

COUNSELLING THEORY AND PRACTICE

UNIT-1

Concept of counselling-definition, elements, principles, characteristics and goals, History of Counselling, Foundations of counselling: philosophical foundation, sociological foundation, psychological foundation

UNIT-2

The counsellor: characteristics, ethics, concept of self, attitude, values, beliefs, relationship, self esteem and openness to others, accepting personal responsibility, realistic level of aspiration, self-actualisation. The counselee: person with problem.

UNIT-3

Different approaches; Client - Centred Approach, Behavioural Approach, Rational and Emotive Approach, Psycho-Social Approach, Eclectic Approach.

UNIT-4

The Egan model of counselling: problem exploration and clarification, attending skills, listening skills, understanding verbal and non-verbal message, empathy, genuineness, focusing and summarising skills, facilitating action helping the client seek alternatives

UNIT-5

Counselling in the various setting: education , industry, community, hospital, rehabilitation, family , disaster, correctional, application of social work methods of counselling.

UNIT I

INTRODUCTION

The actual word 'counselling' was first used in 1908 by a radical social activist called Frank Parsons (1854- 1908)

Counselling means assistance to the needed people in which assistance. Counselling does not mean 'Giving Advice'. It can also be thought of as a process in which a person is helped to explore the situation and find solution or answers for a problem. Counselling is a very important part of everyday life. Many people come to ask us advice on matters concerning the job that we do or about a personal crisis. The advice we give or the solutions we make them find are all various aspects of informal counselling.

CONCEPT OF COUNSELLING:

Concept:

1. **RELATIONSHIP:** counselling is relationship between two people where one person attempts to assist the other to organize himself better to attain a form of happiness by adjusting to the situation.
2. **BEHAVIORS:** the relationship between the counsellor and the client helps to openly discuss the problem faced by the client. This helps to increase the skills, courage and self confidence in the client and creates a new behaviour in the client.
3. **NEW METHODS:** are explored to identify solutions for the perceived problem faced by the client. Sometimes, the client may not find a solution, but the thought of being able to share the problem with another person itself can give a **satisfaction to the client.**
4. Counselling also helps to **develop a set of goals** for future behaviour of an individual (client).

II. Meaning of counselling:

Counselling is a method of guidance of an individual. It helps the client to grow to greater maturity by allowing the individual to take responsibilities and to make their own decisions.

It can be considered as a relationship between two people where:

- A. One individual seeks another's help.
- B. One person is willing to guide.
- C. The counsellor is trained to guide and counsel

D. The client and the counsellor are in a setting where help can be given and received.

Fields of Counselling (Extra Notes)

1. Educational Counselling

A term first coined by Truman Kelley in 1914 (Makinde, 1988), educational counselling is a process of rendering services to pupils who need assistance in making decisions about important aspects of their education, such as the choice of courses and studies, decisions regarding interests and ability, and choices of college and high school. Educational counselling increases a pupil's knowledge of educational opportunities.

2. Personal/Social Counselling

Personal counselling deals with emotional distress and behavioural difficulties, which arise when individuals struggle to deal with developmental stages and tasks. Any aspect of development can be turned into an adjustment problem, and it is inevitable that everyone encounters, at some time, exceptional difficulty in meeting an ordinary challenge. For example:

- Anxiety over a career decision
- Lingering anger over an interpersonal conflict
- Insecurities about getting older
- Depressive feelings when bored with work
- Excessive guilt about a serious mistake
- A lack of assertion and confidence
- Grief over the loss of a loved one
- Disillusionment and loneliness after parents' divorce

3. Vocational Counselling

Vocational counselling is defined as individual contacts with those counselled, in order to facilitate career development. This definition and category encompasses counselling situations such as these:

- Helping students become aware of the many occupations to consider
- Interpreting an occupational interest inventory to a student
- Assisting a teenager to decide what to do after school
- Helping a student apply to a college or university
- Role-playing a job interview in preparation for the real thing

Counselling is very necessary as the lives of people are getting complicated every day. Students and youngsters especially need professional counselling help for them to face the many problems of life. Many of them will be suicidal at one point of their life. Counsellors are a great help at those times. Counselling can be used to help students and youngsters in their study habit formation, maintenance of mental health and also to help them achieve maximum efficiency in all their activities.

SKILLS NEEDED IN COUNSELLING (Extra Notes)

Several skills need to be brought into a one-to-one counselling session. These include:

1. Attitudinal skills;
2. Listening skills;
3. Verbal communication skills; and
4. Giving leads.

1. Attitudinal skills;

There is probably nothing which has a greater impact on the outcome of a counselling session than the helper's attitude. Attitudes can be positive or reactive. Attitudes are included in this unit on skills because good attitudes can be learned and practised. They include the following:

- a) Respect
- b) guidance/congruence
- c) Unconditional positive regard
- d) Empathy
- e) self-disclosure
- f) Confrontation

a) Respect

It is one of the most important human attitudes required. It normally begins with respecting one's self, so that others respect you in turn. It is having good intentions and warm regard for students. Respect the students and avoid imposing your values on them. Avoid judgment.

Many times, respect demands praising the individuality of each student, supporting each one's search for him/her, and structuring the counselling to the needs, capacities and resources of the individual student. The teacher needs to ensure that the student accepts the problem and the solution as his/her own.

b) Genuineness/Congruence

Genuineness is at times referred to as congruence. It is the consistency or harmony between what you say, and what you are, as a teacher. This condition reflects honesty, transparency, and trust. This element is basic to a counselling relationship. Once it is established, open communication, warmth and respect for the client gradually develop.

c) Unconditional Positive Regard (Warmth)

You may have experienced situations where a student approached you with a concern, and you blamed the student, or acted as if the student bothered you. These are negative attitudes which are ineffective in counselling. Unconditional, positive regard makes students feel welcomed and valued as individuals. An example to illustrate this warmth is the following:

'Hello, Jane. Can I help you?'

Not

'I am sorry, I am very busy. I prefer you to be very brief.'

'Hello. Can I help you? I am sorry I am very busy and prefer that you be brief.'

d) Empathy

Empathy is your ability, as a teacher, to understand what your student's experience, and communicate this kind of feeling. Carl Rogers (1980), defined it as perceiving the internal frame of reference of another person. Gerald Egan (1990), explains it as entering the private perceptual world of the client, and being sensitive to his/her feelings, whether good or bad. As a teacher, you need to be empathetic. You need to be responsive to both the content and the feelings expressed by students. This attitude helps you to assess students' concerns and understand them better.

e) Self-Disclosure

Self-disclosure helps your student to communicate easily. It is one of the attitudes that help your student to reveal something about him/herself. It helps to create mutual trust, and disarm the student, so that he/she feels free and talks openly. This is equally important for both parties in the counselling session. It promotes a relationship through increased communication and better understanding of the student. It also helps the student to understand him/herself better, and help him/her get rid of the burden of guilt. This is a first step in behavioural change. Opening with self-disclosure helps the student to talk about his/her problems more concretely and realistically, and allows him/her to act accordingly. Disclose only what is necessary.

f) Confrontation

Confrontation is when you use the clients behaviour, or words, to point out inconsistencies between what is said and what is done. When handling a response, confrontation, or challenging attitudes, is a healthy development in counselling.

Confrontation helps to bring out a particular feeling but not in a threatening way. In this way, positive action in the client can be initiated.

For example, a student may say he/she hates a particular teacher and, in another instance, may say that he/she likes her. This is inconsistent.

You could draw the attention of such a student to such inconsistency by saying, 'You said that you did not like the teacher. Now you are saying that you like her. What exactly do you mean?' Remember to bring this out in a 'feeling' and not in a threatening way. You will, in this way, initiate action in your student.

2. Listening skills;

Effective listening is more complicated than it seems, since it involves a teacher's own level of self-awareness, as well as his/her awareness of the spoken and unspoken cues of the other person. Furthermore, a teacher needs to be able to respond to the student in such a way that he/she feels understood. Being a good listener entails receiving and sending appropriate messages. In counselling this is important, because it means meeting the needs of the students.

Listening to students is not just a matter of receiving what they say, but also receiving how they say it. Sometimes how they communicate is much more revealing than what they actually say, which may be more concealing than revealing. Listening skills are basic to all human interaction, whether the purpose is for getting information, conducting in-depth interviews, or offering informal help. Listening is considered to be the most important counselling skill.

3. Verbal communication skills;

The use of words in counselling is a skill which, like any other skill, requires practice to master. Verbal communication takes place first in the literal or content phase. If inappropriate vocabulary is used, rapport and understanding will be hindered. When this happens, miscommunication occurs. Even common words can be misunderstood due to the multiple meanings they carry. Look up any common English word in an unabridged dictionary, and you will find several different definitions of this word. So the potential for miscommunication is great. In addition to the literal phase of verbal communication, there is also the emotional phase. This refers to other attributes involved in vocal interactions, such as volume, the emotional edge, and other non-verbal cues such as gestures. Picture a student

saying, 'I don't care' while angry, or while indifferently walking away from you, or while weeping with his head in his hands. Although the words are the same, the message conveyed is vastly different. As helpers, we must be sensitive to both the literal and emotional phases of verbal communication. In addition to the two general phases of communication that we have just discussed, there are five more levels of communication. Each of these levels is valuable in different contexts. The five levels of communication are:

- a) Clichés;
- b) Facts;
- c) Beliefs;
- d) Emotions; and
- e) Intimacy.

a) *Cliches*

This is a French word which has been adopted by English speakers to mean a trite, well-worn phrase. A universal example is the greeting, 'How are you?' 'I'm fine. How are you?' In some African languages, a formal greeting may take ten minutes and yet nothing new is communicated. Everybody is always *good* or *fine*, because that is the pattern the greeting takes. This is communication at the most superficial level, but an important social obligation is met.

b) *Facts*

Facts are pieces of information that we pass on to others. They include comments on current events like, 'The morning news mentioned that the President is coming to town tomorrow,' or making conversation on the weather e.g., 'Those clouds look as if they could bring rain this afternoon.' The communication of facts may transmit valuable information from one to another, but little interaction takes place.

c) *Beliefs*

Beliefs include any part of an individual's value system. They may communicate insights and choices, or facts which are value-laden. The sharing of one's person begins at this level, and the risk of rejection increases. The sharing of beliefs may include subjects which are considered 'forbidden' in some cultures, such as sex, politics, or religion.

d) *Emotions*

Emotions include communicating personal feelings. 'I am thrilled that I was invited to the party', or 'That teacher is rude, he annoys me'. Communication at this level is difficult for most men and women. It requires a great deal of vulnerability to share feelings with someone

else, and more so when feelings about another are shared. This is the optimum level for counselling to take place. If the student talk to the teacher at an emotional level and the teacher responds at the level of facts or beliefs, counselling may be derailed. A miscommunication may occur. Guidance may take place at the facts or beliefs level, but effective counselling rarely does.

e) Intimacy

Although sometimes used as a euphemism for sexual intercourse, intimacy is more accurately defined as the intercourse of the soul. At this level, the self becomes united to another person. This is a level of communication that many individuals never experience. Indeed there is some debate as to whether such a level is even desirable, since the self may be compromised. In counselling, this is an inappropriate level, since it may encourage the dependency of the student on the helping teacher and thereby inhibit the student's personal growth.

4. Giving Leads

Leads may be defined as statements that counsellors use in communication with the clients. Leads have been classified into categories of techniques, namely:

a) Restatement of Content

Attempts to convey understanding by repeating or rephrasing the communication.

b) Questioning

Seeks further information and asks the person counselled to elaborate a point.

c) Reflection of Feeling

Understanding from the client's point of view and communicating that understanding.

d) Reassurance

Serves as a reward or reinforcing agent. It is often used to support the client's exploration of ideas and feelings or test different behaviour.

e) Interpretation

Explains meaning behind the client's statements.

DEFINITION

According to Pepinsky & Pepinsky “counselling is an interaction which occurs between two individuals called counsellor and client which takes place in professional setting and is initiated to facilitate changes in the behaviour of a client”.

ELEMENTS OF COUNSELLING:

The key elements are:

1. Building rapport and understanding
2. Gathering data
3. Finding out the problem
4. Establishing personal involvement
5. Giving hope
6. Giving homework
7. Terminating the counselling

Elements are the first thing to be learned in any subject.

- Rapport
- Communication
- Counsellor's experience
- Counsellor's change to positive feelings
- Structured counselling interview

PRINCIPLES OF COUNSELLING

- Acceptance
- Individualization
- Privacy
- Confidentiality
- Accepting limitations
- Recording

OTHER PRINCIPLES OF COUNSELLING

Counselling is based on a number of principles. These principles are:

1. **Counselling is a process.** It is necessary for the counsellor to understand that counselling is a process and a slow process. Failure to understand this will result in annoyance and disappointment.
2. **Counselling is for all.** Especially in the school/college situation counselling is meant for all the students and not only for those who are facing problems or other exceptional students. As we have already discussed in the school situation counselling is more
3. **Counselling is based on certain fundamental assumptions.**
 - a) Every individual in this world is capable of taking responsibilities for him/herself.
 - b) Every individual has a right to choose his/her own path, based on the principles of democracy.
4. **Counsellor does not deprive the right of self-choice** but simply facilitates choice. That counsellor should give due respect to the individual and accept him/herself as he/she is.
5. **Counselling is not advice giving.**
6. **Counselling is not thinking for the client,** but thinking with the client. Counselling is for enabling the client to do judicious thinking.
7. **Counselling is not problem-solving.** The counsellor simply assists the person to find solution on his/her own.
8. **Counselling is not interviewing** but conversing with the client in order to help him/herself developing self understanding,
9. **The counsellor should determine individual differences** and provide for them.
10. **The counsellor has to prepare the client** to open to criticism including self-criticism.
11. **The counsellor acts as a facilitator or catalyst only.** He creates an atmosphere which is permissive and non-threatening, through his warm and accepting relationship with the client which helps the client to explore himself/herself and understand himself/herself better.

CHARACTERISTICS OF COUNSELLING:

1. Counselling is a profession dealing with Human Behaviour.
2. It has its own standards of education and training which is formal.

- 3.It has a systematic body of knowledge that can be imparted.
- 4.It has a set of Technical Skills which may be acquired
5. It is a learning oriented process.
- 6.It is a face to face relationship.
- 7.It is a democratic process.
- 8.Successful counselling is based on Goal Setting and Attainment.
- 9.It is based on Mutual and Professional Relationship.
10. It takes place in a professional setting.

GOALS OF COUNSELLING

What is a goal?

Goal is something that has to be achieved.

Mainly there are three types of goals,

1. Immediate goal
2. Long term goal
3. Ultimate Goal

1.Immediate goal

Immediate goal means when a person comes to a counsellor our immediate goal is to give relief to the client; it can be given through supportive therapy or through the creation of rapport.

2.Long term goal

This is to make a client to a fully functioning person. These two goals can be achieved through a process or mediate goal. Precipitating factors and pre disposing factors are

Important when achieving goals. This process is achieved through self exploration that leads to behavioural change.

3.Ultimate goal

This is to make the client a fully functioning and to lead a good family life, to lead a creative life.

Counselling has six major goals and they are:

- Achieving positive mental health
- Resolution of problem
- Improving personal effectiveness
- Modification of behaviour
- Helping to change
- Decision making

Many consider counselling a panacea for all ills, which is not true. Individuals have wide ranging and many a time unrealistic expectations regarding counselling. This in turn led to disappointment. The reason for this state of affairs is lack of proper understanding as to what exactly are the goals of counselling.

Some of the major goals of counselling generally accepted by counsellor are given below:

1. Achievement of positive mental health Counselling

An individual is said to have positive mental health when he is able to relate meaningfully with others and lead a fulfilling life. He is able to love and be loved. One goal of counselling is to help the individual to attain this state.

