

# Helping Relationship

Comps Study Guide #3

Define the following: psychological dysfunction; etiology; equifinality; comorbidity and adaptive functioning.

**Psychological dysfunction** is a breakdown in a person's thought processes, emotional functions or behavior. A diagnosis of psychological dysfunction must consider the patient's cultural context, his personal distress and the extent to which his ability to function is impaired.

**Etiology** is the study of the causes of disease or abnormal conditions, whether the cause is biological, psychological, or arises from the patient's social environment.

**Equifinality** can be defined as multiple paths leading to the same outcome. An example of equifinality in abnormal human behavior would be physical injury or illness, the loss of a loved one or alcoholism leading to depression.

**Comorbidity** is the coexistence of two or more diseases or disorders such as alcoholism and depression. The conditions may have a causal relationship with each other, or there may be an underlying predisposition for both or all of them.

**Adaptive functioning** is coping with stressful situations through defense mechanisms such as anticipation, humor and sublimation. Persons who fail to adapt can develop a breach with reality.

Explain what occurs in  
a neuropsychological assessment.

There is a need at first to determine the extent of the loss of a particular skill and the area of the brain that might have been damaged by injury or neurological illness, neuropsychological assessment has become a measurement of brain dysfunction relating to language, attention, concentration, memory, and perceptual and motor skills. It is still used also to determine the location of damage to the brain. Examples of neuropsychological assessment instruments are the Luria-Nebraska Neuropsychological Battery, used to measure organic brain damage and the location of injury and the Bender® Visual-Motor Gestalt Test, which measures brain dysfunction.

Explain the difference between emotion and mood, ego-dystonic and ego-syntonic, and clinical assessment and diagnosis.

**Emotion** is a mental state arising spontaneously as a reaction to some stimulus and is usually accompanied by physiological changes in the person's body. Mood is a state of mind, which can be caused by motions or events or a combination of the two.

**Ego-dystonic** pertains to behaviors, values, and feelings, which are inconsistent with the person's basic concept of his self (ego) and can lead to a psychological disorder.

**Ego-syntonic** pertains to behaviors, values, or feelings that are consistent with the person's ego.

**Clinical assessment** uses tests and tools to determine the psychological, physiological, and social factors that are the cause of a psychological disorder.

**Diagnosis** determines whether or not the problems meets the criteria for a psychological disorder.

Describe play therapy.



Play therapy is of special interest to counselors who typically have children for clients. Usually play therapy is done on a one-to-one basis; however it may be used within the process of family therapy as well.

While playing the children learn how to better control their emotions, the difference between right and wrong, and a number of cognitive skills. The child decides what to play with and any rules associated with the play. The counselor watches and listens carefully in order to assess the child's problems and coping mechanisms. Sometimes the counselor may play along with the child helping them to make good decisions.

Play therapists may use dolls, puppets, toy vehicles, or any number of "open ended" toys that can be played with in a creative and expression filled manner. Perhaps the most important element of play therapy is the bond of trust created between child and counselor as well as unconditional acceptance on the part of the counselor.

Give the 5 areas covered by a formal mental status exam and examples of the types of assessments available to professionals.

A formal mental status exam is an assessment of a person's appearance, behavior, thought processes, mood, emotions, intelligence, and of his awareness of surroundings, time, location and his own identity. Some factors such as thoughts, feelings and behavior may be assessed by direct observation, while psychological assessment tests are used to evaluate intelligence and personality characteristics. Some of the assessment instruments are unstructured projective tests in which the person's responses reflect his personality, including hidden emotions and internal conflicts. These instruments include Rorschach, Thematic Apperception Test and Incomplete Sentences Blank. Personality tests such as the Minnesota Multiphasic Personality Inventory (MMPI) can be used to ascertain stable aspects of a person's character. Intelligence tests include the Wechsler Intelligence Scale for Children (WISC-II-R) and the Stanford-Binet (SBIV). They are used to determine the level of a person's intellectual ability.

Explain the following types of disorders: anxiety disorders; somatoform and dissociative disorders; and mood disorders, and their usual treatment.

**Anxiety** is a state of uneasiness or apprehension, which can cause physical tension. The tension of looking forward to an event can be positive. Severe anxieties or multiple anxieties, especially when they have comorbidity with another disorder are abnormal behavior. Panic disorder, phobias, posttraumatic stress, and obsessive-compulsive behavior are examples of anxiety disorders. Medication, relaxation techniques, cognitive behavioral therapy, and exposure exercises are acceptable treatments for anxiety disorders.

**Somatoform disorders** involve physical symptoms for which no specific physical cause is present. The disorders include hypochondrias, somatization disorder, conversion, and pain disorder. Treatment is more management than cure and may or may not include medication. Dissociative disorders involve the breakdown of a person's perceptions of his environment, his memory or identity.

**Dissociative disorders** include dissociative amnesia, dissociative fugue (flight), dissociative identity disorder (multiple personality) and depersonalization disorder. Psychotherapy and sometimes hypnosis are among the treatments for dissociative disorders.

**A mood disorder** is a condition in which the person's prevailing mood is disturbed or inappropriate. The disorders include depression, anxiety, and bipolar syndrome. The mood disorders are the most common psychological illnesses and are increasing worldwide in both the adult and child populations.

List basic facts about suicide.

Suicide is among the ten most frequent causes of death in the United States with approximately 30,000 recorded each year. The actual number is estimated to be closer to 75,000.

- The suicide rate increases with age.
- Among 15-24 year olds, suicide is the third most frequent cause of death with about 4,000 each year.
- Males are more likely to commit suicide than females, but the attempt rate is higher among females.
- Groups at greatest risk include Native American and Alaska Natives, adolescents and gay and lesbian youth.

No differences in the profiles of suicidal and non-suicidal individuals are revealed by such standard personality tests as the MMPI and Rorschach. Indications that a person may make a suicide attempt include depression and anger, experiencing loss or rejection, talking about suicide, planning and securing the means to commit suicide, and giving away possessions. Counselors should be aware of support groups, have a crisis plan, and involve the community when working with at-risk clients.

Define the following:  
co-dependents, mediation,  
assertiveness training, and  
androgyny.



**Co-dependents** are people in relationships with addicted or troubled persons. The addiction can be to drugs, alcohol, or self-destructive behavior. Some form of psychological dysfunction may also be involved. The relationship may be that of lovers, spouses, family members, friends, or co-workers. The codependent becomes an enabler or rescuer for the other person. He or she makes excuses for the person or may deny that there is a problem.

**Mediation** is the resolution of a conflict between two or more parties by the intervention of a neutral party.

**Assertiveness training** is a psychotherapy method that helps a person to learn to state both negative and positive feelings directly. The method does not encourage aggressive behavior.

**Androgyny** is defined as having both male and female characteristics.

Describe the theories of  
Leon Festinger,  
Kubler-Ross and  
Masters and Johnson.

**Leon Festinger** developed the concept of cognitive dissonance. Cognitive dissonance is the mental discomfort that arises when a person does something that conflicts with his beliefs or normal behavior or when he holds conflicting opinions. Festinger presented his theory in his 1957 book *A Theory of Cognitive Dissonance*.

**Elisabeth Kubler-Ross** in her book *On Death and Dying* described five stages people go through when faced with death or other catastrophic events. The five stages are denial, anger, bargaining for time, depression, and acceptance.

Pioneers in the field of research into human sexuality, **William Howell Masters** and **Virginia Eshelman Johnson** advanced the ideas that sexuality is a healthy human trait and that pleasure and intimacy during sex are socially acceptable goals. They made several discoveries about human sexual response and wrote several books on the subject.

Explain the difference between  
diagnosis, prognosis, intervention,  
recommendation,  
statistical norm and cultural norm.

**Diagnosis** is the identification of a disease based on the symptoms or through laboratory tests.

**Prognosis** is the prospect of recovery from a disease based on its usual course or the particularities of the specific case.

**Intervention** is the introduction of services, activities, or products in an effort to cause change or improvement

A **recommendation** is a counselor's statement of the recommended course of treatment.

The **Statistical norm** is a mathematical distribution that can be used to measure the average expectation of how a group of people will act.

A **Cultural (or social) norm** is the expectation of how a population will or should behave, as opposed to what they actually do.

Define the following: accountability, paralanguage, contextualism, culture versus society, and therapeutic surrender.

**Accountability** is being responsible or accountable for one's actions. For a counselor, accountability means being able to explain or justify treatment decisions and activities used with a client.

**Paralanguage** is the use of nonphonemic properties of speech such as intonation, pitch, tempo, and gestures to convey attitude or meaning.

**Contextualism** is the concept that behavior, decisions and actions must be understood in context.

**Culture** is the shared norms, values, arts, beliefs, and institutions of a community or population. A **Society** is a population that occupies a defined territory and has shared interests and institutions. All members of a society may not share the same culture. An example would be a Native American culture inside the United States.

**Therapeutic surrender** occurs when a client psychologically surrenders himself or herself to a counselor from a different culture or class. The relationship must involve trust and rapport, resulting in the client becoming open with his thoughts and feelings.

Provide information on the following theories:  
social exchange theory,  
complementarity theory, and  
assimilation-contrast theory.



**Social exchange theory** links behavioral psychology and economics. According to the theory positive relationships are characterized by profit. As long as the rewards of the relationship exceed the cost, the relationship will continue.

**Complementarity theory** states that relationships strengthen when the personality needs of each member of the couple enhance those of the other. The theory advances the idea that the couple makes up for each other's lack.

**Assimilation contrast theory** is the idea that when there are similarities between the client and the counselor, the similarities will be viewed as being more like the client's own (assimilation), and dissimilar attitudes will be exaggerated. The more respect the client has for the counselor and the more trustworthy he or she believes the counselor to be, the more the client will accept the counselor's statements.

Provide the basic tenets of  
the following theorists:  
Durkheim, McDougall,  
Berne and Parsons.

**Emile Durkheim** is considered to be the founder of French sociology and is credited with making sociology into a science. He studied social status and alienation and believed technology and mechanization were threats to ethical and social structures.

**William McDougall**, an opponent of behaviorism, advocated the idea that behavior is goal oriented and purposive. His term for this theory was "hormic psychology."

In his book *Games People Play* **Eric Berne** introduced the concept that games are ritualistic behaviors that can indicate hidden feelings. He developed Transactional Analysis (TA) as an alternative to the psychoanalytic techniques in use in the 1950's.

**Frank Parsons**, known as the father of vocational guidance, advanced the theory that personality traits should be matched to job factors.

Describe the following: REBT,  
balance theory, sleeper effect,  
Milgram's experiment, and  
Robber's Cave experiment.

**REBT (Rational Emotive Behavior Therapy)** is based on the concept that people adopt irrational behaviors and beliefs that hinder the achievement of their goals. The therapy aims to change the "must, should, ought" behavior into "wish, prefer, want." The therapy puts less emphasis on mental illness and sees the counselor as a teacher.

