a way that is rarely possible with friends or family. Constrained feelings such as anger, anxiety, grief and shame can become very powerful and counselling offers a chance to explore them, with the possibility of making them easier to understand. The counsellor will encourage the expression of feelings and as a result of their training will be able to accept and reflect the client's problems without becoming burdened by them.

Acceptance and respect for the client are fundamental for a counsellor, and as the relationship develops so too does trust between the counsellor and client, allowing the client to look at many aspects of their life, their relationships and themselves, which they may not have been able to face before. The counsellor may help the client to examine in detail the actions or situations which are proving upsetting and to find an area where it would be possible to bring about some change as a start. The counsellor may help the client to look at the options open to them and help them to decide the best for them.



The key function of counselling is to help people think clearly when strong feelings are present. The feelings can arise from an experience in the present. Being told that you are now redundant would obviously produce negative feelings in most people. Someone who got into trouble with head teachers at school might equally find meeting a senior administrator intimidating. This would remind that person of the earlier painful experience. He or she would then find it hard to think.

It is not possible to make a generally accepted distinction between counselling and psychotherapy. There are well founded traditions which use the terms interchangeably and others which make a distinction between them. If there are differences, then they relate more to the individual psychotherapist's or counsellor's training and interests and to the setting in which they work, rather than to any fundamental difference in the two activities. A psychotherapist working in a hospital will be more concerned with severe psychological disorders than with the wider range of problems about which it is appropriate to consult a counsellor. However, in private practice a psychotherapist is more likely to accept clients whose need is less severe. Similarly, in private practice a counsellor's work will overlap with that of a psychotherapist. Those counsellors, however, who work for voluntary agencies or in educational settings such as schools and colleges usually concentrate more on the 'everyday' problems and difficulties of life than on the more severe psychological disorders. Many are qualified to offer therapeutic work which in any other context would be called psychotherapy.

These are some of the problems that may bring people to counselling:

- Relationship difficulties
- Separation/divorce
- Loss and bereavement
- Stress
- Anxiety
- Panic attacks
- Sexual identity problems
- Problems at work
- Depression
- Low self-esteem
- Post traumatic stress
- Abuse
- Worrying
- Sexual abuse
- Sexual problems
- Eating disorders
- Obsessive-compulsive disorder (OCD)
- Anorexia/bulimia/binge
- Family problems
- Parenting, adolescents, bullying, tantrums
- Self harm
- Addictions
- Anger management
- Career crisis
- Mid-life problems

## What counselling does not do

Counselling does not involve telling the person what to do. On the contrary, counselling respects their right to make their own decisions.

Counsellors are professionally trained to work with people on their personal and emotional issues, including depression and suicide. Counselling is about talking to someone who understands what depression is and what can help. Because everyone is different, a counsellor does not simply hand out advice - the discussions in counselling are aimed at helping the client understand what is going on for them and what would help them best.

Counselling is not about giving advice to clients or telling clients what to do or what not to do in their private lives. Counsellors do not prescribe pills to treat symptoms and to make people feel better. If someone is receiving counselling therapy, it does not mean that the client is crazed or dangerous; it only means that the person needs help in a time of great need. Another point to emphasise is that counselling is not a session where the therapist interrogates the client, that is, when the therapist leads the client into topics of conversation that the client feels uncomfortable talking about. In a real counselling setting, the client is free to talk about anything they want to and lead the counsellor to areas where subjects can be further explored. If a client has experienced a situation where the therapist has told you, "Now let's talk about... (A particular subject that the therapist wants to talk about or thinks their client wants to talk about)", then this is not counselling and it is seen as a form of cross-examination.

## The myths about counselling

Although interests in self-development and self-empowerment are steadily growing there are still many people who have pre-conceived ideas about what counselling is all about, and what it can and cannot do. These myths and misconceptions are generally enough to stop someone making progress through counselling, because these ideas will influence the potential client in a negative manner. Exploring the subject of counselling a little further is all that is required to dispel these myths.

### Myth:

**Only mad people need counselling**

### Reality:

The vast majority of people, undergoing some form of counselling, do so simply because they are experiencing difficulties and problems with situations that occur in everyday life. Stress caused by these issues can be overwhelming, and may make a person feel that they are unable to cope with the pressures of life.

This type of client seeks help from a counsellor so that they can gradually take back control of their life. Counselling can provide



empowerment and can also enable a client to view their problems from a clearer perspective. Those suffering from depression and anxiety will also benefit from counselling.

**Myth:**

**How can a stranger help?**

**Reality:**

Most people find it easier to open up to a complete stranger, than to share their most intimate concerns, worries and problems with loved ones. Friends, family members and colleagues generally know us well enough to be able to judge and control us. A counsellor has no vested interest in plans or life, and can therefore actively listen to whatever issues a client may feel they want to voice. They will listen, challenge their thinking and help to identify possible solutions, in a safe, totally confidential environment.