2. Problem resolution

Another goal of counselling is to help the individual to come out of a difficult situation or problem. It must be remembered that the individual is only assisted and he himself find solution for the problems.

3. Counselling for decision-making

Ability to make right and timely decisions is crucial for success in life. One major goal of counselling is to make individual capable of making independent decisions. Counsellor may

assist the individual by providing necessary informing or clarifying the counselee's goals, etc. but the decision should be taken by the counselee herself/herself.

4. Improving personal effectiveness

An effective person is one who is able to control impulses, think in creative ways and has the competence to recognize, define and solve problems. It can be seen that these different goals are not exclusive. These are all interdependent and overlapping.

5. Help change

For development, change is always necessary. Counselling helps individual to make changes in their attitude, perceptions or personality.

6. Behaviour modification

Another aim of counselling is to help in modifying behaviour. Removal of undesirable behaviour or self-defeating behaviour and learning desirable behaviour is considered necessary for attaining effectiveness and good adjustment. The behaviourally oriented counsellors are the chief proponents of this view.

HISTORY OF COUNSELLING

➤ *Early stage/ pre-historic counselling period: -*

Early counsellors were priest, medicine man- shaman, physicians and philosophers.

➤ *Ancient Guru's and Religious Leaders:*

Budha, Socrates, Mosis are considered as ancient Guru's and religious leaders. They assisted in spiritual, religious aspects of their followers.

➤ *The first founders of counselling:-*

The important founder during this period was Hippocrates, a Greek Philosopher who discovers Homeostasis (physiological balance in the body) and Prognosis (how a disease develops). He was the person who introduced systematic counselling intervention. And he also takes case history and builds a trust in patient. Sigmund Freud and Joseph Breuer was the another important founders who founds that Hypnosis as the study of unconscious mind. Sigmund Freud brought a formal method of psychoanalysis (id, ego, super-ego, dream analysis etc.).

➤ *Influence from psychologist (19th century)*

During the period of 19th Century far-reaching innovations in the field of psychology were made.

- ❖ This period saw the founding of the first psychological laboratory at Leipzig by Wilhelm Wundt in 1879.
- ❖ Stanley Hall started the first psychological laboratory in the USA in 1883.
- ❖ In 1895, George Merrill established the first systematic vocational programme in San Francisco.
- ❖ Lightner Witmer heralded the beginning of the counselling movement by founding the first psychological clinic in 1896.
- ❖ J. B. Miner established and directed the free clinic in mental development at the University of Minnesota in 1909.
- ❖ However, it was Jesse B. Davis who first used the term “Counselling”.

➤ *Significant Events in 20th Century (1900-1930)*

During the first few years of the twentieth century several significant events took place. They were:

- The first convention of the International Congress of Psychoanalysis was held at Salzburg.
- Stanley Hall invited Carl Gustav Jung to lecture at the Clark University.
- Clifford Beers launched the ‘Mental Hygiene Movement’ with his epoch-making book, *The mind that found itself*.
- The use of psychological principles was advocated in pastoral counselling by Rev. Elwood Worcester.
- The vocational Guidance movement was started on a modest scale by Samuel Frank Parsons and Eli Weaver in Boston and Brooklyn respectively.
- Guidance was introduced by Wheatly and Boyden and Jessie Davis.
- Binnet-Simon tests of intelligence were adapted to American conditions about this time.

- The progressive Education Movement was initiated by John Dewey with his epoch-making book, '*How we Think*'.
- The school of social work started by Mrs. Adolf Meyer
- E.L Thorndike and Robert Yerkes helped develop the *Army Alpha* and *Army Beta* tests for screening the defence personnel.
- James Burt Miner developed the first ever known questionnaire in 1908.
- R.S. Woodworth and F.L Wells association tests and psychometric inventory in 1911, which was developed as a screening device for the army recruits.

➤ ***Development of tools and techniques(1930-1940)***

From the end of World War I to the outbreak of World War II, saw the publication of books and important psychological tests, such as Harry Kitson's '*psychology of Vocational Adjustment*' (1925), Clark. L. Hull's *Aptitude Testing* (1927) and E.K Strong Jr's *Strong Vocational Interest Blank* (SVIB-1943).

- National vocational Guidance Association (NVGA), founded in 1913, formed the American Council of Guidance and Personnel Association in 1934.
- Robert Hoppock, a former secretary of NVGA published his book *Job satisfaction* in 1935.
- L.L. Thurstone's *Tests of Primary Mental Abilities* in 1938.
- Donald Paterson and E.G. Williamson during 1930-1940 at Minnesota, concerned with the objective assessment of the individual's abilities.

➤ ***Counselling Era(second World War and after)***

Counselling which finally established as a science in its own right was achieved through Carl Roger's book, *Counselling and Psychotherapy* (1942).

- In 1944, the *Army separation and Classification and counselling Program* was initiated and the *United States Employment Services* (USES) published the *General Aptitude Test Battery* (GATB) in 1945.
- First journal of Counselling Psychology was published in 1954.

➤ ***Era of therapeutic counselling:-***

The domain of mental health was given importance. Individual freedom, liberty, values of life all taken in to consideration. Counselling settings were diversified. Community mental health care was started and counselling involves four main aspects:

❖ Self understanding

❖ Self direction

❖ Self realization

❖ Self actualization

➤ ***Licensing, regulation and research were given importance***

- 1973 in US and in 1992 in India standardized counselling practice and diploma in counselling was started. But India does not have Licensing authority.
- Research was done on psycho social care, stress, trauma etc. And they say that counselling is necessary in those areas.
- In 2004 NIMHANS started Disaster management programme with the Govt. Of India.

FOUNDATIONS OF COUNSELLING: There are main 3 foundations based on which Counselling is done:

- Philosophical Foundation
- Sociological Foundation
- Psychological Foundation.

Foundation of counselling includes many disciplines such as Philosophy, Sociology, and Psychology etc. Psychiatry, family studies and social work are the other disciplines that pave the foundations to counselling.

1.Philosophical foundation:

The philosophy deals with human values and the counselling gives importance to human value. The philosophy tells about the sense of purpose in life, while

counselling helps to attain or make him understand about the purpose of life. Philosophy tells about values, sensible, being considerable, being right and wrong etc. On the other hand, all these are practiced in counselling. Counselling beliefs in man's faith, his abilities and this is what philosophy teaches us

Smith's Philosophical Foundation of Counselling:

- Faith in humanity
- Concern for other person
- Belief in potentiality and inner strength of man
- Self responsibility
- Freedom to choose sovereignty
- Cherishing values of life.

2. Sociological foundation

It studies about how a man functions in social settings. In counselling, we deal with individual and their problem. Unless, we know about the society, we cannot solve the problem. Thus, the counsellor should know the culture and values of the society in which he is practicing counselling. Values, beliefs, systems acquired from the society can be useful in providing counselling.

Counselling respects values, beliefs, systems of the client. Sociology teaches about the uniqueness about all these aspects. It also teaches about the various aspects of life.

Each culture and system is different from the other; hence what is right in one culture may be wrong in another culture. Hence counselling must be based on the values of the client and not of the counsellor.

Eg: Children sleeping with parents is accepted in India. But in the west it is not accepted.

3. Psychological foundation

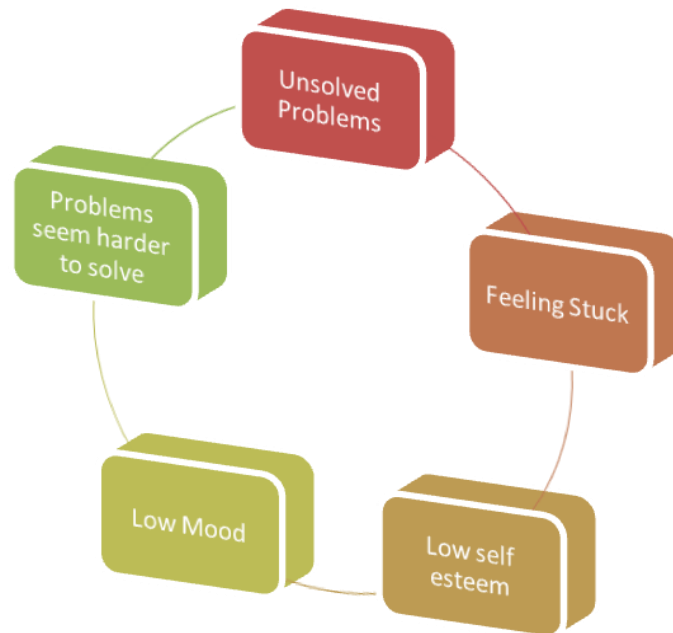
Counselling deals with human behaviour and psychology is the scientific study of human behaviour. Counselling has roots in psychoanalysis (ego stages, free association, dream analysis). Functionalism in 1990's is an important aspect in counselling.

Psychology also talks about the primary interest of the client. It deals with Motivation, Personality, Development stages, Memory, Nature and Nurture, defence Mechanism etc. It

also talks about code of ethics which is applied in counselling. Concept of self and goal directed behaviour is very important in counselling.

UNIT 2

PROBLEM CYCLE



PROBLEM SOLVING CYCLE



THE COUNSELLOR

General Characteristics of counsellor

The importance of the counsellor attitude to counselling outcomes cannot be over emphasized .in order to identify the counsellor characteristics which are of concern, investigators employed four approaches.

- **SPECULATION** - The question as to what the characteristics of an effective counsellor are too led to speculation. The national vocational guidance association (1949) listed such characteristics as interest in people, patience, sensitiveness, emotional stability and objectivity as being important for good counselling.
- **IDENTIFYING THE EFFECTIVE AND INEFFECTIVE GROUPS**: Steffre King (1962) found effective and ineffective counselor samples on the four dimensions studied namely academic promise, interest and promise, personality characteristics and self concept. The effective group obtained high score on academic aptitude and performance and scored higher on social welfare.
- **Hypothesized characteristics**: the approach is used to find out whether certain characteristics that have been hypothesized as necessary for counseling present and functioning.
- Bandura(1956) tested the hypothesis that component and psychotherapists are (a)Less anxious than those judged to be less competent and (b)possess grater insight in to the nature of their own anxieties than do less competent therapist. He concluded that the presence of anxiety in the therapist, whether recognized or not affects his ability to do successful psychotherapy and insight in to his anxieties alone is not sufficient.

Correlation analysis: the fourth approach consists in exploring the relationship between counselor variables and some to measure the effectiveness derived from correlation analysis. The characteristics of counselor are assessed employing the self report and rating techniques. Four types of criteria are frequently employed namely, superior. In short the effectiveness counselor was

Age: clients perceive their counselor in different ways depending on the counselor age. If the counsellor is younger than the client, then the later will have less confidence in him.

Experience: High correlations were obtained between experience and age. It was found that counselor improve with experience. The counselor who work in appropriate settings acquire experience through attending conference, reading professional books and journals and conducting research.

Sex: there is a general notion that male counselor are preferred. kolile and bird(1956)and fuller(1963,1964)concluded that female clients prefer to discuss emotionally loaded problems with female counselor .

Weriz (1957) have suggested the following traits of successful counselor are: interest in people, perceptual sensitivity, personal adjustment, personal security, geniuses are the personal skill that are required for a counselor.

THE COUNSELLOR

Introduction

Today many drinkers, alcoholics, addicts' codependents and adult children of alcohols have experienced good and bad counselor. These guidelines may help next time you seek. To be effective counseling needs to be provided in a way that that meets a set of well-defined criteria condensing many hundreds of studies, psychologist Bruce Wampold , in a recent American psychological association symposium boiled these ingredients down to this baker's dozen. Counselor's main duties are select education and training programs, balance work and other life roles, navigate career transaction and stages, enhance career satisfaction, find employment or self-employment opportunities, write resumes, develop portfolios and prepare for interviews. Counseling is often performed face to face in confidential sessions between the counselor and the client. However, counseling can also be undertaken by telephone, in writing, and internet.

Many people seeking counseling have problems or past experience in their life, which they find difficult to overcome counseling help the person face the effect of past experience and seek ways to overcome.

MAIN CHARACTERISTICS OF A GOOD COUNSELLOR

1. A genuine interest in and respect for people from all walks of life.
2. Patients understanding and the ability to listen non-judge mentally.
3. Excellent oral and written communication skills and presentation skills.
4. Objectivity and fact.
5. The ability to motivate and inspire clients.
6. The ability to facilitate communication in group of 8 to 20 people.
7. Good organizational and planning skills.
8. The ability to work effectively with others professional and community agencies.
9. Help people to develop a better appreciation of their unique characteristics and how those characteristics relate to career choice.
10. Help client's identify educational requirements and develop planning plans.
11. Facilitate career management and career decision making workshop.
12. Help the client deal with barriers to achieving their career plans.
13. Provide current labor market information to help client make realistic occupational or employment decisions.
14. Market clients to potential employers and help client to find job or work experience placement.
15. Perform related administrative tasks such as keeping records.
16. Plan and implement career and employment related programs
17. Refer clients to appropriate service to address their particular needs.

Counseling is a process that enables a person to sort out issues and reach decision affecting their life. Often counseling is sort out of times of chances of crisis, it needs not to be so, however, as counseling can also help us at any time of our life.

ETHICS OF COUNSELORS

INTRODUCTION: - Mental health counsellors believe in the dignity and worth of the individual. They are committed to increasing knowledge of human behavior and understanding of themselves and others. While pursuing these endeavours, they make every reasonable effort to protect the welfare of those who seek their services, or of any subject that may be the object of study. They use their skills only for purposes consistent with these values and do not knowingly permit their misuse by others. While demanding for themselves freedom of inquiry and community, mental health counselors accept the responsibility this freedom confers: competence, objectivity in the application of skills, and concern for the best interest of clients, colleagues, and society in general

Welfare of the Client/Counselee

A) Primary Responsibility

1. The primary responsibility of the mental health counselor is to respect the dignity and integrity of the client. Client growth and development are encouraged in ways that foster the client's interest and promote welfare.
2. Mental health counselors are aware of their influential position with respect to their clients, and avoid exploiting the trust and fostering dependency of their clients.
3. Mental health counselors fully inform consumers as to the purpose and nature of any evaluation, treatment, education or training procedure and they fully acknowledge that the consumer has the freedom of choice with regard to participation.

B) Freedom of Choice

Mental health counselors offer clients the freedom to choose whether to enter into a counseling relationship and determine which professionals will provide the counseling. Restrictions that limit clients' choices are fully explained.

C) Clients Served by Others

1. If a client is receiving services from another mental health professional or counselor, the mental health counselor secures consent from the client, informs that professional of the arrangement, and develops a clear agreement to avoid confusion and conflicts for the client.
2. Mental health counselors are aware of the intimacy and responsibilities inherent in the counseling relationship. They maintain respect for the client and avoid actions that seek to meet their personal needs at the expense of the client. Mental health counselors are aware of their own values, attitudes, beliefs and behaviors, and how these apply in a diverse society. They avoid imposing their values on the consumer.

D) Diversity

1. Mental health counselors do not condone or engage in any discrimination based on age, color, culture, disability, ethnic group, gender, race, religion, sexual orientation, marital status or socioeconomic status.
2. Mental health counselors will actively attempt to understand the diverse cultural backgrounds of the clients with whom they work. This includes learning how the counselor's own cultural/ethical/racial/religious identity impacts his or her own values and beliefs about the counseling process. When there is a conflict between the client's goals, identity and/or values and those of the mental health counselor, a referral to an appropriate colleague must be arranged.

