

# UNIT TWO, ASSIGNMENT 1

## The Main Theoretical Approaches

### 1 Understand core concepts of the main theoretical approaches to counselling

#### **1.1 Explain key characteristics and concepts of:**

- **humanistic theory**
- **psychodynamic theory**
- **cognitive-behavioural theory**

*Student should complete an essay explaining the key characteristics and concepts of humanistic theory, psychodynamic theory and cognitive-behavioural theory.*

*Word count: 800 minimum.*

---

Although all different, the most prevailing theoretical approaches to counselling still often underpin therapeutic practices within the contemporary Western arena. Courses designed to qualify individuals as professional counsellors can be more or less informed by one of these approaches, so it is especially important for aspiring counsellors to be aware of the differences prior to the application process.

The humanistic approach - more often referred to as 'person-centred' today - emerged as a response to psychoanalytic and behaviourist practices which were the two predominant approaches to psychology prevalent across the West. Although the humanistic theory can perhaps be traced back to the beginning of the second world war, it is recognised to have flourished during the fifties and sixties - particularly in America. Humanism, like all apparently revolutionary theories, must be viewed within the context of its emergence. During a time of national disillusionment - following two world wars, the Great Depression, and amidst the throws of nuclear threats throughout the Cold War - humanism was an approach which encouraged a shift of focus within the dialogue surrounding counselling and psychotherapy: to return the individual seeking help to the centre of the conversation, and to recognise the idiosyncrasies of each case.

Unlike psychotherapy and behaviourism, the humanistic approach offered a phenomenological renaissance exploring the metaphysical experience of the self, which was difficult to quantify in numbers. The client's self-concept is integral to the directional flow of the counselling sessions, as the counsellor facilitates their development in re-identifying their self worth.

Central to the person centred approach is the belief that humans have an innate ability to fulfil their own potential; sometimes this ability can be clouded and warped by different circumstances - especially those experiences which compromise our sense of value. In this approach, the counsellor's role is to facilitate sessions, allowing the client to lead the direction of conversations - thus parting from the relationship between 'expert' and 'patient' within psychotherapy. The counsellor's role in this approach is to understand and value the client's idiosyncratic case whilst practicing genuineness and openness (Counselling Directory, No Date).

According to Rogers, there are three core conditions which must be practiced by the counsellor: congruence (counsellor's capacity to be genuine); unconditional positive regard (counsellor's non-judgemental value of the client) and empathy (the ability to perceive the client's experiences through their own frame of reference). In order to effect real change, Rogers proposes that the client must be aware of the counsellor's unconditional positive regard towards them and must recognise that the counsellor understands their difficulties: it is the responsibility of the counsellor to ensure that these are communicated effectively to the client - through verbal and body language (Counselling Directory, No Date).

Psychotherapy emerged from the practice of psychoanalysis, famously pioneered by Sigmund Freud in Vienna during the late nineteenth and early twentieth century. Famously, he compartmentalised the mind into ego (mediator between superego and id), superego (attempts to follow societal expectations) and id (pleasure-seeking, hedonistic) (Chegg.com, No Date). This compartmentalisation allows one to evaluate thoughts and behaviours through the context of the conscious and the subconscious mind. His work was often underpinned by explorations of sexuality through human development, believing that children develop through oral, anal and phallic stages; Freud believed that significant impacts upon one's mental health would arise if one became 'stuck' in one of those stages (Chegg.com, No Date). Within the psychodynamic counselling relationship, the counsellor adopts the role of the expert, and leads the client to understand their thoughts, feelings, relationships and behaviours in relation to the possible causes. In particular, there is an emphasis on past experiences - such as how the parental relationship may have impacted upon the client as a child. Freud placed a lot of emphasis on the analysis of dreams, as a gateway to understand the unconscious mind.

Carl Jung - a Swiss psychiatrist and former friend of Freud - is another figure renowned today for work within psychoanalysis. However, Jung's work eventually parted from Freudian direction as he pursued his own school of psychoanalytical thought known today as Jungian Analysis (Adams, No Date). Jungian Analysis, like person-centred therapy, recognises the individual's own potential in self-development. However, like Freud's version of psychoanalysis, this therapy will explore past experiences which may have obstructed the individual's development. Jung also placed a lot of emphasis on dream analysis, but disembodied it from Freudian sexualised understanding and instead endeavoured to understand the relevance of the specificity of images a dream could conjure.

Cognitive Behavioural Theory (C.B.T.) emerged with the research of Dr. Aaron T. Beck in the 1960s in America. Beck's research predominantly explored the thought processes of individuals suffering from depression and through observations, Beck noted that those suffering with depression seemed to endure spontaneous streams of negative thoughts which he called 'automatic thoughts' (Beck Institute, No Date). These automatic thoughts often fell into three main categories: those about themselves, the world and the future. Through helping patients to become conscious of these thoughts - identifying and evaluating them - their behaviour would subsequently become more functional. Today, C.B.T. is used to challenge 'viscous cycles' of thoughts and behaviours which exist in a perpetual cycle. For instance, if a client may not believe that their boss values them, and thus begins to dislike them, their behaviour may become more distant and less co-operative with their senior staff. Without the help of a counsellor, a client may be unable to recognise that their thought processes are impacting upon their professional behaviour. Noticing the change, their manager may call them in for a meeting. If the client is still engaging with a negative thought process, this may be interpreted to be an attack rather than a constructive meeting, which could lead to the client doubting their own self-worth as a staff member, thus triggering panic attacks within the work place. By challenging 'automatic thoughts' and replacing them with habitual positive thoughts, C.B.T. endeavours to change the functioning behaviour of the client. Having been the subject

of thousands of international studies, CBT has demonstrated its effectiveness in the treatment of psychological problems such as depression and anxiety disorders, and is a recognised therapy encouraged by the NHS.