**Balance theory** as proposed by Fritz Heider is a motivational theory of attitude change. It explains relationships in terms of people striving for cognitive balance in their likes and dislikes.

**Sleeper effect** is the concept that the effect of communications increases after some time has passed. Communications between a counselor and the client may have little initial impact, but the effect may increase as time passes.

**Stanley Milgram** is known for his research into obedience to authority. In his 1961-62 experiments, he found that 65% percent of his subjects would administer powerful electric shocks to others when told to do so by an authority figure.

**Robber's Cave**, a summer camp in Oklahoma, was used in an experiment by psychologist Muzafer Sherif that demonstrated the importance of co-operation on shared goals in resolving conflict peacefully.

Describe the traits of

- (a) active-directive and person centered counseling models and
- (b) the predictions of the Osgood and Tannenbaum's Congruity theory.

A) **The active-directive counseling model** is especially appropriate for clients from cultures that value authority figures. This model involves the counselor providing advice while speaking with authority and exhibiting a strong attitude. A teacher and student atmosphere template with homework may be used.

Created by Carl Rogers, the **humanistic person-centered counseling approach** is appropriate for use in multicultural and multiracial situations. The method is non judgmental, assumes the client already had the solution to his or her problems, and uses active listening and paraphrasing. Rather than interpreting unconscious thoughts, the counselor helps the client to accept and understand his or her feelings.

B) Based on Heider's theory of balanced relationships, Osgood and Tannenbaum's **Congruity Theory** advances the idea that the more similar the client and counselor are, the more readily the client will accept suggestions from the counselor.

Describe the basic tenets of the psychoanalytic counseling theory.



The psychoanalytic theory developed by Sigmund Freud is based on his theory of personality involving the id, ego, and superego. The id is the unconscious motivation ruled by the pleasure principle. The ego is ruled by the reality principle and the superego provides internalized ethics. Psychoanalysis makes use of the concepts of transference and countertransference. Transference is the projection of the emotions of the client onto the counselor and countertransference is the reverse. The object of the therapy is to help the client work through to his unconscious and uncover the source of conflicts and motivations. Among the techniques used are free association and the interpretation of dreams.

Explain object relations theory.

Object relations theory is based on psychoanalytic concepts and posits that interpersonal relationships shape a person's current interactions with people. The relationships in question can be real or fantasized. Four broad stages occur during the first three years of life. They are:

1. Fusion with the mother during the first 3-4 weeks
2. Symbiosis during the third to the eighth month
3. Separation/individuation starting in the fourth or fifth month,
4. Constancy of self and object occurring by the thirty-sixth month.

Progress through these stages helps the child develop trust that his or her needs will be met. Otherwise the child may develop attachment, borderline or narcissistic disorders. The work of Margaret Mahler, Heinz Kohut and Otto Kernberg has been important in the development of this theory.

Explain the basic principle  
underlying the beliefs of  
Karen Horney,  
Erich Fromm and  
Harry Stack Sullivan.

As Neo-Freudian psychoanalysts, Horney, Fromm, and Sullivan placed emphasis on the ego as the driving psychological force in development.

**Horney** identified the major motivational factor as security. She found that a lack of security caused anxiety and that irrational ways of mending disrupted relationships may cause neurotic needs to develop.

According to **Fromm**, society offers opportunities for mutual love and respect. He found that people need to join with others in order to develop self-fulfillment. Otherwise they become lonely and nonproductive.

**Sullivan's** studies of the social systems used an interpersonal approach and were an effort to understand human behavior. He believed behavior must be examined in respect to social interactions rather than as mechanistic and linear.

List counseling skills in relationship to the counseling setting (empathic, congruence, unconditional, concreteness, immediacy, interpretation, self disclosure, attending).

**Empathic understanding** is the counselor's awareness of the client's feelings and knowledge

**Congruence** is the counselor's ability to be genuinely involved in the counseling session. Congruence is also harmony between a client's behavior and his or her values and beliefs.

**Unconditional positive regard or acceptance** is the counselor caring about the client without imposing conditions or being judgmental.

**Concreteness** is the extent to which the counselor and client confront issues in specific terms.

**Immediacy** is the counseling process dealing with the client's current issues.

**Interpretation** is a therapeutic technique that uncovers or suggests meanings, significance or relationships.

**Self-disclosure** is the counselor sharing personal experiences with the client.

**Attending** refers to such behaviors as listening, engaging in eye contact, and being psychologically present during a counseling session.

Explain the theory of Carl Jung.



Carl Jung regarded the psyche as having three parts: the ego, the personal unconscious, and the collective unconscious. The ego is the conscious mind and the personal unconscious includes things that are not presently conscious such as memories that can be brought to mind and those that have been suppressed. The collective unconscious he regarded as a reservoir of our experiences as a species. Jung applied several terms to the contents of the collective unconscious, but the term that has gained widespread use is "archetypes." An archetype can be compared to instinct in Freud's theory, but are more spiritual than biological. Two of the archetypes are the anima and the animus. The anima is the female traits in a man, while animus is the male traits in a woman. The goal of Jungian therapy is to help the client develop self realization.

Give a brief explanation of the  
concept of the following theorists:  
Gordon Allport,  
Kurt Lewin,  
Aaron Beck,  
Joseph Wolpe, and  
Donald Meichenbaum.

**Allport:** emphasized the uniqueness of the individual. He defined personality as "the dynamic organization within the individual of those psychophysical systems that determine his characteristic behavior and thought."

**Lewin** is called the "father of social psychology." He studied group dynamics and organizational development. His work toward combating racial and religious prejudices laid the foundation for sensitivity training.

**Beck** is known as the "father of cognitive therapy." He believed that people become depressed because they have unrealistic negative views of themselves, the world, and their future.

**Wolpe** believed that behavior therapy is as much an applied science as any other area of medicine. He developed the concept of desensitization and his work led to assertiveness training.

**Meichenbaum**, a proponent of the constructivist perspective, is one of the founders of cognitive-behavior therapy.

In a counseling scenario, discuss alcohol and substance abuse and associated counseling techniques.

Substance abuse, which includes the abuse of alcohol, prescription drugs, and illegal drugs, is a major problem in the United States. Of the fourteen percent of adults who admit to dependence at sometime in their life, half have experienced the problem during the last year. More than three million teenagers have a problem with alcohol. There is a strong connection between drinking and such teenage problems as suicide, early sexual activity, and driving accidents. Abuse of alcohol and drugs affects not just the abuser, but family members, friends, and coworkers as well. Characteristics of substance abusers include low self-esteem, anxiety, sexual problems, suicidal impulses, fear of failure, and social isolation. Since addictions are both physical and mental, successful treatment must involve both. The Substance Abuse Subtle Screening Inventory (SASSI) can be used to detect indications of addiction. One effective treatment method is a Twelve-Step Program coupled with individual, group, and family counseling. It is especially important that counseling involve the family. Behavior modification and social learning theory can be used effectively in a residential program.

Explain reciprocal  
determinism,  
linear causality,  
circular causality and  
relational causality.

**Reciprocal determinism** is Albert Bandura's term for the idea that each person is influenced by his or her environment and at the same time exerts influence on that environment. The idea expresses the dynamic, continuous process of the interaction between an individual and his or her home situation.

**Linear causality** expresses the idea that a particular thing cannot happen unless another particular thing happens first. This idea can also be expressed as "one thing leads to another."

**Circular causality** was called "systems theory" by Ludwig von Bertalanffy and expresses the idea of many forces from different directions acting upon each other at the same time. The situation has no clear cause and the focus is on the process that is taking place.

**Relational causality** is a cause and effect situation in which the effect is caused by the relationship rather than a single factor of the relationship being the cause.

Define the terms:  
mandalas,  
eidetic imagery,  
TAT,  
archetype,  
extinction, and  
chaining.



**Mandalas** - drawings Carl Jung called protective circles representing self-unification that he used to analyze himself and clients.

**Eidetic imagery** - the ability to recall minute details of something a person has observed.

**TAT (Thematic Apperception Test)** - a projective test introduced by Henry Murray, in which a client tells stories about pictures the therapist shows him or her.

**Archetype** - an ideal model of a person, thing, or concept - a stereotype or a defining example.

**Extinction** - the withholding of reinforcement for a behavior as a means of eliminating the behavior.

**Chaining** - behaviors that occur because of a cue from an earlier behavior.

Define the following terms:  
introjection,  
projection,  
displacement,  
sour grapes rationalization,  
and  
sweet lemon rationalization.

**introjection** - the process by which a child adopts the values of another person.

**Projection** - attributing a person's own characteristics to others.

**Displacement** - a defense mechanism in which a person does not display anger at the time of the anger-inducing incident but displays it later and directs it toward a different person.

**Sour grapes rationalization** - a defense mechanism by which people rationalize that they did not really want something they did not get.

**Sweet lemon rationalization** - a defense mechanism by which a person rationalizes a distasteful event into an acceptable one.

Explain  
substance-related disorders  
and personality disorders,  
and their usual treatments.

**Substance-related disorders** include the abuse of alcohol, drugs, and other substances that alter the way a person feels, thinks or behaves. In order for treatment to be successful, the patient must be motivated to end the abuse. The most successful treatment approach involves assistance with withdrawal from the substance, psychotherapy, and biological interventions.

According to the DSM-5, a **personality disorder** is a "long-standing and maladaptive pattern of perceiving and responding to other people and to stressful circumstances." The disorders are grouped into three clusters. Cluster A includes odd and eccentric disorders - paranoid, schizoid, and schizotypal. Cluster B includes dramatic and emotional disorders - antisocial, borderline, histrionic, and narcissistic personality disorders. Cluster C contains anxious and fearful disorders - avoidant, dependent, and obsessive-compulsive. Treatment varies depending on the specific disorder, but some form of psychotherapy is always involved and medication may be used.

Explain the following types of disorders:

eating,

sleeping, and

sexual and gender,

and their usual treatments.

**The primary eating disorders** are bulimia nervosa and anorexia nervosa.

bulimia is characterized by binge eating followed by purging through vomiting or the use of laxatives. People with anorexia have a distorted image of their bodies and see themselves as fat even though their weight is dangerously low. Treatment is usually cognitive-behavioral approaches and may also involve family and personal therapy.

**The two principal sleeping disorders** are dyssomnias and parasomnias. **Dyssomnias** are disorders in which the person cannot fall asleep or main asleep, and includes insomnia, narcolepsy and sleep apnea.

**Parasomnias** include nightmares and sleepwalking. The usual treatment is cognitive-behavioral approaches. Medication is not effective over the long term.

**Sexual dysfunctions** include hypoactive sexual desire, sexual version, painful intercourse, and orgasmic disorders. Gender dysphoria disorder, in which the person feels he or she has the physical body of the wrong gender, is also considered in this category. **Paraphilias** are disorders involving a variety of atypical sexual interests, including fetishism, voyeurism, pedophilia, masochism, sadism, and exhibitionism. psychotherapy appears to be the most effective treatment, although some medications and reconditioning have also been used.