E) Dual Relationships

Mental health counselors are aware of their influential position with respect to their clients and avoid exploiting the trust and fostering dependency of the client.

1. Mental health counselors make every effort to avoid dual relationships with clients that could impair professional judgement or increase the risk of harm. Examples of such relationships may include, but are not limited to: familial, social, financial, business, or close personal relationships with the clients.
2. Mental health counselors do not accept as clients individuals with whom they are involved in an administrative, supervisory, and evaluative nature. When acting as supervisors, trainers,

or employers, mental health counselors accord recipients informed choice, confidentiality and protection from physical and mental harm.

3. When a dual relationship cannot be avoided, counselors take appropriate professional precautions such as informed consent, consultation, supervision and documentation to ensure that judgement is not impaired and no exploitation has occurred.

F) Sexual Relationships

Sexual relationships with clients are strictly prohibited. Mental health counselors do not counsel persons with whom they have had a previous sexual relationship.

G) Former Clients

Counselors do not engage in sexual intimacies with former clients within a minimum of two years after terminating the counseling relationship. The mental health counselor has the responsibility to examine and document thoroughly that such relations did not have an exploitative nature based on factors such as duration of counseling, amount of time since counseling, termination circumstances, the client's personal history and mental status, adverse impact on the client, and actions by the counselor suggesting a plan to initiate a sexual relationship with the client after termination.

H) Multiple Clients

When mental health counselors agree to provide counseling services to two or more persons who have a relationship (such as husband and wife, or parents and children), counselors clarify at the outset which person or persons are clients, and the nature of the relationship they will have with each involved person. If it becomes apparent that counselors may be called upon to perform potentially conflicting roles, they clarify, adjust, or withdraw from roles appropriately.

I) Informed Consent

Mental health counselors are responsible for making their services readily accessible to clients in a manner that facilitates the clients' abilities to make an informed choice when selecting a provider. This responsibility includes a clear description of what the client can expect in the way of tests, reports, billing, therapeutic regime and schedules, and the use of the mental health counselor's statement of professional disclosure. In the event that a client is

a minor or possesses disabilities that would prohibit informed consent, the mental health counselor acts in the client's best interest.

J) Conflict of Interest

Mental health counselors are aware of possible conflicts of interests that may involve the organization in which they are employed and their client. When conflicts occur, mental health counselors clarify the nature of the conflict and inform all parties of the nature and direction of their loyalties and responsibilities, and keep all parties informed of their commitments.

K) Fees and Bartering

1. Mental health counselors clearly explain to clients, prior to entering the counseling relationship, all financial arrangements related to professional services and legal measures for non payment.
2. In establishing fees for professional counseling services, mental health counselors consider the financial status of their clients and locality. In the event that the payment of the mental health counselor's usual fees would create undue hardship for the client, assistance is provided in attempting to find comparable services at an acceptable cost.
3. Mental health counselors ordinarily refrain from accepting goods or services from clients in return for counseling service because such arrangements create inherent potential for conflicts, exploitation and distortion of the professional relationship. Participation in bartering is only used when there is no exploitation, if the client requests it, if a clear written contract is established, and if such an arrangement is an accepted practice among professionals in the community.

L) Pro Bono Service

Mental health counselors contribute to society by devoting a portion of their professional activity to services for which there is little or no financial return.

M) Consulting

Mental health counselors may choose to consult with any other professionally competent person about a client. In choosing a consultant, the mental health counselor should avoid

placing the consultant in a conflict of interest situation that would preclude the consultant from being a proper party to the mental health counselor's effort to help the client.

N) Termination and Referral

Mental health counselors do not abandon or neglect their clients in counseling. Assistance is given in making appropriate arrangements for the continuation of treatment, when necessary, during interruptions such as vacation and following termination.

O) Inability to assist clients

If the mental health counselor determines that their services are not beneficial to the client, they avoid entering or terminate immediately a counseling relationship. Mental health counselors are knowledgeable about referral sources and appropriate referrals are made. If clients decline the suggested referral, mental health counselors discontinue the relationship.

P) Appropriate Termination

Mental health counselors terminate a counseling relationship, securing a client's agreement when possible, when it is reasonably clear that the client is no longer benefiting, when services are no longer required, when counseling no longer serves the needs and interests of the client, when clients do not pay fees charged, or when agency or institution limits do not allow provision of further counseling services.

Confidentiality

Mental health counselors have a primary obligation to safeguard information about individuals obtained in the course of practice, teaching, or research. Personal information is communicated to others only with the person's written consent or in those circumstances where there is clear and imminent danger to the client, to others or to society. Disclosure of counseling information is restricted to what is necessary, relevant and verifiable.

A) At the outset of any counseling relationship, mental health counselors make their clients aware of their rights in regard to the confidential nature of the counseling relationship. They fully disclose the limits of, or exceptions to, confidentiality, and/or the existence of privileged communication, if any.

B) All materials in the official record shall be shared with the client, who shall have the right to decide what information may be shared with anyone beyond the immediate provider of service and be informed of the implications of the materials to be shared.

C) Confidentiality belongs to the clients. They may direct the mental health counselor, in writing, to release information to others. The release of information without the consent of the client may only take place under the most extreme circumstances. The protection of life, as in the case of suicidal or homicidal clients, exceeds the requirements of confidentiality. The protection of a child, an elderly person, or a person not competent to care for themselves from physical or sexual abuse or neglect requires that a report be made to a legally constituted authority. The mental health counselor complies with all state and federal statutes concerning mandated reporting of suicidality, homicidality, child abuse, incompetent person abuse and elder abuse. The protection of the public or another individual from a contagious condition known to be fatal also requires action that may include reporting the willful infection of another with the condition.

The mental health counselor (or staff member) does not release information by request unless accompanied by a specific release of information or a valid court order. Mental health counselors will comply with the order of a court to release information but they will inform the client of the receipt of such an order. A subpoena is insufficient to release information. In such a case, the counselor must inform his client of the situation and, if the client refuses release, coordinate between the client's attorney and the requesting attorney so as to protect client confidentiality and one's own legal welfare.

In the case of all of the above exceptions to confidentiality, the mental health counselor will release only such information as is necessary to accomplish the action required by the exception.

D) When using a computer to store confidential information, mental health counsellors take measures to control access to such information. When such information has outlived its usefulness, it should be deleted from the system.

Pursuit of Research Activities

Mental health counsellors who conduct research must do so with regard to ethical principles. The decision to undertake research should rest upon a considered judgment by the individual counsellor about how best to contribute to counselling and to human welfare. Mental health

counsellors carry out their investigations with respect for the people who participate and with concern for their dignity and welfare.

Competence

The maintenance of high standards of professional competence is a responsibility shared by all mental health counselors in the best interests of the public and the profession. Mental health counselors recognize the boundaries of their particular competencies and the limitations of their expertise. Mental health counselors only provide those services and use only those techniques for which they are qualified by education, techniques or experience. Mental health counselors maintain knowledge of relevant scientific and professional information related to the services they render, and they recognize the need for on-going education

Professional Relationships

Mental health counselors act with due regard for the needs and feelings of their colleagues in counseling and other professions.

Mental health counselors respect the prerogatives and obligations of the institutions or organizations with which they associate.

Supervisee, Student and Employee Relationships

Mental health counselors have an ethical concern for the integrity and welfare of supervisees, students, and employees. They maintain these relationships on a professional and confidential basis. They recognize the influential position they have with regard to both current and former supervisees, students and employees. They avoid exploiting their trust and dependency.

Moral and Legal Standards

Mental health counselors recognize that they have a moral, legal and ethical responsibility to the community and to the general public. Mental health counselors should be aware of the prevailing community standards and the impact of professional standards on the community.

Professional Responsibility

In their commitment to the understanding of human behavior, mental health counselors value objectivity and integrity, and in providing services they maintain the highest standards. They accept responsibility for the consequences of their work and make every effort to ensure that their services are used appropriately.

Public Statements

Mental health counselors in their professional roles may be expected or required to make public statements providing counseling information or professional opinions; or supply information about the availability of counseling products and services.

In making such statements, mental health counselors take into full account the limits and uncertainties of present counseling knowledge and techniques. They represent, as accurately and objectively as possible, their professional qualifications, expertise, affiliations, and functions, as well as those of the institutions or organizations with which the statements may be associated. All public statements, announcements of services, and promotional activities should serve the purpose of providing sufficient information to aid the consumer public in making informed judgments and choices on matters that concern it. When announcing professional counseling services, mental health counselors may describe or explain those services offered but may not evaluate as to their quality or uniqueness and do not allow for testimonials by implication. All public statements should be otherwise consistent with this Code of Ethics.

CONCEPT OF SELF

Self –concept is a multi-dimensional construct that refers to an individual’s perception of “self” in relation to any number of characteristics such as academics, gender roles, sexuality, racial identity and many others.

In the course of development, the child differentiates himself from the rest of his environment, so that a part of his experience is symbolized in his awareness as self-experience. This leads to the concept of the self becoming defined through interaction with others of significance in the environment. The child perceives experience as reality. For him, his experiences are either satisfying or not satisfying. They are therefore, valued as positive

or negative. The negatively valued experiences are avoided while the positive ones are sought. All such experiences are integrated in to the growing self-concept of the individual.

“Self” is the nuclear concept in Roger’s theory. It is conceived as something that develops as a result of the interaction of the individual with his environment. The ‘self’ strives for consistency. The individual acts largely in a way consistent with the self. Experiences which are not consistent with the self- structure are perceived as threats. The self is not a static, unchanging entity. It may change as a result of several factors, the most important of which are maturation and learning.

Self-concept may be conceived as an organized gestalt comprising:-

- The individuals perceptions of himself and the values attached to him
- The individual’s perception of himself in relation to other persons and values attached to them.
- The individual’s perceptions of the various aspects of the environment and the values attached to them.

Self-concept is not self-awareness or consciousness. It is the conceptual gestalt concerning oneself which need not always be in awareness, but available to awareness. As the perceptions and values attached to them change from time to time, the self-concept is not a fixed or static.

When the individual can perceive and accept in to his self in a consistent and integrated manner all his experience, he will naturally become more understanding of others. Thus, a counsellor should have the knowledge of self. It will help him to understand others problem and solve others problem. The goal of counselling is to make the individual a fully functioning person. So by understanding self, we understand others and make them to a fully functioning person.

Roger’s theory of personality, more popularly known as ‘self theory’ of personality has evolved from his counselling practice.

ATTITUDE OF A COUNELLOR

INTRODUCTION

Counselling is an interactive process conjoining the counselee who needs assistance and the counsellor who is trained and educated to give this assistance. The goal of counselling is to help individuals overcome many of their future problem .Counselling is a one to one relationship in which the counsellor provides a friendly and warm environment for the counsel lee to verbalize his problems and consider the appropriate solutions.

The nature of counselling relationship depends to large extends on the impact of counsellors attitude on the client. A few writers classify acceptance and understanding as techniques, and a few as attitudes. Rogers 1961 defines acceptance as a warm regard for the client as a person of on conditional self-worth and of value. No matter what his condition his behaviour or his feelings are.

According to Tiles, the two basic components of acceptance are 1. Willingness to let individuals differ from one another in their behaviours and 2. Realization that the experiences of each person comprise a complex pattern of striving, thinking and feeling. This appreciation of the clients grows out of the counsellor's non judgemental attitude.

ATTITUDE OF A COUNSELLOR

POSITIVE REGARD

A counsellor must be able to show a positive unconditional regard for the wellbeing of a client if a successfully progressive counselling relationship is to be formed. It is the basis from which a client can explore their emotion without this unconditional support a client will feel inhibited and unable to express their true personality, difficulties and emotions.

RESPECT

Whilst maintain a professional focus a counsellor able to show a genuine openness within the counselling relationship. A client must feel comfortable, safe and confident that

confidentiality will be maintained at all times and also that the counsellor is committed to helping and supporting.

EMPATHY

Empathetic understanding and ability to see things from the client's perspective is also important, as is the counsellors ability to demonstrate an investments of their time and full attention.

WARMTH AND UNDERSTANDING

Empathy and genuineness encourages clients to relax and trust. It also encourages client self disclosure. Maintaining warmth and understanding, without being judgemental, proves the client with a comfortable foundation relationship. Counsellors also show their own personality and ensure there is a friendly atmosphere and attitude. In order to grow counselling relationship Conveying warmth through body language, using postures, maintaining eye contact and personal space, encouraging a client to trust the counsellor. Counsellors should also be aware of the way they speak-the tone of voice, speed of speech and delivery -as the word used should be in agreement with the way their body language provides reassurance. Warmth should be handled with care however, as a client who exhibits feeling of unease, distance and mistrust may feel initially threatened by sympathetic behaviour.

A capable counsellor must possess a number of personal qualities and develop the proper attitudes to make a client feel at ease and to build rapport so that a client can self-disclose. A counsellor should be agreeable and act appropriately to provide the client with a comfortable foundation for the counselling relationship.

VALUES OF COUNSELLORS:

Counselling is an interactive process conjoining the counselee who needs assistance and the counsellor who is trained and educated to give this assistance. The goal of counselling is to help individuals overcome many of their future problem .Counselling is a one to one

relationship in which the counsellor provides a friendly and warm environment for the counsellee to verbalize his problems and consider the appropriate solutions.

Willison (1958), points out that counsellor cannot be indifferent to social and moral standards and should not try to be neutral. Samler states that counsellors should be fully aware of their values, because a changing value constitutes an important counselling goal. The counsellor however is expected to expose his values to the clients and not pretend as though he does not have any values.

IMPORTANT VALUES

Acceptance

Rogers attaches great importance to the principle of acceptance. The nature of a counselling relationship is defined and set by this principle of the counsellor regarding the client unconditionally as a person of self-warmth. Sometimes we have conditional acceptance which on social relationship can escape. An ideal counselling relationship is one in which acceptance is unconditional. Complete acceptance does not involve normative or judgemental attitudes.

Understanding

One of the basic needs of an individual is the need to be understood. This touches the deepest feelings of the individual. To be understood is to be loved, liked and accepted. According to Tyler "understanding is the ability to grasp clearly and completely the meaning the client is trying to convey."

Rapport

Stone defines rapport as an essential condition for a comfortable and unconditional relationship between the counsellor and counsellee. Rapport means interest, responsiveness and summative emotional involvement. Counsellors use rapport as a technique in the initial stage of the interview to put the counsellee at ease.

Values include:

@ Human rights and dignity of the client

@ Supporting and alleviating personal distress.

@ Appreciating the difference in culture and human experience and remaining non judgemental.

@ Providing adequate counselling services, while ensuring the integrity of the client/counsellor relationship.

@ Maintaining client confidentiality and ethical principles.

@ Empathy.

A capable counsellor must possess a number of personal qualities and develop the proper attitudes to make a client feel at ease and to build rapport so that a client can self dispose. A counsellor should be agreeable act appropriately to provide the client with a comfortable foundation for the counselling relationship.

BELIEFS OF A COUNSELLOR

The term 'counselling' is used by individuals engaged in different occupational fields like school counselling, employment counselling, and marriage counselling and so on. The professional counsellors have much in common as they are all concerned with helping others. Counsellor's efforts whether crisis based have a clear focus on the counselee's future. An essential aspect of all counselling relationships is to help the counselee focus on his/her personal future; explore the desirable possibilities and their feasibility to develop plans that would lead to a desirable resolution of the problem situations. In trying to help the counselee reach this goal, the counsellor has to inspire feelings of trust, credibility and confidence.

The core of counselling process is the relationship established between the counsellor and the client. The unique factors, for instance, comprise counsellor and counselee attitudes, beliefs, likes and dislikes, physical characteristics and home and social backgrounds of the counsellor and counselee.