## References

Adams, Michael Vannoy (No Date) 'What is Jungian Analysis?' - Accessed at: <http://www.jungnewyork.com/what-is-jungian-analysis.shtml> Accessed on: 23.02.18

Beck Institute (No Date). 'History of Cognitive Therapy' - Accessed at: <https://beckinstitute.org/about-beck/our-history/history-of-cognitive-therapy/> Accessed on: 23.02.18

Chegg (No Date). 'Psychodynamic Theory' - Accessed at: <http://www.chegg.com/homework-help/definitions/psychodynamic-theory-13> Accessed on: 23.02.18

Counselling Directory (No Date). 'Person-centred Therapy' - Accessed at: <https://www.counselling-directory.org.uk/person-centred-therapy.html> Accessed on: 23.02.18

## **1.2 Summarise the key strengths and limitations of the three main approaches to counselling**

*Student should complete an essay summarising the key strengths and limitations of humanistic theory, psychodynamic theory and cognitive-behavioural theory.*

*Word count: 600 minimum.*

---

The humanistic approach, otherwise known as the person-centred approach, proves its strength by underpinning all counselling practices today. Just as Carl Rogers placed emphasis on the core conditions (unconditional positive regard towards the client, empathy and congruence), the BACP also places emphasis on such qualities within its ethical framework to create a trusting relationship between client and counsellor alike (BACP, 2016). The non-directive approach is particularly useful for those who desire some autonomy within the counselling process and are keen to explore their own minds and thought processes as they contend with their self concept. Just as Rogers proposed that real change can only be effectuated by a strong relationship between the counsellor and the client, evidence suggests that in any mode of therapy (be it psychodynamic, cognitive behavioural therapy and alternative therapies) the quality of that relationship ultimately determines the success of the therapy.

However, the person-centred approach has received criticism. The argument which forms the premise of person-centred therapy is that humans are innately good; this is a metaphysical assumption which thus far, has been unable to be proved or disproved (Lees-Oakes, 2016). Critics have also argued that the social context of the fruition of person-centred therapy must be considered. For instance, the optimistic concept of the self is very specific to American optimism - especially during a period of heightened rhetoric relating to the American Dream: that an individual has the potential to forge their own destinies to achieve success. Critics may argue that this is very different, and perhaps irrelevant, to the more cynical Eurocentric forms of psychology which were being pursued by the likes of Freud and Jung in the twentieth century (Lees-Oakes, 2017).

The psychodynamic approach has most efficacy within cases where the client's present behaviour has largely been determined by previous events - and this approach has been valuable in addressing how one's past can be so significant in determining one's future behaviours and thoughts (Flow Psychology, 2017). The psychodynamic theory also places a dual emphasis on nature and nurture: nature, through the exploration of the id, ego and superego; nurture through the significance placed on past experiences. The simultaneous exploration of subconscious and conscious thoughts also adds depth and merit to the approach.

The weaknesses of the psychodynamic theory are self-evident in the changing discourse of the approach: Carl Jung, a former friend and peer of Sigmund Freud, parted from the overtly sexualised nature of psychoanalysis and formed his own more idiosyncratic approach known as Jungian Analysis. Some potential clients can also find the formality of psychoanalysis intimidating.

Cognitive Behavioural Therapy is widely accepted to be an appropriate treatment for anxiety disorders and depression - and its strengths in efficacy can be noted by the recommendation for such treatment by the NHS (NHS, 2016). By nature, CBT is a highly structured talking therapy which is advantageous because it can be delivered through a myriad of avenues:

therapy sessions, group sessions, through books and online. Its accessibility enables a much broader scope of people to benefit from the approach.

Although the structured nature of CBT contributes to its strengths, it also contributes to its weaknesses. Due to the structure of CBT, it may not be an appropriate form of therapy for individuals with much more complex needs or learning difficulties. CBT - through its focus on the individual's capacity for self-help - overlooks external factors which may be contributing towards the individuals negative thoughts such as the home environment. Similarly, critics suggest that CBT does not give clients the scope to explore underlying causes for mental health issues, like traumatic childhood experiences (NHS, 2016).

## References

BACP (2016) 'Ethical Framework for the Counselling Professions' Accessed at: <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/> Accessed on: 24.02.18

Flow Psychology (2017) '6 Psychodynamic Approach Strengths and Weaknesses' Accessed at: <https://flowpsychology.com/6-psychodynamic-approach-strengths-and-weaknesses/> Accessed on: 24.02.18

Lees-Oakes, Rory and Kelly, Ken (2016) Podcast: 'Group Critique of Carl Rogers - Idiosyncratic Empathy - Counselling Placements' Accessed at: <https://counsellingtutor.com/005-pd-group-critique-of-carl-rogers-idiosyncratic-empathy-counselling-placements/> Accessed on: 24.02.18

NHS (2016) 'Cognitive Behavioural Therapy' Accessed at: <https://www.nhs.uk/conditions/cognitive-behavioural-therapy-cbt/> Accessed on: 24.02.18