Explain cognitive disorders  
and the usual treatment options.



The cognitive disorders are impairment of such functions as memory, perception, and attention. They usually affect persons at least forty years old and become more common in the over-seventy population. They can be caused by diseases such as Alzheimer's and Parkinson's; brain injury, including damage from stroke; and changes brought on by aging. The disorders include delirium, dementia, and amnesia.

Treatment includes medication and psychosocial interventions for delirium, and the prevention of further damage for conditions resulting from injury. Persons with a cognitive disorder require the assistance of a caregiver and may need institutional care.

Explain schizophrenia and psychotic disorders and developmental disorders, and their usual treatments

Such dysfunctions as delusions, hallucinations, inappropriate emotions, disorganized speech and inappropriate behavior make up the category of mental illness called schizophrenia. Persons with schizophrenia may suffer from disrupted or disturbed thought processes, perceptions, speech, and movement. The types of schizophrenia include schizophreniform, schizoaffective, and delusional. Schizophrenia is usually treated with medication, but psychotherapy may be necessary to help the patient continue to take the medicine and also to help him or her deal with social situations.

Such developmental disorders as mental retardation, attention deficit/hyperactivity, dyslexia and other learning disorders, autism start while the patient is a child or at birth and continue through life. The presence of a developmental disorder may delay or disrupt the development of other skills in the child. Brain functions cause many of the developmental disorders, but the interaction with psychosocial influences creates a complex situation. Treatment varies according to the disorder and may include a combination of medication, education, and training in daily living skills.

Explain what is meant by individual psychology as defined by Adler and Dreikurs.

Alfred Adler and Rudolph Dreikurs advanced the idea that the uniqueness of each person is influenced by social factors. They believed that everyone strives for superiority. A person's lifestyle is made up of and given meaning by such factors as habits, family, work, and attitudes.

Counselors use techniques such as life histories, homework assignments and paradoxical intentions to help clients understand their lifestyles and identify appropriate social and community interests.

Explain the basis of  
Rogerian and Gestalt theories.

**The Rogerian theory** as advanced by Carl Rogers in the 1940s is person centered. It deals with the trustworthiness of individuals and the belief that people have an innate ability to move toward self-actualization, which is the process of becoming. The theory also says that no two people perceive the world in exactly the same way. Counselors using the Rogerian theory focus on the present and the client's feelings and work to promote conditions for change rather than doing things to bring about change. The counselor should have unconditional positive regard for the client and empathic understanding so that he or she can help the client to understand the impact of the client's choices and actions.

Existential principles and a holistic systems viewpoint are aspects of the **Gestalt approach**. So is the idea that the goal of an individual is to become a whole being. In this approach the past is considered less important than what is done, thought or felt in the present. Counselors can use role-playing, dream work, and confrontation to help a client relive experiences and bring closure to them. What happens is interpreted by the client rather than the counselor. The goal is to help the client learn more effective ways of coping and for him or her to assume more responsibility for what happens in his or her life.

Explain phenomenology  
and existential therapy.



Phenomenology is the study of conscious experiences from a first person viewpoint. It is the basis for existential therapy. Existential philosophy emphasizes freedom of choice and responsibility for one's own acts.

Existential therapy is client-centered and emphasizes the ability to make choices not dictated by heredity or past experiences. The goals are for the client to understand who he is and who he is becoming, to make socially constructive choices, and achieve authentic relationships with others.

Leading existential theorists include Rollo May, Victor Frankl, and Irvin Yalom.

Frankl developed "logotherapy," which assists clients to re-appraise what is most meaningful in their lives.

Explain Eric Berne's  
transactional analysis.

Transactional analysis is a method of psychotherapy in which emotional problems are treated by helping clients analyze their relationships in social situations (transactions). The method was developed by Eric Berne in the 1960s. As part of the psychology he identified three ego states: child, adult, and parent, which are analogous to the id, ego, and superego of Freud's theory.

Transactional analysis psychotherapy is oriented to the immediate present and consists of identifying and analyzing the client's style of interaction. Useful techniques include the use of contracts, confrontation, and teaching the clients concepts they can use in their everyday lives.

Describe Rational Emotive  
Behavior Therapy (REBT).

REBT, introduced by Albert Ellis in 1955, is a form of psychotherapy that can help clients change dysfunctional behaviors and emotions by becoming aware of and modifying the beliefs and attitudes that cause the problems. The central idea is that a person's emotional state is caused by the person's beliefs about an event rather than the event alone. According to an article by Ellis on the Albert Ellis Institute Website, "REBT helps restore the emotional balance in an individual's life by providing methods for thinking more realistically and level headedly about ourselves, other people, and the world."

Define cognitive and  
behavioral counseling

**In cognitive and behavioral counseling** it is desirable that there be a strong personal relationship between the counselor and the client. The therapy identifies the origins of the undesirable behavior and uses learning techniques such as problem solving, social modeling, direct training, and reinforcement to change the attitudes, beliefs, and assumptions that cause the client's problems. Cognitive therapists concentrate on learning principles such as perception, reasoning and judgment. Rational-emotive therapy (RET, later REBT) is an attempt to help the client understand his or her irrational thinking and its consequences.

**Behavior therapies include:**

- (1) Exposure therapy in which the client is placed in actual, stressful situations (in vivo) or in imagined situations (in vitro) in an effort to help him create new, non anxiety associations
- (2) Contingency management in which desirable actions are reinforced or rewarded and undesirable behavior is ignored
- (3) Behavioral activation is a psychotherapy often used in treating depression. It focuses on getting clients more active in solving problems And engaging in meaningful and pleasurable activities
- (4) Modeling in which the client observes a desired behavior, sees that it has no negative repercussions, and learns to copy the behavior
- (5) Biofeedback in which the client learns to monitor and control a bodily function. This technique can be very effective in dealing with panic attacks.

Explain Reality Therapy.



Reality Therapy, based on the Choice Theory, is a type of psychotherapy and counseling developed primarily by Dr. William Glasser in the mid-1960s. His view is that people who behave inappropriately need help in acknowledging their behavior as inappropriate and in learning to act in a more appropriate way. Five basic groups of needs are identified: survival, power, love and belonging, freedom, and fun. Everyone must learn to meet his needs in ways that do not create conflict with other persons. The therapy focuses on the present and encourages the client to evaluate his behavior by asking the question "Is what I'm doing getting me closer to what I need?" It also helps the client to create and follow through with workable plans for meeting his needs. Choice and responsibility are emphasized.

Explain Multimodal therapy  
and Integrative counseling.

**The Multimodal Therapy** approach to psychotherapy was founded by Arnold Lazarus. It is a comprehensive, holistic method based on the concept that as biological creatures, humans think, feel, act, sense, imagine, and interact. These functions are called "modalities" and each should be addressed in psychological treatment. Assessment and treatment are built on the framework of **BASIC ID** which is an acronym for: **B**ehavior, **A**ffect, **S**ensation, **I**magery, **C**ognition, **I**nterpersonal, and **D**rugs(including Biology and Nutrition). Counseling techniques are drawn from a variety of theories and tailored to the individual client. They may include anxiety-management training, hypnosis, assertiveness training, modeling, relaxation training, and biofeedback, as well as others.

**Integrative counseling** is an approach that draws from multiple theories and techniques. It deals with the whole person - body and spirit as well as mind and also considers cultural and social influences such as family and work. The treatment is tailored to the individual.

Explain Solution-focused  
Brief Therapy (SFBT).

A post-modern therapy, **Solution-focused Brief Therapy** is a short-term approach that focuses on solutions rather than problems.

Treatment usually lasts six sessions or less. The focus of the counseling is the future, not the past. The counselor leads the client to envision the desired future and helps him or her to discover ways to make that future a reality. The client is helped to recognize what is working now and encouraged to continue or increase those behaviors. What does not work is also identified and the client is encouraged to cease or decrease those behaviors.

**Describe Feminist therapy.**

Feminist therapy grew out of the feminist movement of the 1960s. It is a form of therapy that emphasizes the empowerment of women and the strengthening of such areas as self-esteem, assertiveness, and communications. Feminist therapy recognizes that our sexist society has harmful effects but does not seek to blame males for the problems of women. The counselor may use a variety of techniques including gender-role analysis, assertiveness training, and bibliotherapy.

Describe the Postmodern Approach  
and Narrative Therapy.



Since there is no objective measurement for mental health, **postmodern psychotherapists** accept as fact that it is almost impossible to identify what is "psychologically healthy." A dominant aspect of the therapy is "Deconstruction" in which common expectations or "givens" are examined to determine whether or not they are useful to the client

**Narrative therapy** is based on the premise that people make sense of their lives through stories. The stories are subjective and influenced by the client's environment of family, culture, gender, etc. The therapist listens to the client, and encourages other perspectives and interpretations of the story, which helps the client to view his or her life in alternative and preferred ways. Among the techniques the counselor may use are re-authoring the story to emphasize the client's strengths or positive characteristics and helping the client to separate himself from the problem. Michael White and David Espton developed narrative therapy.

Explain the behavioral techniques of token economy, paradoxical intention, implosive therapy and thought stopping.

**Token economy** is a behavior modification technique that uses points, ratings, etc. to reinforce desirable behavior. Acceptable behavior is rewarded with a token. Tokens can then be exchanged for privileges or items.

**Paradoxical intention** is a therapy technique in which the client intentionally engages in the unwanted behavior in order to increase his or her awareness of it and of the consequences. This method is appropriate for curbing such behaviors as smoking, anger, and flying anxiety.

**Implosive therapy** is a behavior modification technique in which the clients are given clues or shown vivid images in order to induce anxiety. The repeated exposure in a non-threatening environment is expected to reduce or eliminate the anxiety.

**Thought stopping** is consciously stopping thoughts that are bothersome or that lead to impulsive, compulsive, or addictive behavior.

Define consultation and list the models of consultation.

Consultation is voluntary and has the goal of building attitudes and skills that will help the client to function more effectively in interpersonal relationships. Counseling skills are used in consultation, but the role, function and context differ. In content-oriented consultation the consultant imparts information to the client.

**Process-oriented consultation** uses communication theory, attribution, change or motivation theory.

**Bergan's behavioral model** emphasized verbal interaction involving the identification and analysis of the problem plus plan implementation.

**Bandura's social learning model** assesses the interplay of behaviors, cognitions, and environment in identifying problems with solutions involving modeling, rehearsing, and changing cognitions.

**Schein's doctor-patient model** is a diagnostic process and identifies interventions.

**Caplan's mental health model** is a consultation between two professionals in which the discussion may involve the client, the consultant and the client, the program, or the consultant and administration.

**A nine-stage consultation process** was described by Splete.

Give an explanation of Neurolinguistic Programming, Eye Movement Desensitization and Reprocessing, Kinesics, Proxemics, and Paradigm shift.

**Neuro-linguistic programming (NLP)** -a communication theory developed in the 1970s that posits that mind, body and language interact to govern perception and behavior. Its use in therapy is somewhat controversial.