COUNSELLOR'S BELIEF:

The nature of the counselling relationship depends to a large extent on the impact of the counsellor's attitudes on the client.

The dominant belief of the counsellor should be that the client be treated with dignity, equality and individuality. The counsellor believes in the worth and value of the counselee. He believes in man's need for freedom and liberty. Here liberty means the power to strive for goals without any external constraints. In developing this characteristic in the client the freedom to make appropriate choices is essential. Many counsellors believe that counsees have the ability to deal efficiently with their problems.

Rapport, empathy and attentiveness are the three skills which can either facilitate or inhibit the counselling process. These skills are closely related to acceptance and understanding.

COUNSELLING BELIEF

Counselling is a one to one relationship in which the counsellor provides a friendly and warm environment for the counselee to verbalize his problems and consider the appropriate solutions. In this subtle relationship it is suggested that the counsellor may unwittingly modify the beliefs and values of the counselee. This is a highly sensitive issue. However, it is expected that the counsellor will take an objective attitude and not allow his subjective attitude to influence his professional relationships. The counsellor is not supposed to criticize or exhibit an attitude of derision towards the beliefs of the client. Such an attitude is not expected from any cultured individual, let alone a counsellor. The counsellor would be perfectly within his rights if he were to modify the false or wrong beliefs of the client. But if the beliefs concern the basic philosophy of life, or the religion of the client the counsellor is expected to adopt a neutral attitude.

CONCLUSION

The counselling relationship is the most important aspect of the counselling process. However, it does not easily lend itself to a clear definition. It is a relationship of mutual trust and confidence on the part of both the counselee and the counsellor and the concern for the well being of the counselee on the part of the counsellor. Thus the counselling relationship encompasses the whole of the counselling situation and affects its progress at every stage.

RELATIONSHIP OF COUNSELOR

Who is counsellor?

A counsellor is a person who is involved in counselling it refers to a person who is concerned with the profession of giving advice on various things such as academic matters, vocational issues and personal relationship. He is generally a professional & an expert in his field of functioning.

There are different types of counsellors

- ❖ Rehabilitation counsellor
- ❖ Marriage and family counsellor
- ❖ School counsellor
- ❖ Mental health counsellor
- ❖ Online counsellor
- ❖ Legal counsellor

Relationship between client and counsellor

Counselling is not only about exploring core issues and gaining a different perspective on problem and psychological difficulties. It is also about building a rapport and trust with the counsellor, so that a client feels comfortable enough to open up and voice their worries. This relationship is built on trust and confidentiality, and can make all the difference between a positive and negative counselling experience.

Behaviour pattern

A counsellor will never impose their own values or beliefs on a client, and will remain impartial and non – judgemental. The counselling process is an opportunity for the client to explore their own values and beliefs, and to understand how to challenge him/ here self to make positive changes in their life.

Developing a relationship

In order that client feels comfortable in expressing him/ herself in an uninhibited way, the relationship between the client and the counsellor needs to be built on reciprocal trust. It is the counsellor responsibility to provide a safe, confidential environment, and to offer empathy, understanding and respect.

Seeking advice

The relationship between client & counsellor is based on a one side discussion. It is not a counsellor's responsibility to offer advice, unless the client specifically asks for it.

Relationship issues

Self respect and linking oneself are the most important ingredients for any good relationship. If these are in short supply you may consider counselling to address them. Any relationship that diminishes a person's self esteem should be examined closely.

Symptoms of relationship difficulties

- Repetitive, destructive pattern at work or home
- Here we go again feelings
- Feelings bullied or pressurised
- Feeling of being held back for no apparent reason
- Limiting of social life for fear of consequence
- Anxiety or depression

Relationship counselling can offer the change to examine our patterns of interacting with those around us to allow us to lead healthier and happier lives. We can improve our relationship with work colleagues, friends or an intimate partner when we make conscious choices and learn new skills.

How can relationship counselling help?

- Destructive pattern of relating can be recognised and addressed.
- Conflict and communication can be improved.
- New relationship skill can be learned.

- The effect of change can be examined.
- Relationship can be more successful.
- Abusive relationship and domestic violence can be acknowledged.

Types of relationship issues

- Couples counselling
- Affairs & betrayal
- Separation and divorce
- Pre – nuptial counselling
- Bereavement
- Abuse

As with any professional relationship the setting of boundaries is important. All relationship should be limited to a therapeutic setting and all social contact between a counsellor and client should be avoided. A counsellor should also never accept a friend or family member as a client or into a sexual relationship with a current or former client.

SELF-ESTEEM AND OPENNESS TO OTHERS

Counseling like the terms personality and intelligence has acquired different shades of meaning. This difficulty is due to the confusion between popular understanding of the term and technical and professional meanings of it. To counsel is to advise.

WHO IS A COUNSELLOR- A person who gives counsel or advice or a person such as a social worker, who is involved in counseling. Self esteem is very important to a counselor as need to accept the client as himself.

Self-esteem- Self-esteem describes the values, beliefs and attitudes we have towards ourselves. It reflects the overall opinion we have about ourselves. Our opinion may be

positive, (eg "I am a worthwhile person") or it may be negative, (eg "I am a bad person"). Healthy self-esteem is about accepting ourselves for who we are, warts and all.

SELF-ESTEEM GUILDING HABITS

Here are six self-esteem. Building habits you can use on a daily basis;

- Reward yourself
- Stop comparing yourself to others
- Laugh more
- Take care of yourself
- Do something for someone else
- Keep a diary of all the good things you notice about yourself

Parts of being human means that we are not perfect and that at times we will all make mistakes, or do things of which we are not proud.

Low self-esteem can often be part of a larger problem. Building healthy self-esteem means letting go to your mistakes and accepting your bad points or weaknesses as part of being human. It is about being comfortable in accepting yourself just as you are.

OPENNESS TO OTHERS:

Openness in other words means being sincere to self, to the work and to the client.

While maintaining a professional focus a counsellor must be able to show a genuine openness, within the counselling relationship. A client must feel comfortable, safe and confident that confidentiality will be maintained at all times, and also that the counsellor is committed to helping, encouraging and supporting. Empathic understanding, and the ability to see things from the client's perspective is also important, as is the counsellor's ability to demonstrate an investment of their time and full attention. Showing empathy and genuineness encourages a client to relax and trust. It also encourages client self-disclosure.

Maintaining warmth and understanding, without being judgmental, provides the client with a comfortable foundation within the counselling relationship. A counsellor should also show their own personality and ensure there is a friendly atmosphere and attitude, in order for the counselling relationship to grow.

Conveying warmth through body language – using posture, maintaining eye contact and personal space – encourages a client to trust. Counsellors should also be aware of the way they speak – the tone of voice, speed of speech and delivery – as the words used should be in agreement with the way their body language provides reassurance.

Warmth should be handled with care however, as a client who exhibits feelings of unease, distance and mistrust may feel initially threatened by sympathetic behaviour.

ACCEPTING PERSONAL RESPONSIBILITY

Personal responsibility

Personal responsibility is one's ability to take care of oneself by means of, keeping healthy, managing one's emotions, keeping a sound mind, treating yourself with respect, and etc. Personal Responsibility is taking responsibility for actions, accepting the consequences that come from those actions and understanding that what one does has an impact on those around.

What is accepting personal responsibility?

It means being responsible for our actions. As counsellors we must accept personal responsibility for our actions and our life. We must also teach our clients to accept personal responsibility for their actions and their life.

Accepting personal responsibility includes:

- * Acknowledging that one is solely responsible for the choices in one's life.
- * Accepting that we are responsible for what we choose to feel or think.
- * Accepting that we choose the direction for our life.
- * Accepting that we cannot blame others for the choices we have made.
- * Tearing down the mask of defence or rationale for why others are responsible

for who we are, what has happened to us and what we are bound to become.

- * The rational belief that we are responsible for determining who we are, and how our choices affect our life.

- * Pointing the finger of responsibility back to our self and away from others when we are discussing the consequences of our actions.
- *Realizing that we determine our feelings about any events or actions addressed to us, no matter how negative they seem.
- * Recognizing that we are our best encourager. It is not reasonable or healthy for us to depend on others to make us feel good about our self.
- * Recognizing that as we enter adulthood and maturity, we determine how our self-esteem will develop.

- * Not feeling sorry for the negative things that happened to us but taking hold of our life and giving it direction and reason.
- * Letting go of our sense of over responsibility for others.
- * Protecting and nurturing our health and emotional well being.
- * Taking preventive health oriented steps of structuring our life with time management, stress management, confronting fears and burnout prevention.

What behaviour traits need to be developed in order to accept personal responsibility?

In order to accept personal responsibility we need to develop the ability to:

- *Seek out and to accept help for our self.
- * Be open to new ideas or concepts about life and the human condition.
- * Refute irrational beliefs and overcome fears.
- * Affirm our self positively.
- * Recognize that we are the sole determinant of the choices we make.
- * Recognize that we choose our responses to the people, actions and events in our life.
- *Let go of anger, fear, blame, mistrust and insecurity.
- * Take risks and to become vulnerable and acceptable to change and growth in our life.
- * Take off the masks of behavior characteristics behind which we hide .
- * Reorganize our priorities and goals.
- * Realize that we are the party in charge of the direction our life takes

What are the steps in accepting personal responsibility?

Step 1: To decide if we are having problems accepting personal responsibility, answer the following questions in a journal:

- a. How frequently do you claim that others have determined what you are today?
- b. How easy is it to accept that you are responsible for your choices in life?
- c. How easy it is to believe that you determine the direction your life takes?
- d. How easy is it to blame others for where you are today?
- e. What masks do you hide behind to avoid accepting personal responsibility?
- f. How rational are you in dealing with the part you played in being who you are today?
- g. How easy is it to accept blame or admit mistakes?
- h. How easy is it to accept that you determine your feelings when negative events occur?

- i. How easy is it to depend solely on yourself for acceptance, affirmation and approval?
- j. How willing are you to be the sole determinant of the health of your self-esteem?
- k. How frequently do you feel sorry for yourself?
- l. How easy is it to let go of guilt if you stop rescuing those in your life?
- m. How willingly do you take preventive steps to ensure your physical and emotional health?

- n. How successfully have you practiced self-affirmation in your life?
How successfully have you practiced anger work out and letting go in order to get on with your life?

Genuine answers to these questions will provide insight into our life.

REALISTIC LEVELS OF ASPIRATION:

Effective Counsellors have realistic levels of aspiration. In general persons raise their goals when they are successful and lower their goals in case of failure. In this way they protect themselves from easy achievement and continued failure. Sometimes this self protective mechanism is thrown out of balance. Sometimes they set their goals either too high which results in inevitable failure ,which robs them of their sense of achievement. Effective counsellors on the other hand are able to set achievable goals and learn to take failure at their stride. This is because they are aware of their skills and abilities, so they can accurately

estimate what to expect of themselves. Their acceptance of experiences both positive and negative enable them to evaluate their goals realistically and set attainable goals in future.

SELF-ACTUALISATION:

Self-actualization can be defined as a state of psychological fulfilment, including acceptance of self and others, accurate perception of reality, close relationships, personal autonomy, goal directedness, naturalness, a need for privacy, orientation toward growth, sense of unity with nature, sense of brotherhood with all people, democratic character, sense of justice, sense of humor, creativity, and personal integrity. Listed below are a series of 16 characteristics of a self-actualizing individual as described by Abraham Maslow. Self-actualizing here is defined as a person who is in the process of fulfilling their potential. Counsellors are believed to self actualising. They have the following characteristics:

1. The self-actualized person has more efficient perception of reality and more comfortable relations with it.
2. Acceptance of self, others, and nature.
3. The self-actualizing person has spontaneity, simplicity and naturalness.
4. Problem Centering. The self-actualizing person is someone who is generally strongly focused on problems outside of himself.
5. The quality for detachment, the need for privacy.
6. Autonomy, independence of culture and environment. The self-actualizing person is capable of doing things for himself and making decisions on his own. He believes in who and what he is.
7. Continued freshness or appreciation.
8. A feeling of togetherness.
9. Interpersonal relations. Self-actualizing people have deeper and more profound interpersonal relations than other adults.
10. Discriminating between means and ends, between good and evil.

COUNSELEE- A PERSON WITH PROBLEM

Counselee means the person who receives assistance from a counselor. The counseling outcomes can also affect by counselee characteristics such as counselee expectations and readiness to change are related to his involvement.

The counselor may feel that he must help the counselee to have more trust in counselor so that counselee can become less anxious and not avoid expressing something significant. Counseling aims at helping the clients understand and accept themselves “as they are”, such that they are able to work towards realizing their potential. Often this requires modification of attitudes, outlook and behavior. The client is received without any reservations and he is helped to state his problem and explore the possible solutions. Counseling aims at helping individuals reach a stage or state of self-autonomy through self understanding, self-direction and self-motivation.

UNIT 3

Different approaches:

CLIENT CENTRED APPROACH

Based on Ideas of Carl Rogers (1951) It is a Non directive therapy.

Therapy is client centred therapy.

- Patient is called a client
- Discrepancies arise between peoples “ideal” selves and their real self
- People have resource and strength to solve their own problems.
- They will do it with a little help from the therapist
- The process of healing is shaped by the client
- Therapist helps by facilitating self-awareness in the client
- This is done by nurturing a humane client-therapist relationship

(Expand the above points)

Client centred therapist relationship qualities:

- O Therapist must have empathy for the client
- O Therapist must give sensitive, unconditional positive regard
- O Must not criticize and judge
- O Must be genuine

BEHAVIOURAL APPROACH

Based on Behaviour therapy – contributions of Skinner

Behaviour therapy is based on the person's learning.

Aim: changing maladaptive behaviour and substituting it with adaptive behaviour.

Definition: is the systematic application of personal learning to the analysis and treatment of maladaptive behaviour.

Basic assumption: All behaviours are learned even the maladaptive behaviour. Therefore they can be unlearned

Steps:

- I. Analysis of a maladaptive behaviour (ABC charting)
 - a. A close look as the antecedents- the causes of the behaviour (family rivalries, financial loss)
 - b. Behaviour- description in detail (eg; alcoholism)

- c. Consequences- what happened afterwards, emotional and adjustmental problems, factor helped to maintain the behaviour)
- II. Choice of techniques- aversion therapy
- III. Preparation of the client for the treatment- information & consent
- IV. Application of the treatment techniques chosen.

Assumptions:

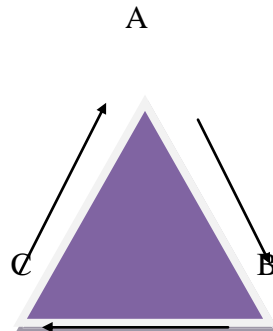
About treatment, the Skinner's point of view could be summarized in the following points:

- Therapy does not consist of eliminating an impulse that causes problems, but of introducing variables that compensate or correct a history which has produced unfavorable behavior.
- The measures that should be taken to correct a determined circumstance of behavior is deduced from an analysis of that circumstance.
- The possibility of taking these measures depends on if the therapist controls relevant variables.
- The underlying emotion is not a cause of behavior disorders, but a part of them.
- The therapist is a "non-threatening audience" so that emotional behaviors associated with punishment are extinguished.
- Therapy does not consist of releasing a trouble-making impulse but of introducing variables that compensate for or correct a history which has produced objectionable behavior.
- Pent-up emotion is not the cause of disordered behavior; it is part of it." (Skinner, 1953,)

It aims to modifying behaviour. It changes the maladaptive behaviour and substitute that behaviour with adaptive behaviour. It is not fast to receive whole behaviour but to remove the individual pieces of behaviour that is disabling. This is done by applying systematic process

of learning. Basic assumption behind this approach is all behaviour are learned either by classical conditioning or operant conditioning.