**Myth:**

**Counsellors just sit there and say nothing**

**Reality:**

Counsellors are proactive therapists who will work with the client to identify core issues and to clarify perspective. They will mentally challenge a client and encourage the individual to explore their limiting beliefs and ideas.

**Myth:**

**Counselling takes forever**

**Reality:**

Counselling takes as long as it needs to. You cannot put a time limit on the amount of care, thinking space and attention that a client may require. The more complex and severe the issues are that a client is dealing with, the longer the counselling process may take. Short-term counselling that lasts a period of weeks or months may be sufficient for clients who are more goal-focused. Longer-term counselling, however, will concentrate on the development of the client's mental well-being and personality.

**Myth:**

**Everyone will know you are seeing a counsellor**

**Reality:**

Counselling is a confidential experience shared only by the client and the counsellor. The only people who will know a person is seeing a counsellor are those people they decide to tell themselves.

## Myth:

**Counselling will change the person you are**

## Reality:

Counselling will allow clients to explore core issues from their past, as they identify ways of moving forward with life. Change is a constant thing, and a client will therefore experience a change in their thinking, from session to session. This is all positive progress that will help the client to free themselves from all the negativity they may be mentally carrying around with them.

## The history of counselling

Counselling and psychotherapy theories were being developed during the beginning of the 20th century. However, it is thought that the roots of this subject originated a long time before this. The most renowned work is that of Sigmund Freud whose research into the human mind began in Vienna in 1881. He received training to become a neurologist and began working with patients who were classed as hysterical. Freud named his method psychoanalysis and continued to practice his theories until the 1930s.



Although Freud is thought of as the oldest psychological theorist, it was Franz Anton Mesmer, an 18th century physician who discovered animal magnetism, also known as mesmerism, and James Braid who developed hypnotherapy inspired by Mesmer's ideas. Hypnosis was a technique Freud adopted in his early work to treat mind disorders, but then concentrated on developing his own theories after recognising that hypnotherapy was only a useful technique with certain problems. However, Freud's work remains the most well known in recent times. Freud proposed the division of the mind into ego, superego and id. He also believed that infants pass through oral, anal and phallic stages and becoming 'stuck' in one of the phases could lead to disastrous consequences.

Carl Jung was a close colleague of Freud, but eventually split from Freud to pursue his own school of analytical psychology. His ideas are also widely recognised in recent times. Alfred Adler, Sandor Ferenczi, Karl Abraham and Otto Rank are other influential theorists who worked closely with Freud. Carl Jung, and other descendants of Freud's approach, focused heavily on psychodynamic theories. The 1940s and 1950s marked an important expansion in the field of counselling. The US psychologist Carl Rogers (influenced by Alfred Adler and Otto Rank) established the person centred approach, which is at the heart of most current practice. The person centred approach is now listed under the 'humanistic' branch of psychotherapy. There are now thought to be three general types of psychological therapies; behavioural therapies, psychoanalytical and psychodynamic therapies and humanistic therapies.

## Why counselling might be needed

As previously identified counselling is a talking therapy, a way of exploring what might help a person find their way through their current difficulties. A counsellor will help a person find their own answers to the problems they face, and work towards increasing their sense of competency and self-worth. Counselling may involve encountering painful feelings and facing up to issues they would rather avoid. However, counsellors are experienced in offering relationships that will support a person through this, and hopefully find a way of feeling more at ease with themselves again.

Counsellors will not give guidance or advice on what a person should do. Counsellors believe that with support the person concerned is the best person to work out what is right for them.

## Types of distress

### Abuse

In most relationships one person may be dominant or more forceful. But when the needs of one partner cannot be considered the relationship may become abusive.

Abusive relationships can develop gradually and can usually be identified by patterns of behaviour featuring control and lack of respect for the other person. These may surface slowly and be excused as jealousy or insecurity at first. Often they arise from an intense need for love and affection and can initially seem to enforce the victim's worth.



An abusive relationship is one where one or more of the following may be present:

- There may be threats of physical violence including suicide threats
- Someone controls your behaviour and restricts your freedom
- Criticism and put-downs are constant
- One person's needs cannot be considered.

Abusive relationships are usually progressive as the needs of one partner escalate and those of the other decrease.

Abusers are usually needy and controlling and often act out deep-seated feelings of shame and inadequacy and pull the partner down to their level. Abusers often see themselves as the powerless victims of others' behaviour and find it difficult to take responsibility for their actions.

Abuse can be a family dysfunction and is often a familiar pattern that both partners hook into. Cycles of abuse are often based on an intense need for love and

affection, a terror of being abandoned, low self-esteem, isolation and drug or alcohol abuse.

Uncontrollable anger, jealousy, the need for power and inability to respect other people's boundaries are all common traits of abusers.

Low self-esteem, a background of being abused, difficulty expressing anger and inappropriate loyalty are all common traits of their partners.

SAMPLE