**Eye Movement Desensitization and Reprocessing (EMDR)** - a counseling technique in which eye movements are used to help the client access memories of distressing experiences. This technique can be used in the treatment post-traumatic distress syndrome.

**Kinesics** - a type of non-verbal communication expressed by movement, including gestures and expressions.

**Proxemics** - how people use space and how differences can affect whether a person feels relaxed or nervous. Physical territory is a person's physical environment while personal territory is the space a person maintains between himself and others.

**Paradigm shift** - a change in viewpoint or way of thinking.

From a multi-cultural perspective,  
describe the use of the following theories:  
Psychoanalytical, Reality, and  
Behavioral Therapy.



**Psychoanalytical counseling**, which requires long-term treatment, may not be the best approach for clients who seek short-term, solution oriented counseling, but may appeal to clients from cultures where the focus on family dynamics fits well.

**Reality therapy** identifies problems and suggests solutions within the cultural environment of the client and works with current situations instead of the past. Both these factors make it well suited for use with clients from many different cultures. However, unless the counselor understands the communication patterns, social and economic environment, and political realities of the different cultures, he or she may have difficulties in reaching the "real" issues with some clients.

**Behavioral therapy**, which is short term and downplays the role of feelings, is well suited to use with some multicultural clients. Counselors must assist clients in understanding how to fit their new behaviors and any consequences of the behaviors into their cultural environment

From a multi-cultural perspective,  
describe the use of the following  
theories: Client-Centered, Existential,  
and Gestalt.

**Client-centered theory**, which encourages open dialogue, eliminating cultural barriers, and respect for the values and differences of others, is more effective when used with clients from cultures that do not rely heavily on an authority figure.

**Existential theory** helps clients search for meaning and purpose in their lives. Free will and personal responsibility for one's decisions are key elements. The theory is not the best choice for clients who are not used to having personal choice.

**Gestalt** makes use of a range of techniques from which the counselor can choose the one that is the best fit for each client. Gestalt techniques that focus on nonverbal communications can be useful with clients from cultures that discourage the expression of emotions. It can also be helpful to address current situations rather than dealing with a client's past.

From a multi-cultural perspective,  
describe the use of the following  
therapies: Cognitive-Behavior Therapy  
and Feminist Therapy.

In **cognitive-behavior therapy** the emphasis is on thinking rather than feeling as beliefs and premises are examined, which makes it appropriate for persons from cultures that refrain from displaying emotion. The counselor must respect the client's culture and understand how solutions will harmonize with the client's cultural background and religious beliefs.

**Feminist therapy** is concerned with the empowerment of women and the ways in which they can deal with societal and family issues.

**Feminism** and multiculturalism are two good examples of the increasing attention to the role of the client's environment in problems and coping strategies. Again, it is important for the counselor to be aware of the client's cultural background and any potential consequences of the client's changed behaviors. The counselor must help the client to find an acceptable solution.

Describe the differences  
between family and individual  
counseling theories.

**Individual psychotherapy** deals with the problems of a particular individual and may involve long-standing situations and require long term treatment. Usually the counselor has only the information the client supplies about external influences since there is usually no contact with family members or others that may contribute to the situation.

**Family counseling** places the focus on the family even when only one member is actually the client. The counseling may be extended to the client's social context rather than being restricted to the immediate family. It may involve sessions with individuals, but is intended to resolve family problems. The treatment is likely to be more short-term than individual therapy.

Explain the Psychodynamic  
theory of family counseling.



**Nathan Ackerman** used an interactive style of family therapy that considered the psychological heritage of each family member. He coined the term "homeodynamic principle" to express the concept that each family has a basic dynamic and that following an interruption such as counseling, the family will return to that dynamic even if it is dysfunctional. In a healthy family this results in structure and stability. During counseling Ackerman served as a catalyst to bring out defenses and neutralize imbalances.

According to **James Framo** a person's social environment helps to shape their behavior and each member of a relationship brings any conflicts from his or her birth family to the current relationship. In therapy, Framo starts with the entire family, then moves to couple and couple group therapy and finishes with intergenerational conferences involving the family of origin.

Explain Experiential and  
Humanistic Family Counseling.

**Experiential family therapy** focuses on current experiences of the family and emphasizes experience rather than insight or cognitive knowledge as causes for change. Attention is on emotions and what they represent; the therapist's relationship with the client is important. A leading name in the field is Carl Whitaker.

An important name in **humanistic family counseling** is Virginia Satir. Her view is that the counselor is a teacher and trainer, but that the self-concept of the person allows him or her to grow and develop. Believing that good communication within the family is necessary for the family to function in a healthy manner, she identified five styles of communication. They are placater, blamer, super-reasonable, irrelevant and congruent communicator. Congruent communicator is the healthiest style of communication.

Explain Strategic Family Therapy.

The focus of strategic family therapy is on changing behavior rather than insight. It is a practical approach that deals with family communication, interaction, and behavior patterns. Creative interventions are an important part of the therapy. The therapy relies on strategies to change behavior and achieve goals and focus is on the immediate problem. Strategies can be designed to expose games within the family's interactions and reframe members' motives. The three main models of strategic family therapy are the MRI (Mental Research Institute), Haley and Madanes, and Milan.

**Describe Structural Family Therapy.**

Salvador Minuchin is a leader in the use of structural family therapy. He considers a family to be an organization for which the rules are transactional patterns among the members and with subsystems (Parents, siblings, students, etc.) with boundaries and rules of membership. Boundaries may be permeable or diffuse. Alignments are a way family members work together or against each other, power is who has authority or responsibility, and coalitions are alliances among specific family members. A structural family map diagrams the current family structure with boundaries, alliances, etc. and shows possible dysfunction. The therapy challenges the transaction patterns of the family with the goal of establishing clearer boundaries or better defining subsystem. Minuchin's role during the therapy session is an active one as he portrays aspects of the family and encourages the acting out of dysfunctional interactions. He also presents a constructive viewpoint.

Explain the use of  
behavioral/cognitive therapeutic  
approaches in family therapy.



**Behavioral/cognitive therapy** in family therapy can be divided into four types: behavioral marital therapy, behavioral parent skills training, functional family therapy and conjoint sex therapy.

**1. Behavior marital therapy**, which has not been found to be long-term effective, is an effort to teach couples better communication skills and healthy handling of conflict. Cognitive behavioral marital therapy adds a consideration of how specific thoughts relate to feelings and moods and how moods affect behavior.

**2. Behavioral parent-skills training** is an effort to improve child management by educating both parents and child in the use of such techniques as timeouts and contingency contracts.

**3. To functional family therapy** all behavior is adaptive and serves a function. Therapy involves intervention and prevention using everyday situations. Families discuss attainable goals without assigning blame.

**4. Conjoint sex therapy** is the treatment of sexual dysfunctions through work with both partners in a couple. Some sessions may be with one individual, but others will involve the couple together.

Explain Milan Systemic Family Therapy.

To Milan therapy a family is a system of connections among the members. Acknowledging that the family "plays a game" in order to maintain the system, therapy often consists of family interactions while under observation by a team of therapists. The answers to circular questioning, in which each family member is asked the same relationship questions, reveal the connections among the members and the different ways they interpret an event. The therapist makes use of family patterns and rituals and makes suggestions for ways to alter beliefs and attitudes in an effort to change family rules and relationships.

Discuss Narrative Family Therapy.

Narrative family therapy is a postmodern therapeutic approach that works through the tendency of human beings to create narratives or stories of their life experiences. Families bring these narratives to the counseling sessions where the narratives are deconstructed to reveal their underlying assumptions other interpretations are suggested. The process allows the family to re-author the narrative, which empowers them. The therapist creates the structure for the new narrative. Narrative family therapy is appropriate for the entire family since it fits quite well with the developmental abilities of children.

Explain the beliefs of  
social constructionists.

Social constructionists subscribe to the idea that such widely accepted concepts as nationality, gender, religion, morality and language exist not as natural objects, but have been created by people. To them a social construct is an institutionalized entity or artifact that has been invented or constructed by members of a particular culture or society. Counselors using a social constructionist approach include those who make use of such methods as narrative, collaborative language systems, and solution-focused therapy. Practitioners pay little attention to the history or underlying causes of a problem but focus on solutions. Important names in the field include Steve deShazer and William O'Hanlon.

Explain the role of gender-sensitive issues in family therapy.



Gender-sensitive issues are often feminist issues that affect both the females and the males in a family. They may grow out of the culture, especially in ethnic groups that regard females as being of little value or require that a woman be completely subject to the males in her family. Such issues also come from the long devaluing of the female's economic and political role in the United States. In therapy these issues must be considered in the context of the social, cultural and political environment of the family. The therapist must be aware of these issues as they relate to himself or herself so that he or she does not demonstrate a prejudicial attitude in helping the family move beyond traditional sex roles.

Discuss psychoeducational family  
therapy

Psychoeducation is a therapeutic technique that assists a family in dealing with their daily life and specific issues such as an illness in the family. Life coping skills, medication management, stress and time management and self-care issues can be included. Marriage enrichment and stepfamily issues may also be addressed.

Psychoeducation can be specially helpful for families dealing with the mental illness of a family member, as well as for the patient who needs to understand what is happening, why certain medications are needed, the signs of relapse, etc. The process, in combination with medication, has been used successfully in the treatment of patients with schizophrenia, bipolar disorder, ADHA, and depression.

Define the following family therapy terms: alignment, boundary, closed system, open system, coalitions, conjoint, cybernetics and enmeshment.

**Alignment** - the alliances, either short or long term, formed among family members as they move toward homeostasis.

**Boundary** - a limit or border. In family therapy the term refers to membership in the subsystems (parents, siblings, students, etc.) within the family & can be summed up as "who does what with whom."

**Closed system** - a system that is self-contained, has impermeable boundaries & does not interact with other systems.

**Open system** - a system with permeable boundaries that allow interaction with other systems.

**Coalitions** - alliances, either short or long term, among family members against other family members.

**Conjoint** - therapy in which counselor works with two or more family members together.

**Cybernetics** - is the study of the flow of information through feedback loops.

**Enmeshment** - a family organization pattern in which family members are over-concerned & over-involved in each other's lives, thereby limiting each member's autonomy.

Define the following terms:  
free association, transference,  
counter transference, catharsis,  
preconscious mind, repression,  
reaction formation and sublimation.

**Free association** - a therapy strategy in which the client responds with whatever comes to mind to clues given by the therapist.

**Transference** - the projection of a client's feelings for another onto the counselor.

**Counter transference** - the projection of the therapist's feelings onto the client.

**Catharsis** - the purging of emotions.

**Preconscious mind** - the portion of awareness that includes information of which a person is aware but to which he is not currently paying attention.

**Repression** - the involuntary forgetting of an incident in order to protect oneself from anxiety.

**Reaction formation** - a defense mechanism in which a person acts in the opposite manner from an impulse he or she cannot accept.