There are certain steps to analyse maladaptive behaviour, it is called ABC chart.



A----- Antecedents. It means the cause of behaviour. (e.g.; what prompt a person to do such action

B-----behaviour. (The behaviour as such)

C-----consequence (the consequence of the behaviour)

The techniques used to break this cycle are as follows:

- Behaviour modification
- Systematic desensitization
- Positive reinforcement
- Aversive therapy

RATIONAL EMOTIVE APPROACH – Based on the concept of Albert Ellis

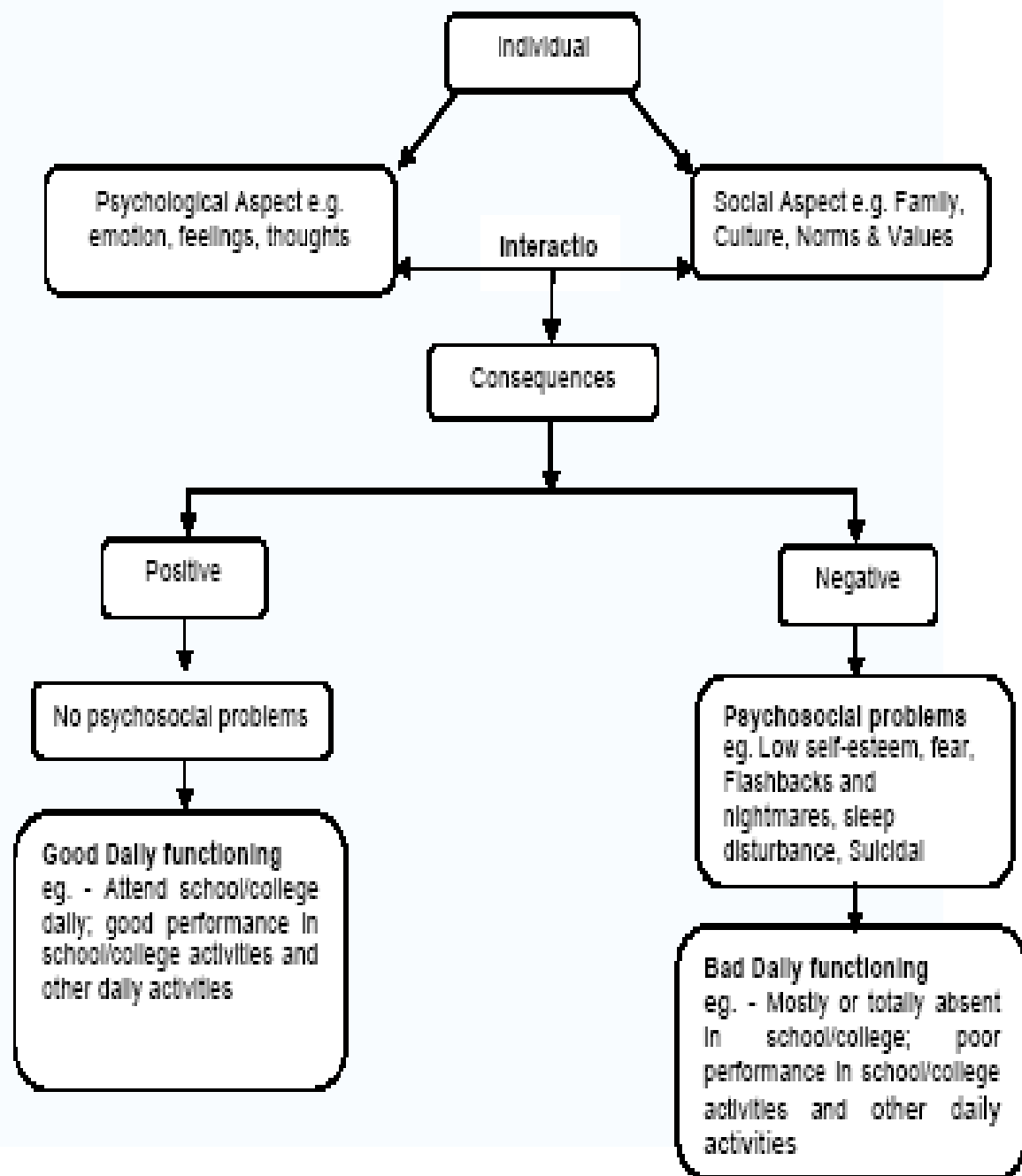
The basic assumption behind this approach is that, emotional disturbance in a person is caused due to irrational and illogical thinking. They don't have clear awareness about thinking process. They tend to adapt themselves with same thought and emotions. Thus, this governs their behaviour.

- According to this approach, personality and logic is the two therapeutic weapons to solve many problems.

- Isolate the client's irrational ideas and replace them with more realistic ones.
- This approach suggests that 'confrontation' is very important.
- This approach is best for the patient who is not severely disturbed and who have willingness to change behaviour.

PSYCHO-SOCIAL APPROACH:

Definition of Psychosocial: Human beings are social entities and almost all people live in societies. Human lives have both psychological aspects (thoughts, emotions and behaviors) and social aspects - relations to family, society, culture, norms and values. The interrelation between psychological aspects and social aspects is referred to as *psychosocial*. If and when a society accepts a person's behavior, s/he can adjust in the society and show evidence of good daily functioning. However, if a person is unable to balance the psychological and social aspects of his or her life, it impacts on his/her thinking, emotions and behavior and can lead to psychosocial problems (lack of concentration, fear, guilt etc) and the development of dysfunctional behaviour. This can be clearly seen in the figure below:



The psycho-social model moves from the original conceptualization by Engel (1977), highlighting the interdependence between psychological and social well-being in creating a positive health condition of the person.

We may generally consider the three prefix referring to as following:

- Psycho denoting the psychological elements which refers to feelings, thoughts, attitudes, emotions and are normally understood as “internal” and linked to the mind;
- Social as the relation between the person and the “external” world, such as the interactions in the family, at work and in general in the socio-cultural environment.

This model, which comes under the framework of System Theory, refers to a holistic view of the human being and health. Being a systemic approach, it assigns the same value to the two different levels of analysis identified and promotes the full integration between the two.

It gives the conceptual framework to counsellors to identify, assess and intervene for the wellbeing of a client considering the psychological and social (cultural) factors at all stages

(Prevention; onset; course, treatment). The individual has a central and active role and is freed from being the victim of psycho social cause-effect relations.

The way all these factors interact is complex and the individual is considered as a social actor, who is part of the socio-cultural environment which also contributes, with its presence, to create and modify. It is crucial to understand the dynamic interrelation of the two levels and their mutual influence. It is worth to remind that mind and body are not separable as distinct entities, and have not to be considered as such.

ECLECTIC APPROACH: Based on Thorne’s ‘Integrative Psychology’ and Multimodel Therapy by Lazarus.

Eclectic Approaches

Main Characteristic :	Strategies and methods from several approaches applied selectively to clients
Examples :	Thorne's Integrative Psychology Lazarus's Structural Eclectism
Advantages :	Collection of various methods Flexibility of choice on methods Wide agency application of methods

Eclectic Counseling

- Combination of directive and non-directive counseling
- Counselor is neither too active nor too passive
- Chief advocate: Thorne
- Counselor studies the personality and needs of client based on the need of client, eclectic counseling is used

-TECHNIQUES USED ARE:

- Reassurance
- Giving information
- Case history
- Testing

Counselor starts with directive technique, then switches on to the non-directive technique.

Here the counsellor bases his/her counseling on concepts taken from various available viewpoints. He/she owes on specific theoretical allegiance. Instead, incorporates those procedures and techniques which he/she believes to be most effective in the case of that particular counselee, without any prejudice or bias to any particular school of thought.

According to Thorne, eclecticism is the most practicable and apt approach to counselling. Because no two people are alike and as such no single theory of personality could explain the various behavioural patterns exhibited by individuals. So also each problem is unique in its content and intensity and a technique or approach suitable in one case need not even be effective in the second case. These suggest an approach which is tailor made to handle individual cases and eclecticism advocates this concept. Eclectic counseling is defined as the synthesis and combination of directive and non-directive counseling. It represents a middle status between the two extremes represented by the 'non-directive' technique on one hand and the 'directive' technique on the other. In eclectic counseling, the counselor is neither too active as in the directive counseling nor too passive as in the non-directive counseling. He just follows the middle path between these two.

'Multimodal therapy' originated by Arnold Lazarus is yet another example of eclectic approach. He explains seven major areas of personality function (1) behaviour (observable action), (2) affective (emotional), (3) sensation (feelings), (4) images (imagination), (5) cognition's (thought process), (6) interpersonal relationships (social) and (7) drugs/ biological (physical). He uses the acronym BASIC ID to encompass all these modalities. An important feature of this approach is the insistence that every individual is unique with his own BASIC ID. Maladaptive behaviours are assumed to result from faulty learning and the goal of counselling is to bring about client desired changes that will be **enduring** and to **accomplish** this is an efficient and humane way.

In eclectic counseling, the needs of a person and his personality are studied by the counselor. After this the counselor selects those techniques, which will be useful for the person. The main techniques used are reassurance giving information, case history, testing etc. In eclectic counseling the counselor first takes into consideration the personality and need of the counsellee. He selects the directive or non-directive technique that seems to serve the purpose best. The counselor may start with the directive technique. When the situation demands, he may switch over to the non-directive counseling and vice-versa. An attempt is made to adjust the technique to the requirements of the situation and the individual.

Steps in Eclectic counseling

The leading exponent of the Eclectic counseling Thorne, suggested the following in the process;

- 1) Diagnosis of the cause.

- 2) Analysis of the problem.
- 3) Preparation of a tentative plan for modifying factors.
- 4) Securing effective conditions for counseling.
- 5) Interviewing and stimulating the client to develop his own resources and to assume its responsibility for trying new modes of adjustment.
- 6) Proper handling of any related problems which may contribute to adjustment.

Assumptions of Eclectic Counseling

- 1) in general, passive methods should be used whenever possible.
- 2) Active methods may be used with specific indications.
- 3) In the early stages when the client is telling his story, passive techniques are usually the methods of choice. This permits emotional release.
- 4) Until simple methods have failed, complicated methods should not be attempted.
- 5) All counseling should be client centered.
- 6) Every client should be given an opportunity to resolve his problems indirectly. Inability of the client to progress through therapy as using passive methods alone is an indication for utilizing more directive methods.
- 7) Directive methods are usually indicated in situational mal adjustment where a solution cannot be achieved without co-operation from other persons.

Characteristic of Eclectic Counseling

- 1) In this, objective and coordinating methods are used.
- 2) In the beginning of counseling, client-active methods are used and the counselor remains passive.
- 3) In this, more importance is assigned to the job efficiency and treatment.
- 4) In this, the principle of low expenditure is emphasized.
- 5) In such counseling, for the use of all the methods and techniques, the professional efficiency and skill of the counselor are must.
- 6) Keeping in mind the need of the client, it is decided whether directive method or non-directive methods should be used.
- 7) Making an opportunity available to the client is insisted so that he may find himself the solution of the problem.

Disadvantages of Eclectic Counseling

- 1) Some people are of the view that eclectic counseling is vague, opportunistic and superficial.
- 2) Both directive and non-directive counseling cannot be mixed together.
- 3) In this, the question arises how much freedom should be given to the client? For this there is non-definite rule.
- 4) The problem with an eclectic orientation is that counselors often do more harm than good if they have little or no understanding about what is helping the client.

Hierarchy of Eclectic Practices

McBride and Martin advocate a hierarchy of eclectic practices and discuss the importance of having a sound theoretical base as a guide. The lowest or first level of eclecticism is really syncretism – a sloppy unsystematic process of putting unrelated clinical concepts together. It is encouraged when graduate students are urged to formulate their own theories of counseling without first having experienced how tested models work. The second level of eclecticism is traditional. It incorporates “an orderly combination of compatible features from diverse sources harmonious whole“. Theories are examined in greater depth. On a third level, eclecticism is described as professional or theoretical or as theoretical integration. This type requires that counselor master at least two theories before trying to make any combinations. A final level of eclecticism is called technical eclecticism. In this approach, procedures from different theories are selected and used in treatment.

CONCLUSION

F.C. Thorne, who is the exponent of this view, finds that it is possible for a counselor to alternate between directive and non-directive methods even in the same interview without disrupting the non-directive permissive relationship with the client. He selects the techniques according to the requirements of the situation and the individual. The counselor must be competent and proficient in the use of all available methods. The validity of the results is determined by the skill with which any method is used. The critical factor is not what method is used but rather the skill with which it is used.

UNIT IV

EGAN MODEL OF COUNSELLING

It was interpreted by the person named Jerald Egan. It is called as a Eclectic model and it uses best known therapeutic techniques. It is goal oriented. This model is based on inputs from 3 major sources.

- Systematic skill training system
- Social influence theory
- Behavioural learning theory

The goal of these model; basically 3 goals

- To help people to manage their problems in living, more effectively by developing unused opportunities more fully
- To help people become better at helping in their everyday life

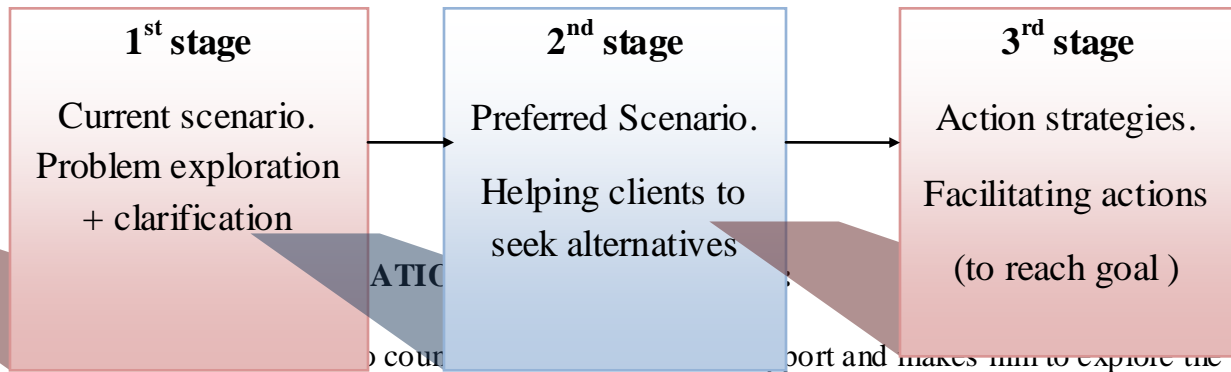
The model frame work

Egan actually incorporated 3 main aspects in this model.

- i) Development of ideas and strategies.

- ii) Self understanding
- iii) Action/ problem solving skills.

Stages of this model



problem

The problem can be explored in 3 ways

- i) Expansive model: allow the client to tell the story in his own way the role of a counsellor is a passive listener. By listening attentively we help him to explore and unfold the story
- ii) **Challenging part:** clarify the problem. Uncovers the blind sport and gaps or many types of behaviour is wrong. He has to uncover various behaviour which the counsellor has not yet seen. The specific of the story has to been looked.
- iii) **Focusing and moving forward:** the client usually gets stuck in a point. He has choice but don't know which one to choose. During this period, the counsellor led him to prioritize the area in which he can explore.

Counsellor should have certain skill:

Each stage, the counsellor has certain skill

- Basic and advance empathy:- (accurate perception of the clients feelings. Advance empathy is you will know about the client's feelings and why he is feeling.)
- Reflecting:- (repeating to the client)

- Summary:- (gathering everything and put it in a short form)
- Para- phrasing:- (he may tell lot of things-this elicits clients reaction)
- Open questions: - (you have to ask both open and close question like how it happen? When did it happen?)

ATTENDING SKILLS

It means how well the counsellor receives the story.

Ingredients of attending skills :-

- i) Freedom from self- occupation
- ii) A sense of self-availability for the client.
- iii) Free floating awareness- always be aware about what the client is telling.
- iv) Creation of space-client feels invited must be inviting and can express himself.

Attending skills involves following aspects:

- 1) Resisting distraction
- 2) Reflecting content
- 3) Looking for themes- the important thing that is said by the client.

2 other aspects:-

- a) Physical Attending- posture, tap, touch, facial expression
- b) Emotional Attending- empathising, reflecting, motivating, supporting, encouraging.

SOLER- Egan uses this acronym

S- Squarely (eagerly listening and watching)

O- Open body (relaxed posture)

L- Lean

E- Eye contact

R- Relaxed

- Physical distant should be maintained known as optimal comfort zone.
- Touch should be prudent- frequent touch can lead to abuse.
- Silence is very important. It is a tactic to make the client to talk
- Vocal tone- voice modulation is important. Verbal tracking is important
- Sometimes we go for selective attending. It should not happen, there should not be selective attending.

LISTENING SKILLS:

Understanding, listen- listen with connecting self.

5 basic reasons we don't listen:-

- Listening is hard work
- The rush for action
- Speed difference- in the rate of speaking and understanding
- Lack of training

How to improve listening skills:

- ❖ Maintain eye contact
- ❖ Focus on content
- ❖ Avoid selective listening
- ❖ Avoid distractions
- ❖ Ask questions to stay active and interested

- ❖ Face the person
- ❖ Respond appropriately
- ❖ Don't be pre-occupied with your thoughts
- ❖ The feelings should be understood.
- ❖ Listen to both verbal and non-verbal messages.
- ❖ Sentence structure- how the client uses the word
- ❖ Non- verbal listening to the messages when the client talks/ tone
- ❖ Silence, pause, gestures, facial expression

5 important things to do while listening:

- Active listening (listen with expressive words)
- Reflection of clients feelings(repeat the clients feelings)
- Para phrasing (repeat what the client has told)
- Summarising skills (tell the client your perception of his problem)
- Clarification (seek clarification when in doubt)
- Passive listening-(non verbal listening –gestures & expressions)

VERBAL &NON- VERBAL MESSAGES:

Verbal Messages: How a client talks speaks a lot about the person.

The counsellor must be able to identify the state of the client by the way he speaks. The following points must be kept in mind:

- Dos he speak softly
- Does he speak loudly
- Is he murmuring

- Is he speaking sense
- Does his speech sound unreal(In touch with reality)
- Is he oriented.

Listening to the tone of the voice is very important. In the clients speech does the counsellor tone variation that indicates:

- Sadness
- Anger
- Helplessness
- Discontentment
- Dejection
- Low self esteem

All the above mentioned aspects will help the counsellor get an idea about the state in which the client is. Other than verbal messages, non-verbal messages also play an important part in assessing the client.

Non-Verbal Messages:

A skilled counsellor is very professional in interpreting the cues

- Resistance- no eye contact, postures,
- Counsellor should be observant
- The client (may be speaking with a smile but may be having clenched fists)

EMPATHY (write in detail)

Ability to put oneself in the place of others. Get an accurate perception of client's feelings. All the emotions, feelings of the client's point of view can be seen by the counsellor.

- Creates acceptance

- Sympathy doesn't help
- It helps client to generate trust

GENUINENESS – BEING SINCERE

- ❖ Proper listening and attending skills
- ❖ Don't give false hopes
- ❖ Always remember the relationship is professional
- ❖ Alternative body languages, vocal qualities, speak clearly, follow the counselling ethics.

FOCUSING AND SUMMARIZING SKILLS:

Focusing Skills

- When you focus, clear picture is available about the problem
- Focusing is a reflecting practice that brings mind back to its natural centre.
- It helps you grab the main points.
- It gives you the “felt sense” of the situation.
- What is not clear becomes clear when you focus.
- Focusing opens up the intuition and enables us to think with our hearts and client's true feelings.
- Enables you to think with our hearts and clients true feelings.
- Enables you to think in fresh and creative ways.
- It helps you to move forward in your work.
- Focusing is a method of create awareness step by step
- It is somewhat related to person centre approach/ client centred therapy by Carl Rogers.

- Gives you clarity of thought
- Listening to your clients with patience and sensitivity- focusing and listening complement each other.

Summarizing Skills-

When you put the entire case study or history together in short is summary. For summarizing the details of the client, we should have good summarizing skills. For summarizing, we should focus on the problem.

Summaries are brief statements of longer excerpts from the counselling session. In the summarizing skills, one important thing is verbal and non-verbal comments or whatever the clients should be noted. The counsellor must restate what the client says as accurately as possible.

FACILITATING ACTION

This is the 3rd stage of Egan Model. Once we find out the problem, we focus on the problem, and then set out resources or best possible solution to attain the goal. Then comes the facilitation part.

- The counsellor must be aware about who might help the client to reach the goal and who might hinder the possible change.
- The client brainstorms himself various strategies to attain the goal.
- The client is prompted & encouraged to think widely
- It is to help the client or people generate new ideas.
- Focusing on Appropriate Strategies, that is most realistic and which is suited to the circumstances.
- It must be consistent with the value of the society

- He has to look in to the internal and external factors which may influence or hinder to reach the goal
- Approximately he should think about how the good influence can be strengthened and bad influence can be weakened
- Help the client in to action – the entire strategies are broken in to bits and pieces, so that the client feels easier to handle it. Specific action and timeline is given to the client.
- To facilitate action goal oriented behaviour is very important

Goal Oriented Behaviour

The main purpose of counselling relationship is professional. The goal is to help client come out of his problems by choosing the best option. A goal must be kept in mind. The counsellor should keep in mind the principles of social work like, acceptance, non-judgmental attitude etc. Goal orientation assist in providing a motivational framework for how clients perceive, interrupt and judge reaction to key events in their lives.

The most common description of goal orientation is of two types:

- A learning goal orientation in which individuals approach learning to gain and assume mastery of knowledge, skills and behaviour.
- A performance goal orientation in which individuals are driven to perform at a desired in order to achieve positive judgments or avoid unfavourable judgments.

HELPING THE CLIENT TO SEEK ALTERNATIVES:

It is about opening up a picture of what the client really wants and it is done by broadening their understanding of the problem, so they can reach in new perspective. It has three stages;-

1. **Creative part-** the client is helped to move from the ideal scenario to what is really happening. This is done by broadening their perspective

2. **Reality testing part-** the client formulates the goals. These goals are called as “SMART”.
 - S- Specific
 - M- measurable/ manageable
 - A- Achievable
 - R- realistic
 - T- Time Bound

3. **Moving forward-** before starting the goal, he tests the goal for commitment, reviewing the cost and benefits.

The counsellor should have certain skills

Skills of a counsellor to help the client to seek alternatives are:

- Challenging
- Confrontation
- Immediacy
- Goal setting
- Self- sharing

UNIT 5

COUNSELLING IN VARIOUS SETTING

1.EDUCATIONAL COUNSELLING

At school or college, a variety of problems may arise in the minds of the growing pupils. The problems fall in to three categories.

- Learning
- Preparation for vocation
- Sex and interpersonal relations

Education is looked upon not only as a means of personal advancement but it is also valued as an asset of fundamental importance to society.

Counselling in the context comprises a very important and vital part of educational activities. Many students at different levels of education have been found to function at levels far below their capacities. Counselling assistance would certainly help to brighten the lives of many young people.

Counselling is indeed an important dimension of education. It promotes emotional maturity, personality development, self-responsibility, creativity and ability to solve problems. In the complex, contemporary world, counselling is rapidly becoming an important part of the educational structure.

Counselling in Disaster settings

Each type of disaster has its own unique pattern of destruction and characteristics that affect the emotional response of disaster victims (NIMH, 1983):

- Flood disasters can result in long incident periods and the evacuation of whole communities.
 - Earthquakes strike without warning and aftershocks intensify fright and despair.
 - Tornadoes randomly choose their victims, skipping one house and striking the next.
 - Hurricanes can be unpredictable and suddenly change course causing the evacuation of large areas.
- Disasters may be classified as either natural or human-caused. The following chart describes the different characteristics of natural and human-caused disasters. Blame is a characteristic that differs significantly for natural and human-caused disasters. Disaster survivors of human-caused disasters may blame and feel anger toward individuals, groups, or organizations they believe caused or contributed to the disaster. In contrast, survivors of natural disasters may blame and feel anger towards themselves, believe it is "God's Will" or a punishment. Survivors of natural disasters may project their anger onto caretakers, disaster workers, or others.

Definition of Crisis Counseling Services

The Crisis Counseling Program, as it has been supported in the past twenty-five years by the Federal government, provides for short-term interventions with individuals and groups experiencing psychological sequelae from presidentially declared disasters. This type of intervention involves classic counselling goals of helping people to understand their current situation and reactions, assisting in the review of their options, providing emotional support, and encouraging linkage with other resources and agencies that may assist the individual. The assistance is focused upon helping the person deal with the current situation in which they may find themselves. It draws upon the assumption, until there are contradictory indications, that the individual can resume a productive and fulfilling life following the disaster experience if given support, assistance, and information at a time and in a manner appropriate to his or her experience, education, developmental stage, and ethnicity.

2.INDUSTRIAL COUNSELLING

Industrial Counselling is provided to the employees of an industry or organisation to overcome their problems both personal and professional. It is also known as employee counselling

Industrial Counselling - Definition, Benefits, Outcomes

Industrial counselling is a psychological health care intervention which can take many forms. Its aim is to assist both the employer and employee by intervening with an active problem-solving approach to tackling the problems at hand.

The costs to industry and commerce each year associated with employees' poor psychological health are enormous. A significant proportion of the Gross National Product (GNP) of industrialized countries is lost each year through ill-health, particularly in respect of stress-related illness.

These costs increase substantially when lost productivity resulting from stress-related inefficiency and incompetence is taken into account. Stress-related incompetence is not inevitable though.

Industrial counselling can do much to prevent the negative effects of stress at an individual level and ultimately at an organizational level.

Few organizations can now afford to ignore the consequences associated with employees' psychological health.

Employee Counselling in Industries

Employee counselling gives individuals a valuable opportunity to work through problems and stresses in a strictly confidential and supportive atmosphere.

Counselling provides access to several basic forms of helping: giving information, direct action, teaching and coaching, advocacy, and providing feedback and advice, for example.

Typically, counselling involves the individual employee meeting with a counsellor, usually on a one-on-one basis. It is not uncommon for the individual employee and counsellor to meet one or twice a week for several weeks. However, the number and frequency of meetings required will depend upon the nature of the perceived difficulty and the nature of the intervention needed.

The focus of counselling sessions is to encourage discussion of personal and work-related difficulties.

This is often followed by the adoption of an active problem-solving approach to tackle the problems at hand.

The specific aims of employee counselling are to:

- Explore and find the key sources of difficulty.
- Review the individual's current strategies and styles of coping.
- Implement methods of dealing with the perceived problem, thereby alleviating the issue. Often, this step may involve also improving interpersonal relations at work and/or improving personal performance.
- Evaluate the effectiveness of the chosen strategies.

Conclusion

If employees are to function at an optimum level of well-being and competence, it is vital that they feel supported and valued. Organizational systems are sometimes quick to make demands and 'hinder' but occasionally slow to 'help.'

Industrial counselling can be a vehicle to provide help in an effective, practical way. It is through such help that individuals are motivated to understand and realize their own career potential, thus maximizing the chances of functioning in the best interests of the organization.

3. COMMUNITY COUNSELLING

Community counselling involves more than just counseling outside a hospital setting; it is a well-respected field in which an indispensable service is provided by professional counselors who work to assist individuals, families and groups with diverse needs.

Community Counselling brings positive and lasting changes in the lives of individuals and families through prevention, education, treatment and wellness programs including abuse counseling, crisis intervention, domestic violence counseling, PTSD counseling, family counseling and more.

Community Counseling is generally provided in a community centre. It provides a safe haven to individuals and families throughout the entire lifespan and helps them build on their strengths and develop tools to cope with unexpected challenges, such as divorce, substance abuse, parenting a Deaf child, readjusting after war, overcoming discrimination based on sexual orientation or gender identity, or caring for an aged parent. Every person who walks through our doors is offered the highest quality, evidence-based services in an environment where everyone is treated with dignity and respect.

- Support at times of crisis – bereavement, marriage break-up, family turmoil, abuse/ domestic violence.
- Help in dealing with stress – conflict at work, problems at home, pressures of everyday living.
- Assistance with personal problems – lack of confidence, anxiety and panic attacks, depression, addictions.

- Generally a counsellor visits the community on a regular basis. Now the concepts of lay or barefoot counselors have emerged. Here a person from the community is selected and given training on the basics of counselling. The people who are trained include Village Health Nurses and Health Inspectors
 - Teachers
 - Self Help Group members
 - Youth Leaders
 - Leaders of faith based organizations
 - Community leaders
 - Disaster Response workers

The expected outcomes of the training included basic skills of counseling such as the capacity:

- To understand reactions to trauma and life events
- To listen and help persons to ventilate
- To help persons find privacy for the expression of emotions
- To identify people with severe psychological problems and refer them to qualified experts/professionals.

4. HOSPITAL COUNSELLING

The Hospital:

Arriving in hospital itself can generate considerable vulnerability, uncertainty, boredom, in addition to conforming to the routine of a large institution and the subsequent loss of individual choice and privacy. Hospitals are strange and often lonely places, bringing people into contact with the suffering and dying of others, sometimes evoking previous bereavements. As well as issues arising from the environment, patients and families request counselling support for stressors related to physical diagnosis and treatment, such as: anxiety regarding invasive procedures, sudden paralysis or loss of a limb, chronic illness, critical or terminal diagnoses, and the inevitable social consequences of having a disease (for other examples, see Spiegel, 1999,1993,1994) - all significant crises for which counselling is not routinely provided

If counselling is to be available in a hospital to anyone requesting it, practice must be flexible enough to accommodate the physical environment, unplanned procedures, the patient's medical condition, unexpected discharge or death, as well as delayed discharge (when an end to therapy has been planned to coincide with a patient's discharge which is then delayed). Clients who are patients may be at any stage of medical treatment; recovering from a successful operation and looking forward to going home, living with uncertain diagnosis or prognosis, slipping in and out of unconsciousness, or in the terminal stages of illness and deciding where they would like to die. The hospital environment is very unpredictable so working there is unavoidably as messy as life gets.

Therefore counselling in a hospital setting requires skill, patience and hard work.

The COUNSELLORS roles include:

- Guiding patients through admission and discharge;
- Psycho-social assessment
- Bio-Psycho-Education
- Counselling people about the treatment they will receive and offering support throughout their visit to the hospital, either as inpatients or outpatients;
- Funding patients and their families when they cannot afford treatment, tests, transport, accommodation or food.

5.REHABILITATION COUNSELING

It is focused on helping people who have disabilities achieve their personal, career, and independent living goals through a counselling process. Rehabilitation Counsellors can be found in private practice, in rehabilitation facilities, hospitals, universities, schools, government agencies, insurance companies and other organizations where people are being treated for congenital or acquired disabilities with the goal of going to or returning to work.

Historically, rehabilitation counsellors primarily served working-age adults with disabilities. Today, the need for rehabilitation counselling services extends to persons of all age groups who have disabilities. Rehabilitation counsellors also may provide general and specialized counselling to people with disabilities in public human service programs and private practice settings.