**Sublimation** - a defense mechanism in which a person uses a socially acceptable behavior to act out an unconscious impulse.

Define the following family therapy terms: sculpting, homeostasis, identified patient, joining, nuclear family, strategic, structural, and triangulation.



**Sculpting** - creates a picture or representation of family relationships. The representation is often made by the family members' physical placement of each other.

**Homeostasis** - a dynamic state of equilibrium - a balanced system. Identified patient (IP) - the member of a family who is the primary focus of treatment.

**Joining** - the strategy of the therapist entering a family system in order to explore and modify dysfunctions.

**Nuclear family** - the basic family unit of father, mother, and child(ren) living together in one household.

**Strategic** - a therapeutic method in which the therapist devises strategies and interventions to resolve the problem.

**Structural** - a therapeutic method of realigning the family in order to change dysfunctional interactions.

**Triangulation** - when two members of a family have a problem with each other, one or both may turn to a third person.

Define the terms: Behavioral rehearsal, fixed role therapy, sensate focus, implosive therapy and flooding therapy.

**Behavioral rehearsal** - a role-playing strategy in which a client acts out a behavior he wants to change or acquire. Can be quite useful in assertiveness training.

**Fixed role therapy** - a treatment method created by George Kelly in which the client is instructed to read a script at least three times a day, then act, speak and think like the script's character.

**Sensate focus** - a series of exercises for a couple in which they take turns paying attention to their own senses.

**Implosive therapy** - a method for decreasing anxiety by exposing the client to an imaginary anxiety stimulus. The method is risky because overexposure can actually increase anxiety.

**Flooding therapy** - the exposure of the client to the actual anxiety stimulus in conjunction with response prevention. Care is necessary to ensure that overexposure does not increase anxiety.

Give the counseling techniques associated with the following therapy styles: psychoanalysis, Adlerian, Person-centered, Existential and Gestalt.

**Psychoanalysis** - exploration of the unconscious through such techniques as free association, and the analysis and interpretation of dreams.

**Adlerian** - the counselor exhibits empathy and support - techniques include modeling and education with homework and goal-setting assignments.

**Person-centered** - counselor exhibits acceptance and empathy techniques include open-ended questions and active/passive listening.

**Existential** - emphasis is on free will and personal responsibility for choices - techniques include the use of literature, modeling, and sharing of experiences - anxiety is used as a motivator.

**Gestalt** - counselor exhibits authenticity - techniques include verbal and non-verbal messages, role-playing, fantasy, psychodrama and other exercises developing from the interaction between the counselor and client.

Define the terms:  
stress inoculation, racket,  
"collecting trading stamps,"  
retroreflection, attending, and  
the three types of empathy.

**Stress inoculation** - an effective technique for dealing with stress developed by Donald Meichenbaum as part of his "Self-instructional therapy." It has three phases: educational, in which the problem is identified and the client is given information about what to expect, rehearsal, in which the client practices the stressful event or behavior while using relaxation techniques, and implementation, in which the client uses the new skills to deal with the stressful situation.

**Racket** - in Transactional Analysis a set of behaviors that originate from childhood script.

**Collecting trading stamps** - in Transactional Analysis, the saving up of enduring, non-genuine feelings, then "trading" them for a script milestone such as a drinking binge or an anger outburst.

**Retroflection** - doing to oneself what one would like to do to someone else

**Attending** - the attention the counselor pays to the client during a session, includes listening to the client and both verbal and nonverbal interaction.

In **task-facilitative attending** behavior the counselor's attention is on the client. In **distractive attending** behavior the counselor's attention is on his or her own concerns.

**Empathy** - the ability to recognize, perceive, and understand the notions of another.

Give the counseling techniques associated with the following therapy styles: Rational Emotive Behavior Therapy, Transactional Analysis, Behavioral (and Cognitive Behavioral), and Reality Therapy.



**Rational Emotive Behavior Therapy** - sessions involve teaching and confrontation - techniques include homework assignments and bibliotherapy.

**Transactional Analysis** counselor acts as teacher - techniques include contracts for change, interrogation, confrontation, and illustration.

**Behavioral (& Cognitive Behavioral) Therapy** - counselor is the expert, teaching and directing - techniques include positive and negative reinforcement, environment planning, desensitization, implosion, flooding, and stress inoculation.

**Reality Therapy** - after establishing a relationship with the client, the counselor acts as teacher and model - techniques promote responsibility, working in the present, and stress freedom without blame .

Define altruism and  
non-altruistic motivation.

**Altruism** is defined by the American Heritage Dictionary as the "unselfish concern for the welfare of others". Two schools of thought exist as to why people help one another. Some social scientists believe that no act is 100% altruistic and that the individual acts only because of some benefit to herself. This is known as egoistic motivation. Other social scientists feel that individuals act altruistically for a variety of reasons. Cooperation is a good example of behavior that helps both people involved.

**The negative state relief theory** of helping was developed by Robert Cialdini. This type of motivation occurs when individuals feel sad when they see a homeless man. In order to get rid of the sad feelings the individuals give money or food to the homeless man.

Another theory of **egoistic motivation** was developed by Jane Bilavich and is known as arousal-reduction. For example getting a stomach ache when seeing war orphans on TV but when the individual sends money to the orphans the stomach ache goes away.

A third type of **nonaltruistic helping** is when the individual behaves in such a way as to gain popularity.

**Explain the motives for affiliation.**

Individuals tend to form groups in order to stay safe and gain resources. There are many reasons that an individual chooses one group to be a member of over another.

**Primarily** people join a specific group in order not to be seen as an outcast or social rebel.

**Another reason** to join a group is that the member enjoys doing the same things bowling or quilting for example.

**A third reason** for group affiliation might be for professional gains.

Affiliation can be good for society because it can bring people together to form strong alliances but it can be bad for society as well because the purpose of many groups is simply to keep certain people out.

Hierarchical divisions within groups can also be positive, for example when older members work to teach the younger members, or harmful, for example when senior fraternity member punish freshmen pledges.

Explain the theories of attraction.

People often wonder why they are attracted to certain types of individuals. Most theories that deal with attraction emphasize reinforcement as the most important reason people form relationships.

Donn Byrne and Gerald Clove developed the **reinforcement-affect model of attraction**. This theory states that people are attracted to others because the other people reward them in some way or are affiliated with rewards in the individual's mind. For example a child may like the dentist because her mother buys her a movie after each visit to the dentist not because the dentist is nice.

**The social exchange theory** is another model of attraction. This model has the individual weighing the benefits of joining a group versus the negative views of society to that group. Following on social exchange theory is equity theory.

**The equity theory** looks at how both people in a relationship weigh the positives and negatives of being in that relationship.

Explain empathy and altruism.



One point of view of altruistic behavior is that it is done on the basis of empathy. If an individual acts on another person's behalf simply for unselfish reasons then this behavior is known as **empathy-altruism**.

Another point of view of altruistic behavior is known as **prosocial motivations**. According to this theory good behavior towards other people can be increased by giving rewards or by tying the people together with common goals.

Another type of prosocial behavior, known as the **bystander effect**, happens more often if fewer people are present. This may be because the pressure felt by each individual is higher the fewer people are around. This motivation to help people in an emergency appears to be inborn as opposed to helping out a stranger in a non-emergency which is socialized behavior.

Define "self according to the psychoanalytic and psychodynamic theories.

There are several theories that try to define the concept of self.

**Sigmund Freud** did not believe in a singular “self” but instead focused on a three part definition known as the "ego, id and superego".

**Carl Jung** defined “self” as a kind of archetype which is inborn with specific potential that is molded by experience.

**Karen Horney** also stated that “self” was inborn but went on to say that everyone is born with a mentally healthy "self" but through anxious experience some people try to become a different "self".

**Margaret Mahler** believed that the “self” does not arise until a child is approximately three years old and has learned to distinguish herself from other people. However, **Hany Stack Sullivan** believed that the "self" can never be viewed out of context from outside relationships.

**Heinz Kohut** defined the healthy “self” as resulting from positive childhood relationships.

Explain the mother-child bond.

The ethological theory of mother-child attachment was developed by John Bowlby. This theory states that babies are born with the ability to form attachments by exhibiting certain behaviors. There are two basic types of mother-child attachment.

**Secure attachments** are formed by a gentle mother who disciplines with kindness and responds to a child's needs quickly. Babies with secure attachments are not overly fretful when left with a stranger and are happy to see their mother when she returns. Children with secure attachments are happier, have a high level of self confidence and perform better at school than children with insecure attachments.

**Insecure attachment** can be broken into two categories.

In **avoidant attachment** a baby does not respond when mother returns after an absence.

In **resistant attachment** babies are very upset to be left by mother but

Explain the “self” as  
defined by the humanistic  
and Existential theories.

The “self” is not as important to humanistic and existential theories as it is in other theories.

"Proprium" was used to define the idea of "self" by **Gordon Allport**. He believed that as a person ages they form a structure of personality.

**Carl Rogers** shunned the notion of "self" as being too simplistic to explain what a human being is. Instead he used the idea of a self-image to represent the entire person's beliefs about themselves.

**Abraham Maslow** defined the idea of the “self” to be apart of an individual's desire for "self-actualization."

The concept of being related to the environment that surrounds us as "self" was developed by **Rollo May**.

Define “self” according  
to the developmental theories.



Developmental theorists focus on the cognitive development of the self.

**Erik Erikson** explained that the ego must go through a number of crises in order to be completely formed. He listed a number of ego developmental stages starting in childhood, autonomy versus shame and doubt for example and continuing until made solid in adulthood. His theory of adolescent identity crises has led to much information about self-esteem.

Building on Erikson's work, James Marcia felt that only those adolescents that worked through a period of identity crises would become healthy well rounded adults. If they do not have this chance to learn who they are they will become confused and will not have a good sense of “self.”

**Define self-disclosure.**

Self-disclosure occurs when an individual relates information of a personal nature to another individual. The closer two people are to one another the more likely they will engage in self-disclosure. Clients in the counseling practice should be encouraged to self-disclose and be made to feel comfortable and safe when doing so. One of the counselor's main tasks is to get the client to "open up" and talk about deeper problems and issues. On the other hand self-disclosure on the part of the counselor must be used with great discretion. Before telling a client information of a personal nature the counselor must be sure he has the client's best interest in mind and that the revelations of such information will not harm the client in any way.

Define the “self” according to Albert Bandura

Albert Bandura felt that the "self" was part of a three part model made up of individual (self), behavior, and environment. The individual takes some control over the behavior which is heavily influenced by the environment. The individual is able to exert this control using self observation, judgmental processes and self-reaction:

**Self-observation** occurs when the "self" actively looks at what the individual is doing.

The next step, **judgmental process**, decides if the behavior occurring is good, bad or neutral.

Finally the **self-reaction** step is made up of individual rewards or punishments for behavior.

Some theorists have divided self observation from self-consciousness by defining self-observation as looking at one's own thoughts and behaviors and defining self consciousness as the amount of time a person engages in self observation.