RC is Goal-focused:- Rehabilitation counsellors work with individuals experiencing injury, disability and/or social disadvantage. They help these people achieve their occupational, personal and social goals. To do so, rehabilitation counsellors work with individual strengths and facilitate change in the individual and their community or work environment.

Rehabilitation today-

Rehabilitation counsellors provide counselling, evaluation, job-related and other rehabilitation services. They work with a range of other professionals such as occupational therapists, physiotherapists, doctors and nurses to case manage clients. One of the drivers of the growth of rehabilitation services is that advances in medical technology mean that people now survive catastrophic accidents but with an ongoing need for assistance. Society has a responsibility to help these people integrate back into society and it is here that rehabilitation counsellors play a significant role.

Multiple options-

Rehabilitation counsellors usually respond to the long-term effects of disabilities such as spinal cord and brain injuries, severe burns and amputation. They also deal with more social/psychological disabilities such as substance abuse, post traumatic stress and psychiatric illness. Insurance companies employ rehabilitation counsellors to help people with less severe injuries get back to work. Demand for rehabilitation counsellors is high.

What Do Rehabilitation Counsellors Do?

Rehabilitation counseling encompasses a diverse range of professional specialties, including vocational rehabilitation counselors, vocational evaluators, deafness specialists, orientation and mobility specialists, rehabilitation teachers, administrators, and a multitude of other rewarding options. In short, the goal of rehabilitation counseling is empowering people with disabilities to make informed choices, build viable careers and live more independently in the community. According to the National Rehabilitation Counseling Association; Rehabilitation counseling is a systematic process which assists persons with physical, developmental, cognitive, and emotional disabilities to achieve their personal, career, and independent living goals in the most integrated setting possible through the application of the counseling process. The counseling process involves communication, goal setting, and beneficial growth or change through self advocacy, psychological, vocational, social, and behavioral interventions. The specific techniques and modalities utilized within this rehabilitation counseling process may include, but not be limited to:

- * Assessment and appraisal;
- * Diagnosis and treatment planning;
- * Career counselling;

- * Individual and group counselling treatment interventions focused on facilitating adjustment to the medical and psychosocial impacts of disability;
- * Referral;
- * Case management and service coordination;
- * providing consultation and access to rehabilitation technology.
- * Interventions to remove environmental, employment and attitudinal barriers;
- * Program evaluation and research;
- * Consultation services among multiple parties and regulatory systems;
- * Job development and placement services, including assistance with employment and job accommodation.

6. FAMILY COUNSELLING

Family counseling also referred to as couple and family therapy, family systems therapy, and, is a branch of psychotherapy that works with families and couples in intimate relationships to nurture change and development. It tends to view change in terms of the systems of interaction between family members. It emphasizes family relationships as an important factor in psychological health.

Family counseling is a type of psychotherapy that may have one or more objectives. Family counseling may help to promote better relationships and understanding within a family. It may be incident specific, as for example family counseling during a divorce, or the approaching death of a family member. Alternately family counseling may address the needs of the family when one family member suffers from a mental or physical illness that alters his or her behavior or habits in negative ways.

Family counseling often occurs with all members of the family unit present. This may not always be the case. A family member who suffers from alcoholism or drug addiction might not attend sessions, and might actually be the reason why other family members seek out family counseling.

Part of the goal of the therapist is to observe interactions between family members. Another part is to observe the perception of non-interacting family members. Thus if two family members get into an argument in a session, the therapist might want to know how the other family members are dealing with the disagreement or the way in which the two fighting members comport themselves.

In addition to observation, the therapist often helps the family reflect on better ways of communicating with each other. So family counseling may in part be instruction and encouragement. In fact, family counseling often teaches family members new and more positive ways to communicate to replace old, negative communication patterns.

Concepts in Family counseling

THE IDENTIFIED PATIENT. The identified patient (IP) is the family member with the symptom that has brought the family into treatment. Children and adolescents are frequently the IP in family therapy. The concept of the IP is used by family therapists to keep the family from escaping the IP or using him or her as a way of avoiding problems in the rest of the system.

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 therapist 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 IP, and what is likely to happen when the family begins to change.

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, behaviours, and other issues. Children and adolescents often benefit from family therapy that includes the extended family.

DIFFERENTIATION. 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.

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.

Precautions

Individual therapy for one or more family members may be recommended to avoid volatile interaction during a family therapy session. Some families are not considered suitable candidates for family therapy. They include:

- families in which one, or both, of the parents is psychotic or has been diagnosed with antisocial or paranoid personality disorder
- families whose cultural or religious values are opposed to, or suspicious of, psychotherapy
- families with members who cannot participate in treatment sessions because of physical illness or similar limitations
- families with members with very rigid personality structures (Here, members might be at risk for an emotional or psychological crisis.)
- families whose members cannot or will not be able to meet regularly for treatment

Risks- The chief risk in family counselling is the possible unsettling of rigid personality defences in individuals or relationships that had been fragile before the beginning of therapy. Intensive family therapy may also be difficult for family members with diagnosed psychological disorders. Family therapy may be especially difficult and stressful for children and adolescents who may not fully understand interactions that occur during family therapy. Adding individual therapy to family therapy for children and adolescents with the same therapist (if appropriate) or a therapist who is aware of the family therapy can be helpful.

Normal results vary, but in good circumstances, they include greater insight, increased differentiation of individual family members, improved communication within the family, loosening of previously automatic behavior patterns, and resolution of the problem that led the family to seek treatment

Marital Counselling:

To help solve problems between couples. Issues like adjustment problems , financial issues, sexual issues etc.

India is a very conservative land. But there are more and more couples who opt for therapy to save their relationship. This shows a positive attitude towards counselling practice. There are mainly two types of marital counselling .1) Pre-marital and 2) Post-marital

Pre-marital- Couples who are getting married are given counselling before their marriage in order to make the relation more effective. This practice is mainly seen in Christianity in India and which is gaining acceptance in other religions also.

Post-marital- the counselling given to couples after marriage. Mainly people come for this when problems occur in their married life.

7.. DISASTER COUNSELLING

Community Counseling in Disaster Situations-

When a community-wide disaster hits, widespread confusion and panic are common in the populace. For these people, pain from loss of homes, loved ones, and community devastation is compounded by their need for recovery services and psychological treatment to help with recovery. With so many people in need when disaster strikes, the leadership of community counsellors is essential to help victims organize tasks, streamline services, and rebuild their communities. Disasters create upheaval that disrupts lives. Economic, political, and social turmoil create barriers to recovery, requiring leaders in the community to meet with victims and discover their needs.

According to “Post-Disaster Social Justice Group Work and Group Supervision,” published in *The Journal for Specialists in Group Work*, the focus in post-disaster counselling is helping the survivors to understand their situations, and create pathways to recovery. People in disaster situations frequently experience anxiety over relocating, depression over loss of home and possessions, and grief over loss of loved ones. But immediately following a disaster, counsellors must emphasize daily challenges before turning their attention to deeper psychological issues. The article, by authors Fred Bernak and Rita Chi-Yang Chung, notes that survivors are often disorganized in planning and thinking, and many become overwhelmed at the tasks set before them. Community counselors first meet with the survivors to help with daily problem solving and organizing. For example, in the aftermath of

a disaster, survivors might feel so devastated that they are in shock. A community counselor would meet with these survivors and normalize the sense of loss and devastation. Once the survivors are in a more calm state, the counselor would help to organize the steps the survivors must take. This includes finding shelter, food, water, medical supplies, or anything else the survivors require.

After the counselor addresses basic survival needs, the counselor should turn his or her attention to the psychological welfare of the survivors. For survivors, group counseling is an effective intervention. Group counseling provides a feeling of universality for survivors. Sharing disaster stories and allowing victims to explore coping strategies with each other reassures those who believe their experience was unique or abnormal. Rebuilding after a disaster takes time, and not all mental health problems are easily solved. Nevertheless, community counselors are important leaders in times of crises, helping individuals on the long road to recovery.

Crisis Counselling

Outreach and crisis counselling activities are the core of the Crisis Counselling Program and create a unique set of challenges. Disaster crisis counselling requires breaking out of traditional ways of identifying people in need of services, providing access to those services, maintaining documentation, and determining effectiveness. Mental health professionals will work hand-in-hand with paraprofessionals, volunteers, community leaders, and survivors/victims of the disaster in ways that may be foreign to their clinical training.

Outreach and crisis counselling activities are the core of the Crisis Counselling. Crisis counseling may be in a disaster situation or in situations like suicide etc. Crisis counselling requires breaking out of traditional ways of identifying people in need of services, providing access to those services, maintaining documentation, and determining effectiveness. In case of suicide the main aim of crisis counseling is to get the person out of the crisis situation. The counselor listens and talks the client out of the crisis.

Role of Crisis Counseling in Disaster

Crisis Counseling provides treatment for the psychological and emotional needs of those who've been affected. Counseling services are designed to help individuals cope with their present circumstances, identify available options and develop a plan for getting back on their feet. Services provided focus on a person's or family's state of need and the steps required to improve their immediate circumstances.

Features

The role of crisis counseling in natural disasters is based on the premise that individuals, families and communities can eventually resume the activities of normal life once needed assistance measures are provided for. The services provided are designed to help victims identify normal stress reactions within a crisis and develop coping skills for working through their present circumstances. Skills training may include stress management techniques, emotional management techniques and any necessary referrals for ongoing mental health assistance.

Stress Treatment

Reducing the ongoing effects of stress is the primary focus of crisis counseling within natural disaster situations. Symptoms of stress can appear in various forms and last anywhere from days to months. In addition to the initial stress caused by a disastrous event, the recovery period following a disaster can be equally, if not more so, stressful. In circumstances like these, stress management assistance can prevent symptoms like anxiety, fear, and feelings of hopelessness or powerlessness from getting worse.

Conclusion: The social life of the people is affected by the kind of community in which they live. Today none of us belongs to one inclusive community, but to wider communities at the same time. Man today is a member of several groups, which satisfy the diverse needs of his personality. He feels attached to these groups which replace the community sentiment. Thus a counsellor should have knowledge about those matters while counselling a client.

7. CORRECTIONAL COUNSELLING

In criminal justice, , correction, corrections, and correctional, are umbrella terms describing a variety of functions typically carried out by government agencies and involving the punishment, treatment, and supervision of persons who have been convicted of crimes.^[1] These functions commonly include imprisonment, parole and probation. A typical correctional institution is a prison. A correctional system, also known as a penal system, thus refers to a network of agencies that administer a jurisdiction's prisons and community-based programs like parole and probation boards;^[3] this system is part of the larger criminal justice system, which additionally includes police, prosecution and courts.^[4] Corrections is also the name of a field of academic study concerned with the theories, policies, and programs pertaining to the practice of corrections. Its object of study includes personnel training and management as well as the experiences of those on the other side of the fence — the unwilling subjects of the correctional process. For counseling services and rehabilitation work, correctional counselors are needed . Counseling is done both while a person is inside jail and after they are set free. On both accounts, the person needs to adjust to the environment where she will be placed in so pieces of advice from a credible person are much needed. Aside from providing counsel, these counselors are also tasked with improving the skill sets of the prisoners such as their interpersonal skills and soft skills needed for a stable job. This is needed so that while they are on parole or probation, they can work in jobs provided by agencies. To become a correctional counselor, you need to have at least a bachelor's degree. Use these tips to learn more about being a counselor at a correctional institution.

Counselors in correctional setting Provides individual and group guidance and related counseling services to institutionalized residents in a correctional facility in the areas of social, behavioral, educational, vocational and related program planning; participates in the development and implementation of specific plans and goals for rehabilitation and gradual reintegration into the community; performs related work as required.

Consults with other professional staff members in structuring rehabilitative services and activities for individuals with strong counseling and guidance needs; develops treatment plans that require.

WORK EXAMPLES

- Interviews newly admitted residents, obtains and reviews all pertinent records and reports including probationary reports, criminal records and information concerning family, education, employment, health and other personal matters; assesses personal individual needs, capacities, educational level, family circumstances, behavioral problems and aspirations.
- Maintains caseloads of residents, some with unusual or severe personal, vocational or behavioral problems; conducts extensive evaluations of individual's progress and adjustment toward personal problems, family, work and correctional environment; provides counseling and guidance services requiring close and prolonged observation and adaptation of advanced counseling techniques.
- Corresponds and visits with past and prospective employers, lawyers, friends and/or relatives to obtain information which is utilized in planning and implementing specific goals and objectives.
- Consults with other professional staff members in structuring rehabilitative services and activities for individuals with strong counseling and guidance needs; develops treatment plans that require special emphasis and change to increase the possibility of reaching a desired level of adjustment and orientation.
- Participates in disciplinary, classification, and pre-parole classification committee meetings involving assigned residents; reviews misconduct reports and determines in conjunction with review committee the extent of punishment, such as reprimand, isolation or segregation; as a member of committee recommends individuals for release based on behavior, attitude and related factors; insures that all institutional policies in regard to committee functions are followed relative to individual rights, appeals, notification of hearings and explanations relative to committee findings.
- Conducts primary treatment for substance addiction from intake and assessment through discharge planning.

Participates in the training and development of undergraduate and graduate students from Schools of Social Work in assigned program areas

COMPETENCIES REQUIRED

- ❖ Knowledge of general sociological and psychological factors affecting human behavior.

- ❖ Knowledge of interviewing techniques and procedures.
- ❖ Knowledge of guidance and counseling principles and practices.
- ❖ Knowledge of the standard sources of occupational information such as the Dictionary of Occupational Titles and Occupational Outlook Handbook.
- ❖ Ability to prepare comprehensive evaluations and to develop recommendations for placement within established correctional programs.
- ❖ Ability to relate and integrate counseling and guidance program aspects with those of other professional disciplines.
- ❖ Displays high standards of ethical conduct.
- ❖ Exhibits honesty and integrity.
- ❖ Refrains from theft-related, dishonest and unethical behavior.
- ❖ Works and communicates with internal and external clients and customers to meet their needs in a polite, courteous, and cooperative manner.
- ❖ Committed to quality service.
- ❖ Displays a high level of initiative, effort and commitment towards completing assignments efficiently.
- ❖ Works with minimal supervision.
- ❖ Demonstrates responsible behavior and attention to detail.
- ❖ Responds appropriately to supervision.
- ❖ Makes an effort to follow policy and cooperate with supervisors.
- ❖ Aligns behavior with the needs, priorities and goals of the organization.
- ❖ Encourages and facilitates cooperation, pride, trust and group identity.
- ❖ Fosters commitment and team spirit.
- ❖ Expresses information to individuals or groups effectively, taking into account the audience and nature of the information.
- ❖ Listens to others and responds appropriately.

GRIEF/BERAVEMENT COUNSELLING(Extra Notes)

Grief:

- is caused by a major life change
- is a normal reaction to a death or loss in a person's life
- can be hard, stressful and tiring, but it is not an illness
- helps us to let go of the past and adjust to a new life without the person who died

How does grief affect people?

All people grieve differently. Some people will feel shocked and numb in the beginning. Strange and painful thoughts and feelings may follow:

- thoughts of confusion, disbelief, and wondering if this is just a dream
- feelings of sadness, anger, guilt, loneliness, bitterness, fear, edginess, nervousness, short tempered, and lack of confidence

All of these feelings are natural. People who are grieving may:

- cry a lot
- blame others
- have upset stomachs and headaches
- have problems sleeping, resting, eating or doing small tasks
- have no energy
- feel they have the same problems as the person who has died

People who are grieving may find that:

- grief goes on much longer than they imagined
- there are no quick fixes or ways to grieve
- Each person has to work through his or her grief and in his or her own way. It is not always easy for others to help.
- grief never really goes away, but lessens over time

Grief helps the person to deal with the death. If it is not dealt with it may get deeper and show up later as a mental or physical illness.