Define emotion.

Emotions can be defined by the following five factors:

1. they are encounters not something that is done or thought
2. they have "valence", they are not neutral but always positive or negative
3. a person must think about their current situation in order to feel emotion
4. they involve bodily responses such as frowning or breathing heavily
5. they can become stronger or weaker.

Robert Plutchik lists the following eight inborn basic emotions: "joy, anticipation, anger, disgust, sadness, surprise, fear and acceptance". These basic emotions may combine to form more complex emotions. However, most research into emotion focuses only on the basic eight because each person can combine them into a vast variety of complex emotions. For research purposes emotions are divided into "state", what is currently occurring and "trait", the frequency of a particular emotion.

Define transference and  
counter-transference.



In counseling transference can be positive for the client.

**Transference** occurs when the client attributes negative behaviors to the counselor and reacts to the counselor as if she were the person who inflicted the pain upon them. As the counseling relationship continues, the client should work through these feelings towards the counselor in order to manage the feelings to the true object of the emotions.

**Counter transference** is the negative feeling a counselor may feel when confronted with the client's transference. The counselor should recognize these feelings and deal with them in an appropriate manner, never allowing the client to see the negative feelings.

Define intimacy.

Intimacy is usually defined as a special relationship between two people. In order to experience intimacy a person must reveal important information about themselves and be understanding when listening to important information the other person in the relationship. Nonverbal communication such as kissing or crying with one another often makes a couple more intimate. In order for intimacy to be healthy a person must first have a strong sense of self. This is necessary as in order to gain intimacy a person must give their deepest secrets to another with all its inherent risks. The two main barriers to achieving intimacy are being afraid of self-disclosure and being unwilling to give the time necessary for forming strong intimate bonds.

Explain facial feedback.

Several theories exist about the role of facial features in society. **Charles Darwin** first hypothesized about the universality of facial features in the 1870's which was accredited by research 100 years later. All theories on facial feedback agree to the following three things:

1. if a person feels one way but expresses the opposite feeling then the first feeling will decrease
2. if a person expresses a facial feature they will begin to feel like that emotion
3. the muscles used to form a particular emotion signal the brain about how it should feel. These ideas have been supported by numerous research studies even though they are not necessarily intuitive. This research has led to the development of biofeedback mechanisms, which can be used in counseling to help a client cope better.

List the qualities of  
good communication.

The following is a list of behaviors which are the trademarks of a counselor with good communication skills:

- 1) polite
- 2) always on time
- 3) speaks personally to the client
- 4) uses everyday language
- 5) listens well
- 6) thinks before speaking
- 7) careful to explain what is occurring and why
- 8) keeps promises
- 9) honest
- 10) patient with clients
- 11) makes no assumptions based on outward appearance alone
- 12) chooses the place of communication carefully
- 13) asks for feedback
- 14) uses closed ended questions when necessary
- 15) uses what works best for the client
- 16) works to build a good counseling relationship
- 17) remembers the client's English abilities.

Explain the importance  
of feedback and evaluation



Two important parts of communication are feedback and evaluation, each of which can be done formally or informally. These types of communication are especially important in teacher-student and supervisor-trainee relationships.

**Feedback** is non-judgmental allowing the individual receiving it to heighten their level of self-awareness.

**Evaluation** is judgmental and follows a list of behaviors that the individual receiving it should be doing to a specific level of competence.

**Formal feedback** is given in writing, notes in the margin of a writing assignment suggesting changes for example.

**Informal feedback** takes the form of spoken observations without letting the individual know if the behavior was good or bad.

**Formal types of evaluation** are test scores and grades.

**Informal evaluation** is spoken praise or disapproval.

Explain good communication.

Excellent communication requires active listening, appropriate choice of time and place, and adequate self-expression.

**Active listening** involves watching for non-verbal communication and observing underlying meaning.

**Choice of time and place** used to communicate will vary from client to client. Children tend to communicate better during play rather than when being expected to sit still. Adult clients typically demand a high level of privacy and calm surroundings in order to be open to communication. It is the job of the counselor to assess each client as to the good timing of communication.

**Adequate self-expression** is about more than just word choice. The counselor should be careful with their tone of voice, facial expressions and body language.

Describe family communication and list the factors on the Family Communication Environment Instrument.

Family communication may be difficult to understand by an outsider as it is based on a design created by the family to help them interact with one another and understand the world outside the family structure. Individual mental health depends upon the family working and living well together, which in turn depends upon honest communication. The more willing family members are to engage in communication the stronger the family unit becomes. The Family Communication Environment Instrument describes three factors that are a part of family communication.

**Expressiveness** is the first factor and is defined as a willingness to hear the views and emotions of all family members.

The second factor, which is defined by a husband and wife filling traditional roles while children are expected to comply with family strictures, is known as **structural traditionalism**.

The third factor, **avoidance**, is used by families to stay away from distasteful subjects and maintain assimilation.

Explain the steps to  
successful conflict resolution.

There are six steps which can lead to successful conflict resolution.

1. Never try to resolve a problem when angry. Count to 100 or make an appointment to get back the issue.
2. Be sure that all parties involved understand exactly what the conflict is about
3. Decide what is really important to you that you won't compromise on and things that you are willing to give on.
4. Bring several options into the conversation. There is almost never one right way to solve a problem so be inventive.
5. When you have tried the previous four steps and are still unable to resolve a conflict ask for a mediator to help bring the parties together.
6. If everything has been tried and does not work ask a disinterested individual to create a binding solution.

Describe the five contextual factors of Interpersonal communication.



There are five contextual factors that affect interpersonal communication. The first context is psychological. This factor includes

1. The "who" of the individuals involved in a conversation. Whether or not one person has had enough sleep or is depressed or is an optimist are just a few examples that impact the psychological factor.
2. The second context is relational. This factor concerns the attitude of the individuals toward one-another. For example, is one person the student of the teacher?
3. The third factor involves the psychosocial "where" of the conversation and is known as situational. A boss speaking to an employee in the office has a different situational context than the same two people talking at the beach.
4. The fourth factor, environmental, explains the physical "where" of the communication. These contexts elude time and temperature.
5. Finally the fifth factor involves cultural contexts which are behaviors learned in society.

Explain the four principle truths in interpersonal communication.

There are four principle truths in interpersonal communication.

1. First, it is impossible to be completely uncommunicative.
2. It is important for counselors to remember that even if an individual refuses to engage in active communication they are communicating something through the refusal.
3. Once communication has been received it can not be rescinded by the communicator.
4. Remember to think before speaking.

Also, communicating with other people is highly complex. Because a person can never truly know another person's thoughts all communication is filtered through personal interpretations. This is especially important to remember when working with multicultural clients.

Finally there are a number of contexts that guide communication. These contexts include the relationship between the individuals communicating and where the communication is occurring.

Explain the interactional  
view of communication.

The interactional view of family communications assumes that change can only occur with help from a counselor. This theory has five axioms.

1. The first axiom, "one cannot not communicate," means that even silence sends a message.
2. The second axiom, "human beings communicate both digitally and analogically," means that people use both symbols (analog) and words (digital) to send information.
3. Axiom three states, "communication = content + relationship". Content is what a person means to say while relationship is how the person says it.
4. The fourth axiom says, "The nature of the relationship depends on how both parties punctuate the communication sequence." This axiom refers to how an individual expresses feelings from one interaction to the next
5. Axiom five states, "All communication is either symmetrical or complementary." Symmetrical communication occurs when both people have equal power. Complementary communication occurs when one person has more power than the other.

Explain the constructivist theory of communication.

The constructivist theory of communication developed by Jesse Delia alleges that individuals who think better communicate and understand better.

Counselors who ascribe to this theory of communication use the role category questionnaire to try and see how the internal process of communication working for each individual. Individuals may use one of three types of communication according to their abilities.

1. The simplest form of interpersonal communication according to the constructivist theory is expressive design logic and includes little to no thought on the part of the speaker.
2. The conventional design logic includes some forethought by the speaker but the information is presented only from the speaker's point of view.
3. The most complex form of interpersonal communication is rhetorical design logic. This type of communication requires considered forethought by the speaker and works to express both the speaker's and the listener's point of view.

Explain the component model of communication.



The component model is used to explain communication competence and is defined by three factors.

1. Factor one is knowledge, which is the ability to determine which types of communication are appropriate in a given situation. This factor is learned from cultural and societal experience.
2. Factor two is skill. Skills are learned aptitudes. For example, all people can speak but taking a class on elocution will dramatically improve a person's ability to speak in public.
3. The last factor is motivation. A person must want to communicate clearly and openly in order to do so.

Good communication is not automatic. However, some forms of communication will work for some relationships and not for others, which does not imply dysfunction on either group.

Describe marital  
communication according to  
Mary Ann Fitzpatrick.

Mary Ann Fitzpatrick based her theory of marital communication on three different types of couple relationships.

1. Couples who are "traditionalists" have probably the strongest relationships as they rely on one another for friendship, advice and stability but are also self assured as individuals.
2. Marriages that are defined as "independent" often revolve around the need for power. Independent couples typically go outside of the marriage for friends, are argumentative and may even have separate bedrooms.
3. Finally couples who live together as "separates" have many short-lasting arguments, go outside of the marriage for advice and find it difficult to express feelings with one another.

A couple may move back and forth through the stages depending on the stability of their relationship and the underlying personality of each individual.

Explain the fundamental interpersonal relationship orientation theory of communication.

The fundamental interpersonal relationship orientation (FIRO) theory was devised by W. C. Schutz as an explanation for why people enter into relationships. The foundation of FIRO is that all people have three basic interpersonal needs: inclusion, control and affection.

1. The need for inclusion relates to a person's desire to fit in or be a part of the "in" crowd. Inclusion may also be expressed as a wish for other people to be included and not feel lonely.
2. The need for control relates to a person's desire to be the boss or leader of a relationship. On the other side of control are people who try to place others in a possession of power over themselves.
3. Finally is the need for affection which relates to a person's desire to feel love or to give love to other people.

The amount and direction of each person's need in regard to the three factors of FIRO stems from childhood experience and is set for life.

Explain Mark Knapp's  
model of relationship development.

Mark Knapp proposed the relationship development model to try and explain how relationships evolve over time. There are two processes and a number of stages within this model.

The **first process "coming together"** outlines the stages involved with relationship formation.

These stages are as follows:

- 1) initiating, first contact
- 2) experimenting, getting to know one another
- 3) intensifying, taking the relationship beyond simple friendship
- 4) integrating, having mutual feelings
- 5) bonding, becoming as one.

The **second process "coming apart"** outlines the stages involved with the dissolution of the relationship. These stages are as follows:

- 1) differentiating, beginning to notice individual differences
- 2) circumscribing, talking around the real issue
- 3) stagnating, lack of communication
- 4) avoiding, trying not to be around one another
- 5) terminating, end of the relationship.