Grief Counselling

Grief counseling is a form of psychotherapy that aims to help people cope with grief and mourning following the death of loved ones, or with major life changes that trigger feelings of grief (e.g., divorce).

Grief counselors feel that everyone experiences and expresses grief in their own way, often shaped by culture. They believe that it is not uncommon for a person to withdraw from their friends and family and feel helpless; some might be angry and want to take action. Some may laugh.

Grief counselors hold that one can expect a wide range of emotion and behavior associated with grief. Some counselors believe that in all places and cultures, the grieving person benefits from the support of others.^[1] Further, grief counselors believe that where such support is lacking, counseling may provide an avenue for healthy resolution. Grief counselors believe that grief is a process the goal of which is "resolution." The field further believes that where the process of grieving is interrupted, for example, by simultaneously having to deal with practical issues of survival or by being the strong one and holding a family together, grief can remain unresolved and later resurface as an issue for counseling.

The need for grief counselling

Grief is experienced and expressed in individual ways, often influenced by cultural mores. Usually the grieving individual has intense feelings of helplessness and withdraws from his/her family and friends. Some people experience anger and feel like taking action. In fact, grief can elicit a wide variety of behavioral and emotional responses. In every culture and place, the person experiencing grief benefits when they get support from others. In the absence of such support, grief counseling can help in dealing with the devastating effects of grief. Grief counseling can also help in the event that there is an interruption in the grieving process due to some reason, such as the necessity of practical matters of survival, or having to

be the strong one in the family, which results in the grief being suppressed, which may resurface later.

Grief counseling gets particularly necessary when the person experiencing the grief is so completely overwhelmed and debilitated by their grief that their natural coping capabilities are lost.

How does grief counselling work?

Grief counselling works by helping grieving individuals work their way through their memories, thoughts, and feeling about the loved one they have lost. While indeed grief can be experienced for a number of reasons like the loss of relationships, ideals, goals, and so on, grief counseling is usually meant for providing support and means of adjustment after the loss of a loved one.

Grief counselling assists people to acknowledge the normal aspects of the process of mourning or grieving, come to terms with the pain of the loss, have a sense of being supported through the natural anxiety of the changes in one's life that comes about due to the loss, as well as develop methods of seeking self-care and support.

Grief counseling can help in facilitating the individual in expressing their emotions as well as the thoughts about their loss, such as feelings of numbness, confusion, isolation, relief, guilt, loneliness, anger, anxiety, and sadness. It helps the individual accept the loss; adjust to the changes in life, along with dealing with the changes that occur inside oneself as well as with the world.

Grief counseling also helps the grieving individual working out creatively the challenges that come with loss. People often experience traumatic feelings of disorganization, tiredness, trouble in concentrating on anything, disruption in sleep as well as vivid dreams, appetite changes, and so on. Grief counseling addresses even these, helping the individual to overcome their feelings of intense grief and move on with life.

APPLICATION OF SOCIAL WORK METHODS IN COUNSELLING

APPLICATION OF SOCIAL CASE WORK IN COUNSELLING

What is social case work?

It is a method of social work which intervenes in the psycho-social aspects of a person's life to improve, restore, maintain or develop their social functioning by improving their role performance.

Social casework has been defined by many authors and practitioners (see Robinson 1930, Hollis 1964, Zastrow 1995) but a wholesome definition has been offered by the National Association of Social Workers (1992) as a method of providing services whereby a professional social worker assesses the needs of the client and the client's family, when appropriate, and arranges, coordinates, monitors, evaluates, and advocates for a package of multiple services to meet the specific client's complex needs.

How do you do social case work process? Social casework process is a scientific technique to solve such problems of persons which obstruct the effective social adjustment of the person. Following steps are involved in the Social casework...

Tools of social case work?

- Tools of Social case work are:
- Listening
- Observation
- Interview
- Home Visit
- Relationship

Application of Social Case Work in Counseling:

- The worker's knowledge, skill and professional value system are employed to help individuals and families solve psychosocial, interpersonal, and environmental problems through direct one-to-one and face-to-face relationships.
- They promote or restore a mutually beneficial interaction between individuals and society in order to improve the quality of life for everyone.
- In India, social workers practice case work in a variety of conventional settings, e.g. Hospitals, Schools, Child and Adolescent Guidance Centers, Correctional Settings,

Community Health Centers, Mental Hospitals, Family Welfare Centers, Vocational/Career Guidance Centres, Industries/factories etc. which have existed from the commencement of social work practice in India.

- Case workers work with clients of all ages, often with the particular psychological and social problems of their life-stage; namely children, adolescents, young adults, middle-aged adults and the aged.
- It is essential for the caseworker to find a vent for client's bottled emotions for therapeutic reasons.
- The client must be helped to express his/her feelings because it is an important part of the case work process.
- The caseworker must also remember that extreme coldness in the relationship conveyed verbally or non-verbally to the client could prove detrimental to the therapeutic relationship.

Steps in the problem-solving process can be affirmed in a multiple of ways. A simple description of this practice follows:

- Identify as accurately as possible the problem or problems.
- Generate possible alternative solutions.
- Evaluate pros and cons of all alternative solutions.
- Decide on a solution or solution to be used, and set goals.
- Implement the solutions.

APPLICATION OF SOCIAL WORK METHOD

Social group work in Counseling

The Group is a place where you can experiment with different way of behavior.

Social group work is a psychological process which is concerned no less with developing leadership ability and co operation than with building an interest of the group for social purpose

Group counselling

- Group counseling is a form of therapy which posits that people benefit from shared experience
- Group counseling is focused on a particular issue
- Therapists usually manage group counseling contribution from other member in the group
- The main principle of group counseling is the idea that dealing with specific issue may cause isolation
- It attempts to counteract the isolation by assembling people with similar issues

Advantages of Group counseling

- Provide unique environment
- Exploring the issue in depth
- Avoiding isolation and loneliness
- Highly organized
- Group counseling cost less
- Help others and being helped

Disadvantages of Group Counseling

- Too large groups suffers
- Monopolizing the group

Conclusion

Group counseling is indeed a very effective way to solve one problem. It is a process through which serve problems can be tackled properly.

APPLICATION OF SOCIAL WORK METHOD

Application of Community Organization in Counseling

Definitions of community;

- ❖ MacIver defines community as “an area of social living marked by some degree of social coherence”.
- ❖ He further says “whenever the members of any group, small or large, live together in such a way that they share, not this or that particular interest, but the basic conditions of a common life, we call that group a community.

- ❖ According to Lundberg :Community is “a human population living within a limited geographic area and carrying on a common inter-dependent life”

Elements of community:

- Group of people
- Locality
- Community sentiment
- Permanency
- Likeness
- A particular Name
- Size of community

Community organization:

According to M.G Ross, Community organization is a process by which a community identifies its needs or objective, orders or ranks these needs or objectives, develops the confidence and will to work at these needs or objectives, finds the resources, internal or external to deal with these needs or objectives, takes action in respect of them and in so doing, extents and develops, co-operative and collaborative attitude and practices in the community”.

Methods of community organization

- Planning
- Education
- Promotion
- Community participation
- Collective decision making
- Leadership development
- Resource mobilization
- Co-ordination

Community Counselling

Community Counselling is one of making positive and lasting changes in the lives of individuals and families each through prevention, education, treatment and wellness programs. Community Counselling provides a safe haven to individuals and families throughout the entire lifespan and helps them build on their strengths and develop tools to cope with unexpected challenges, such as divorce, substance abuse, parenting a deaf child, readjusting after war, overcoming discrimination based on sexual orientation or gender identity, or caring for an aged parent. Every person who walks through our doors receives the highest quality, evidence-based family services in an environment where everyone is treated with dignity and respect.

Individual, Family, Group Counseling, and Community Counseling Center offers effective, high quality family, individual and group therapies to help children, adults and senior citizens from all incomes and backgrounds struggling with:

- Depression and anxiety
- Acute and chronic mental illness
- Relationship, couple and family problems
- Parenting and child rearing challenges
- Behavioural and emotional problems in children
- Abusive or destructive relationships
- Sexual and/or physical abuse
- Unplanned pregnancies
- Economic or financial stresses
- HIV/AIDS
- Family crises, including separation, divorce and death
- Aging parents with mental illnesses
- Loss and declining health that comes with aging
- Post-traumatic stress disorder and recovery from catastrophic events

In addition, Community Counseling provides statewide outpatient mental health services to Deaf, hard of hearing, deaf-blind and late deafened adults and children.

Case Management Services

In addition to counseling programs, Community Counseling has a number of programs designed to help families and children thrive in school, at home, at work and in the community. Through its case management programs, Community Counseling helps parents locate necessary services and supports within the community for their children. Case managers work with families of children diagnosed with mental illness, behavioural issues

and other specialized needs, including developmental disabilities and mental retardation, to develop a plan tailored to the individual needs of the child. Case managers help parents:

- Locate and coordinate resources and funding
- Advocate for needed services on behalf of their children
- Ensure that appropriate services are in place and that the children's needs

Continue to be met

Community Counseling Case Management program works with children who may be identified with having emotional and/or behavioral difficulties due to transitions, trauma history or other adjustments and are not receiving culturally relevant services. Case management staffs that are multilingual and can provide case management services. Community counseling provide interpreters to work with families who may speak other languages.

Elder Services

Aging adults often find themselves alone, struggling with declining health, financial difficulties, depression and loss. Community Counseling offers programs for individuals over 50 with mental health needs, including:

- An innovative day program designed to provide individualized treatment within a nurturing and supportive community environment
- Art therapy and other expressive therapies
- Home-based assessment and counseling
- Geriatric case management services to assist older adults with identifying and coordinating resources and supports

Community Programs

Community Counseling programs reach beyond its walls and into the community. Community-based programs include:

- Classes to help parents better understand and anticipate the normal patterns and stresses of individual, family and parent/child relationships
- Educational programs about issues that affect the emotional health of individuals and families in the community
- Speak Out Project, a speakers' bureau that helps foster understanding and dialogue around issues of sexual diversity.
- Case Management assists young people with mental health concerns in accessing community services and programs.

- Trauma Intervention Program (TIP), a group of specially trained citizen volunteers who provide emotional and practical support to victims of traumatic events and their families in the first few hours following a tragedy.
- Educational annual public lecture, featuring renowned speakers on issues of emotional health, free and open to the community .

Community Counseling offer skilled, professional employee assistance services to regional businesses, organizations, municipalities and their members for over 15 years. Community counseling conducts comprehensive study to understand the challenges and needs of returning soldiers and their families. Community Counseling has developed specialized services to address the needs identified in this study. Services are provided by clinicians skilled in trauma recovery. Community Counseling provide a network of support for veterans and their families. Community Counseling provides effective, high-quality family, individual and group therapies focused on the unique issues of veterans and their loved ones. Services are provided to children, adults and families from all branches of the armed services who may be struggling with:

- Issues of trauma and witnessing traumatic events
- Grief and loss
- Depression and anxiety
- Relationship, couple and family problems
- Parenting and child rearing challenges
- Behavioral and emotional problems in children
- Abusive or destructive relationships
- Family crises, including separation, divorce and death

Community counseling is a major part of the interventions at community level that has at its basis the discipline of Community Psychology. Research in psychology at the level of the community in contrast to the prevailing ethos of working at the level of the individual brought many benefits. Not the least of such benefits has been the impetus it provided for urban renewal efforts in the United States. The very first use of the term community psychology is attributed to S.B. Sarason. In 1974 he wrote the seminal book, 'Psychological Sense of Community: Prospects for a Community Psychology', published by Josey Bass. Since then, community psychology and community counseling has spread worldwide. Community psychology's fundamental thesis is that individuals as psychological subjects cannot be separated from their setting of families and communities (environment), and

studied in isolation in any meaningful way. Professionals, psychologists and counselors among them, have to understand the social world within which individuals live and work, to enable them to engage people in intervening, affecting, and improving the lives of their clients and counselees. The urban environment, especially the inner city has been targeted as an area of concern, and much positive work has been undertaken there. These encompass the ideas that problems have social and interactional causes, should be analyzed at the macro level, that service planning should be proactive and community-based, and that practice should focus on prevention within everyday contexts and involve the sharing of psychological skills and knowledge with non psychologists. An even more basic rationale for community counseling is qualitative and action based research, are the methods normally adopted by community psychologists seeking 'multiple outcomes using 'diverse strategies and initiatives'.

APPLICATION OF SOCIAL WELFARE ADMINISTRATION IN COUNSELING

- According to John C Kidnneigh social welfare administration is the process of transforming social policy into current community needs.
- It evaluates and experience based upon current community needs.

POSDCORB view of Social Welfare Administration

- Planning
- Organizing
- Staffing
- Directing
- Coordinating
- Reporting
- Budgeting

Social work:

Help the helpless to help themselves'.

- ❖ Social work is a method or process based on scientific knowledge and skill
- ❖ To assist the individuals, groups and communities.

- ❖ To enhance their social functioning.
- ❖ To grow in accordance with their knowledge, capacities and capabilities.
- ❖ A program that prepares individuals for the professional practice of social welfare administration and counseling
- ❖ And it focuses on the study of organized means of providing basic support services for vulnerable individuals and groups.
- ❖ Includes instruction in social welfare policy;
- ❖ case work planning;
- ❖ social counseling and intervention strategies;
- ❖ administrative procedures and regulations; and
- ❖ specific applications in areas such as child welfare and family services
- ❖ probation, employment services, and disability counseling

SOCIAL WORK RESEARCH IN COUNSELLING

In a very broad sense, social work research is the application of research methods to solve problems that social workers confront in the practice of social work. It provides information that can be taken into consideration by social workers prior to making decisions, that affect their clients, programmes or agencies such as use of alternative intervention techniques or change or modification of programme/client/objective.

- **Social Work Research: Definition**

Social work research may be defined as systematic investigation into the problems in the field of social work. The study of concepts, principles, theories underlying social work methods and skills are the major areas of social work research. It involves the study of the relationship of social workers with their clients; individuals, groups or communities on various levels of interaction or therapy.

How research is related with counseling?

- We can find out new techniques and methods of counseling by doing research in the same area.
- Every research is scientific in nature, so once we find a new methods or therapy in the area of counseling, it can be used by the counselors for assisting people.
- By doing research in counseling we can find out the statistic ratio of people

- Proper analysis of research will give clear understanding about the common problems faced by the people.
- By doing research we will get new scale and inventories for doing further research in the same area.
- We can take every research for our further study purposes.
- Changing hypothetical knowledge into tested knowledge.
- To have better understanding of the problems of social work and provide service accordingly.

SOCIAL ACTION IN COUNSELLING

In sociology, **social action** refers to an act which takes into account the actions and reactions of individuals. According to Max Weber an Action is 'social' if the acting individual takes account of the behavior of others and is there by oriented in its course.

TYPES OF SOCIAL ACTIONS

- Rational action
- Instrumental action
- Affectional action
- Emotional action
- Traditional action

SOCIAL ACTION IN COUNSELLING

- ❖ Bringing changes in the individuals.
- ❖ Elimination of problems from the individuals.
- ❖ Bringing back to current position.

ADVANTAGES OF SOCIAL ACTION IN COUNSELLING

- ✓ Behavior modification
- ✓ Improvement of personal skill
- ✓ Improvements in social relations
- ✓ Improvements in family relationships

- ✓ Personality development of the individuals
- ✓ Changes in quality life – By training
- ✓ Advises and Guidance's
- ✓ Psycho-social support

Social action in counseling is indeed a very effective way to solve individual's problems. It is a process through which serve persons can be tackled properly.