**Define relational dialectics.**



An interpersonal communication model that looks at how close the relationship becomes is the relational dialectics theory. This theory specifically states that closer relationships are harder to maintain than casual relationships. Couples face stress within the relationship and from outside forces as well.

The first stress felt by all couples is "integration versus separation." This stress refers to the amount of time the individual wants to spend as a couple (integration) and alone (separation).

The second form of stress is "stability versus change". To look for new things (change) is a part of human nature but the couple must also have a strong sense of their relationship (stability) in order to survive.

"Expression versus nonexpression" is the final stress factor in relational dialectics. The amount an individual shares (expression) their emotion, thoughts and activities will change depending on the situation. Some people are simply more introverted (nonexpression) than others.

It is important that for each stress factor the two opposites balance each other and that the individuals be in close agreement with one another in their preferences.

List the principle elements  
of problems with communication.

A verbal message is rarely, if ever, sent free of non-verbal elements that can cloud or change it to some degree. This affects the receiver's understanding of what the sender intended to say.

- A message is rarely received in its entirety or exactly as the sender intended.
- Once a message is heard, it cannot be erased from a person's memory.
- This creates a situation where previous message interpretations affect subsequent message interpretations.
- All messages sent are part of a particular situation.
- In order to be truly understood, the person sending the message needs to remain aware of how the receiver is likely to interpret the message based on their situation or personality.
- All messages send information about how the sender feels about the receiver, even if it is unintentional. Emotional responses to this information can affect subsequent message translations.
- Differences in word definitions can cause messages to be mistranslated by receivers.

Discuss the principle elements  
of communication

Communication is received by all five senses, with sight and sound being the primary interpreters. Once a message is received, it has to be handled to gain meaning from the message. Several elements are involved here.

- The person has to take the information and decode it. then, previously learned information may be linked with the new information depending on relevance.
- Next, the receiver has to decide what they think about the message and how it relates to them or their situation.
- Most times a message is broken into pieces by the receiver with some parts retained, some discarded, and the rest reorganized into the arrangement they are familiar with.
- The end result is the generation of a return message that can be verbal, non-verbal, or both.

Of course, most of this process cannot happen unless both people are communicating in the same language.

Discuss the principle elements of creating a message or communication.

After someone receives a message and is ready to create a return message, they have to deal with all the emotional and mental obstacles present in themselves. Most people will not consider sending a message that could risk lowering their own self-esteem or causing them the pain of rejection.

Two types of message blocking can occur.

1. Resistance happens when someone is aware of blocking certain possible responses due to the mental and/or emotional obstacles present. Some resistance happens when the topic of the message is one that is not acceptable to discuss in either the social or cultural group the person is a part of. In this case, the person can choose whether or not to continue blocking the return message. The decision mainly depends on the situation and the environment the person is in at that specific time.
2. Repression happens when the person is unaware of the blocking process.

Discuss the principle  
elements of meta communication.



Meta-communications are the non-verbal and tonal clues that are sent as part of a message. This helps the receiver decide how to translate the verbal words of the message.

Facial and hand movements give clues to the receiver that help them understand how seriously the message is meant. The sender frowning or smiling is a good example of this, as is whether the hands are kept still or gestures are made. How the words in the message are spoken is also important. The sender needs to be aware that how loudly the words are spoken varies the translation of the message by the receiver as does the tone of voice that is used. Also, any pauses before certain words can lend further importance to the meanings of those words in the message.

The body language the sender uses when sending the message affects translation by the receiver positively and negatively as well. The sender standing over the client, standing very closely to him/her, remaining seated, or walking around the room while talking affects the receiver in ways that will change the translation of the message.

Discuss the principle elements of sending a communication.

In order for a message to be received, it should be sent in such a way that the minimum amount of content will be lost by the receiver.

Noise and distraction are the most common problems in having a message received clearly. Therefore, if at all possible, choosing a time and place that is relatively quiet and calm to use when communicating is best.

Any problem using the spoken language creates another problem with sending a clear message. Having a voice or speech difficulty makes transmitting messages accurately that much more difficult and must be taken into account by both the sender and receiver.

Conflicting feelings about a message can also create translation difficulties on the part of the receiver. Sometimes a message is sent that is saying one thing verbally and something entirely different non verbally. If possible, the senders should try to be aware of their own feelings and control the meta-communication accordingly.

Discuss the elements a counselor should be aware of when a client is translating a message the counselor has communicated to them.

Counselors' job is starting communication with their clients. The counselors have to ask themselves ahead of time where they would like the communication to go and the answer to that will determine the verbal part of the initial message sent to their clients. Care has to be taken by the counselors to ensure that the meta-communication that accompanies the verbal message is consistent with the desired end result of the communication. The counselors are trying to create a trusting and accepting environment for their clients and so using a loud voice (unless the clients are hearing impaired) or standing over the clients while speaking to them are not good practice.

A large vocabulary of words is also a necessity for counselors. That way there will be enough words whose meaning is understood by the clients for the counselors to use to make the message understandable.

Discuss the elements a counselor should be aware of when a client is encoding a message for communication to the counselor

The client has to feel that the session with the counselor is a safe environment. This facilitates the client allowing them to send or receive messages more fully that may feel frightening.

The counselor also needs to pay close attention to the verbal and non-verbal responses the client sends. This will indicate how much of any uncomfortable messages the client is allowing to be translated.

Many times, the client will tailor a message sent to ensure that the counselor will give them some society provided resource that the client wants or needs.

The counselor has to interpret messages keeping this in mind. A client may also frequently wish to use messages to defend their own actions and feelings.

Evaluating the client's meta-communication will help the counselor decide if any of these things are taking place.

Finally, the counselor must convince the client that the counselor can help.

Otherwise, the clients have no reason to risk sharing information that is sensitive or damaging to their own self-image.

Discuss what the counselor should be aware of regarding potential barriers to effective communication with a client.



To optimally receive a message, the client needs to be able to both hear and see the counselor clearly. This means that any background noise in the environment should be taken into account by the counselor and any adjustments to the meeting time or space should be considered if a problem is anticipated. The counselor must also take into account any physical impairment that may cause the client to have difficulty in either of these two areas. The client also needs to be able to, and interested enough to, concentrate on the counselor while receiving a message. The client then has to be able to deal with the message he/she has received and decide how it relates to them before they can adequately respond to what they think they heard. Evaluation of whether the communication was successful, based on the response sent back by the client, will dictate whether the counselor needs to try to resend the message in a different way.

Discuss how the counselor should deal with the use of specialized words in communication with a client.

The receiver of any message needs to be able to pay attention. If attention wanders, many parts of a message may be ignored or misinterpreted. Exploring the reason for a lack of attention can open up new topics for communication with a client

Both the counselor and client need to send messages that are as clear as possible. If either cannot understand the other, a restatement of the message with different vocabulary may be needed. The counselor also has to learn to handle issues that arise when the common language both the client and the counselor speak is not the primary language for one of them. Even when both speak the same language, usage can be different based on cultural or social norms not shared by both.

Both need to be aware of the reason for the session. Otherwise, they will be talking at cross-purposes.

Some clients have a hard time talking about uncomfortable subjects. The counselor needs to be confident enough to sensitively open these subjects.

Discuss how the use of specialized words can affect communication.

The counselor has to be aware of how a client is likely to translate the words in a message due to their personality or social situation and choose their words accordingly. Certain words convey very different meanings depending on gender, social status, and education and the counselor needs to keep this in mind when conducting a session.

The counselor cannot overlook the fact that they have a variety of words specific to their profession that can be used in conversation with a client. Extreme care must be taken in choosing which specialized words to use in this situation since a client receiving a message with such words will almost always misunderstand the ones they recognize and completely ignore the ones they have never heard before, thus distorting the message as it is being translated. The counselor should always ask for feedback to make sure the client receives the message the counselor intended.

Discuss how a counselor works with a client's choice of words to encourage ownership and specificity in their communication about problems.

First of all, no word in any language means the same thing to two different people. This is due to the fact that everyone uses personal experiences and social context to help assign meanings to the words they hear. Social status, ethnic background, and gender also make the meanings of certain words and phrases more imprecise between different people.

The use of specialized language of any type causes lack of understanding. Anyone working in a specialized field of knowledge needs to remain aware that another person is highly unlikely to have the same definitions and connotations for words used as they relate to a particular profession. In fact, the other person may never have even heard the words before and will tend to ignore them during translation of the message.

Discuss how a choice of words  
can show ownership and  
specificity in communication.



The words that are chosen, often subconsciously, by a person sending a message can show whether or not ownership of that problem is being taken on by that person. A good indication of this is when the words chosen are generalized enough to be non-specific to the person saying them. The sender of the message uses words to keep the problem distant enough that the person does not have to do anything about the problem.

Some people also find it very hard to talk about problems in a specific and clear way. This can be due to the fact that they are uncomfortable either admitting the problem itself or admitting that they really do not feel up to dealing with the problem. The receiver then has the difficult task of getting the information they need to translate the message accurately even when the use of the language is understood.

Discuss how the counselor  
uses feedback in  
communication with a client.

Feedback is the important final step in the communication process. With all the problems inherent in communication with other people, the receiver of the message should let the sender know what was actually heard.

Feedback is always given in the form of non-verbal responses. These responses are extremely useful for the perceptive person as a guide as to whether or not the message made it through the obstacles all people have in place.

Verbal feedback is usually in the form of continued conversation. Sometimes this can indicate whether or not there is something in the message that is unclear to the receiver. The sender can also specifically ask for a restatement of what was heard if the receiver does not offer feedback unsolicited.

Restatements are probably the most reliable indicators of successful communications.

Discuss the principle of  
feedback in communication

The counselor needs to assume that any message that he/she sent or received was heard wrongly. Feedback is the tool that he/she uses to check for correct understanding.

First, after sending a message, the counselor needs to prompt the client to give the counselor enough feedback that the counselor becomes satisfied that the message was understood.

Second, the counselor needs to send feedback to the client after receiving a message to make sure the counselor did not misunderstand the client.

Last, the counselor needs to listen to the messages they send and evaluate for themselves how clear the message sounds and whether or not any additional messages need to be sent to ensure overall understanding.

Feedback can be verbal, such as using a restatement or asking a question based on the original message. More often it involves non-verbal responses that need to be interpreted in and of themselves, such as a head nod or a frown.

Discuss the benefits of a counselor using action-based communication with a client.

The counselor can use action based communication with children who are too young to have a large vocabulary. It can also be used with anyone who just cannot, for whatever reason, speak to the counselor in a clear way. With these types of clients, the counselor should evaluate what type of action will produce the best type of communication results.

Some clients need the stimulation of creating physical objects to symbolize how they are feeling. Other can pick out pictures or graphics from a selection to indicate what they need to communicate to the counselor. Some people simply need a common social activity, such as eating a meal together, to make them comfortable enough to share more openly.

Action based communication is especially valuable when working with children. The counselor can learn a lot about children's feelings and opinions by playing with them. This is the way the child is most comfortable sharing information about how they see and feel about their world.

Discuss the principle uses of action-based communication.



Action is an important part of communication with others. Many times, action used along with speech creates a sort of white noise that feels safer for people who are uncomfortable being the absolute center of attention. As a result, these people can share more readily over an activity than merely sitting and talking.

Visuals create good substitutes for words as well. Creating artwork or physical objects, using pictures or graphics as examples, allow some people greater ability to show their feelings and opinions about subject they cannot talk about.

Verbal communication is extremely important in our society. Using action-based communication can sometimes allow the client to open up and share more verbally if they are physically capable of it. For those who are incapable, action gives them a chance to make themselves understood in a way that may never have been possible before.

Discuss how the counselor  
should handle group  
communication.

The counselor is in charge of creating a system of rules that will allow the group to communicate effectively.

Every member of the group should be given the chance to speak for themselves to the group and the counselor.

Each individual should then have the chance to receive the resultant feedback with as little noise distortion as possible.

All members should be allowed to speak about sensitive issues with no fear of gossip and with no lack of acceptance on the part of the group.

The group members need to be shown that they are expected to interact with each other in an orderly, calm, and empathic fashion in order to allow each member to gain as much benefit from the group session as possible.

In the long run, the counselor should be able to be present as a facilitator and not as the autocrat of the group.

Discuss the principle elements  
of communication in groups.

The larger the group, the more potential problems there are with communication. Messages are continually being sent and some messages may be sent to a person who chooses, either intentionally or through inattention, not to reply. Someone else in the group may choose to respond to a message not meant for them. Any messages sent to all the group members are likely to only be heard by a portion of the group, and that portion will interpret the message in varying ways. Multiple messages can be simultaneously, decreasing clarity for the receivers. Feedback given in any of these situations is not as clear, direct, or timely as it should be for optimal communication.

The members of any group bring different experiences and social situations to the group. This intensifies the potential miscommunications that occur since all messages sent are interpreted based on these experiences. The group needs to be made aware of all these potential problems and be guided to create a set of group rules that minimize the problems as much as possible.

Explain the authentic relationship theory.

In an authentic relationship, the counselor acts in such a way that the client can trust and believe in the counselor's honesty and genuine ability to help them. Unless the client truly believes in the counselor, the client-counselor relationship cannot move forward effectively.

Some clients have a harder time than others trusting due to past experiences. The counselor has to work hard and be extremely consistent in the messages he or she is sending to the client to be able to earn the client's trust so that the client can believe what they are being told by the counselor. This then creates the desired effect of the client being able to work with both the counselor and other people they have to interact with towards solving their own problems and situations with less direction by the counselor.

Explain the empathic relationship theory.



To be empathic is the ability to appreciate fully what someone else is feeling even though what is causing these feelings is not actually happening to us at this moment.

For empathy to truly happen, a counselor has to be able to view situation and other people as they really are, both the good and the bad, and not as the counselor thinks they are. The counselor needs to know enough of the background of the client including social, economic, and cultural to be able to empathize with them fully.

Any personal bias towards a certain person or situation on the part of the counselor also has to be taken into account by the counselor. This can change whether or not the counselor is seeing the client and the client's situation in a realistic manner and can affect the outcome of the session.

Explain the power relationship theory.

Part of the power in a client-counselor relationship comes from a certain type of authority. This authority stems directly from the relationship between the client and the counselor in that the counselor is supposed to be the expert in the relationship.

Power also comes from the expertise of the counselor that has been gained from his/her education, accreditation (or certifications), and by membership in the group or organization the counselor is associated with while in the position of helping the client. Clients also give the counselor power by putting themselves in a position to decide to act in a certain way based on the counselor's advice.

Power in client relationships varies between clients and between situations. It all depends on the decision-making abilities of the client themselves given the specific situation or problem and how much authority the counselor needs to choose to use to help the client.

Explain the acceptance relationship theory.

The accepting relationship relates directly to the counseling value of innate worth and dignity of the human being. It is the counselor's caring about an individual client without having any of his or her own needs to gratify. The premise for the accepting relationship is that counselors need to acknowledge to themselves that everyone should think individually and that not everyone's feelings about something are going to be the same.

The better the counselor is at helping the clients to see that they accept and value them as individual people, the more the clients will get out of each session the counselor has with them. The things that stand in the way of an accepting relationship vary from counselor to counselor but are usually based on the counselor's own insecurities, personalities, and cultural differences with the clients he or she is interacting with.

Explain the affect client age and gender can have on a client-counselor relationship.

Sometimes it is easy for a counselor to fall into the trap of assuming that just because a client is old, they are physically or mentally limited and not really able to benefit fully from all the resources the counselor has at their disposal to use to help the client. In this situation the counselor subconsciously withholds these resources. Older adults can also have preconceived notions that a younger counselor will not be able to help or even empathize fully with them.

Relationships across gender lines can be difficult based on the past experience of both the client and the counselor. Some women clients feel they have to agree with a male authority figure and some men clients are not comfortable with a woman authority figure. In both cases, the counselor needs to be sure to show both respect and understanding of the individual client while working towards the trust needed for a fruitful relationship.

Explain the cultural influence relationship theory.



Both the client and the counselor enter into the initial relationship with each other with certain preconceived notions in place that are based on their first impressions of each other. These impressions come from prior experiences with other people that are similar in terms of gender, ethnic background, personality and/or the assumed (or apparent) social class of each person.

Care must be taken by the counselor to ensure that cultural differences do not impair the establishment of a trusting and rewarding client-counselor relationship. The counselor needs to be aware of the cultural and social customs of the client that will help foster the initial relationship and keep it progressing.

Client-counselor relationships that successfully bridge racial and cultural lines create an opportunity for the previously distrustful client to learn that others can accept them and be trusted even though there are differences between them. This is an important social step for the client to make.

Explain the Transference  
Relationship theory.

Transference is when a client takes the feelings and opinions they have formed about other people in previous relationships and applies them to the counselor even when there is no basis to do so.

These can be positive or negative in nature and can sometimes hinder a client counselor relationship by preventing the client from learning to independently resolve their own problems and situations by requiring extra intervention on the part of the counselor.

Transference can be an attempt by the client to create some security in a new and uncomfortable situation. Once the client is able to better see others as they really are, and less as the client assumes they are based on past experience, the client can begin to strengthen their own sense of identity and enjoy richer adult relationships with others in their lives.

Explain how sexual orientation can affect the client counselor relationship.

Many people in our society still view homosexual behavior as deviant inspite of findings to the contrary. Thus, most homosexuals fear that they will not be accepted by anyone who is a heterosexual, including a counselor. This situation initially inhibits the creation of the desired accepting and genuine client-counselor relationship.

The counselor has to prove to the client multiple times that the counselor will accept the client for who they are regardless of their sexual orientation. For this to happen, the counselor needs to make sure that all messages he or she sends to the client agree in both verbal and non-verbal content. The client will be quick to sense any discomfort and remain distrustful otherwise.

A homosexual client will also have a hard time believing that the counselor can truly empathize with the problems and emotional difficulties inherent in being a homosexual in today's society. Again, the counselor must show the client that this is not the case and that people of other sexual tendencies can be willing to make an effort to understand.

Explain the practice of  
using of empathy in a  
counseling context

The counselor should be sure to be conscious of their own personal slants towards a certain person or situation so that they will not let it affect their own understanding. This self-awareness should be practiced so that personal insecurities or flaws will not impede the counselor from empathizing with the client.

Any knowledge of the economic, social, or cultural background of the client can be used to plan ahead of time what feelings or problems the client will likely bring to the session and prepare the counselor for the initial understanding that is required for true empathy to occur.

The client needs to understand that the counselor is very interested in what is going on and the feelings generated accordingly. This way it will be easier for the counselor to encourage the client to talk in more detail about the situations or problems that the session is designed to help resolve.

Explain counter transference  
in relationships.



Counter transference occurs when the counselor takes the feelings and opinions they have experienced with other people or clients in previous interpersonal relationships and unrealistically applies them to a client.

Any counter transference on the part of the counselor keeps the client counselor relationship from functioning as effectively as it should and is therefore counter productive to the client.

Personal feelings cannot always be removed completely from a particular client-counselor relationship, but the counselor should always strive to control the feelings and keep them from causing an error in realistically helping the client to move forward in handling their own problems. The counselor should always keep in mind that their own values and beliefs may differ from those of the client and the counselor needs to differentiate between the two to help keep counter transference from occurring.

Explain the practice of using of acceptance in a counseling relationship context.

To show acceptance to a client, the counselor must show that they are concerned about the client. This involves asking how the client is feeling and how they are coping with their lives. It also has to do with what the client may have been doing and accomplishing most recently. The counselor needs to be able to tell the client when they agree with or do not agree with what the client has been doing without making the client feel that it affects whether or not the counselor likes them as a person.

The client needs to understand that the counselor is trying to help them change destructive behavior. The counselor has to accomplish this without making the client feel guilty or less worthy of love and acceptance simply because of the actions the client has chosen to perform.

Explain the practice of using of authenticity in a counseling relationship context.

In an authentic client-counselor relationship, the counselor does not have to let the client know how they are feeling about something. This has to be balanced with the premise that the counselor should never present a false personality to the client. The client will be quick to pick up on this and it will make it harder for them to trust the counselor in future discussions.

Also, the counselor should never take anything the client says personally.

The counselor should never lie to the client or avoid answering a question, but should respond to any questions in a way that will either open the door additional dialogue or effectively show the client that the counselor is not upset or angry with them as a person.

The counselor should always take ownership of any mistakes he or she might have made and be sure to keep any promises or agreements that might have been made to the client.

Explain how the counselor should handle cultural influence in a client-counselor relationship.

Any type of stereotyping on the part of the counselor is to be avoided. Everyone is an individual within a framework of social and cultural groups. At the same time, the counselor needs to remain aware of cultural differences that may impair understanding or the establishment of a comfortable relationship. This can include clients agreeing with the counselor simply because he/she is the authority figure or having the need for informal social time at the start of a session due to cultural influences.

Additionally, the counselor should show respect by using formal courtesies when initially greeting and meeting with the client until such a time that it becomes clear the client no longer needs, or wants, such formality in the relationship.

Race differences should not be treated as an unmentionable subject by the counselor. It should be discussed in a respectful manner and at the right time with the client. This will allow the client to express their own feelings about it in a safe and accepting environment.

Explain the practice of using of power in a counseling relationship context.



The counselor has to balance the use of the power and authority inherent in the client-counselor relationship as needed, such as when the client cannot handle a situation independent of the counselor's support.

An example of this is when a client is physically hurting another person or damaging property and the counselor is required to involve enforcement officials. In this situation, the counselor has to exert more authority over a client than is normal due to the responsibilities given to the counselor by society.

If a counselor is ambivalent about having power over a client, a counselor may just try to be a friend to the client or, conversely, will simplify the power position by acting in an authoritarian way. The client will not benefit from either of these scenarios.

The client needs the counselor to be responsible, honest, and professional.