Workbook 3

The counselling relationship

Develop crisis intervention skills

Because there a stigma sometimes associated with counselling it may take a crisis to motivate some people to seek therapy.

Such directiveness is embodied in the following intervention strategies

- a) Take control of the situation
- b) Determine the real client
- c) Emphasise strengths
- d) Mobilise social resources

Therapeutic Relationship

The therapeutic relationship is a central factor in successful therapy. Clients who are engaged and connected with therapists may benefit more from therapy. The therapeutic alliance can be most beneficial and an excellent predictor of outcome when:

- Therapists agree with clients on goals and preferred outcomes
- Therapists collaborate with client on tasks to accomplish those goals and preferred outcomes
- Clients have a favourable view of the therapeutic relationship.

Promoting the therapeutic relationship

To strengthen the client therapist bond, it is important that the clients feel they are heard and understood and that their theories of chare are honoured.

Therapist listen and attend to clients, acknowledging and validating whatever they experience. These experiences include:

- their feelings
- Sense of self
- Sensory experiences
- Bodily sensations
- Automatic thoughts
- fantasies

Clients have competencies

Clients have abilities, strengths and resources that can be helpful in solving problems and resolving conflict.

Competencies can go unnoticed when therapists who have been trained to discover problems, pathology and underlying conflicts continue to search and find inabilities and liabilities.

To identify competences, counsellors shit the focus from 'What's wrong' to one of 'What's right'

A collaborative, competency based approach relies heavily on language for creating possibilities and change. Instead focusing on pathology and deficit, therapists can use language that is more respectful and validating, builds on expectancy and promotes hope.

Emotional Work

Problem solving – figuring things out – is useful. Together with relationship building, problem solving is one of the major activates of the early phase of therapy.

As we move into the middle phase, however we move into the area of personality change.

 Emotional work – changing oneself, one's feeling, one's feeling, one's interactive style. Clients are moved from a familiar, predictable state of affairs into a strange and unpredictable one.

- Permission and protection the therapist must provide both permission and protection: permission to feel and feel in new ways; and protection from the kinds of consequences that the client has learned to expect if he does let himself experience those feelings
- To touch or not to touch even though you might be quite clear about your intentions, the client may not; touching may be misinterpreted as an effort to form a different type of relationship with them.
- Plunging into the process to characterize middle phase therapy, it is a sense of working at many levels and in many directions at once.

The helping process

- Phase I exploration, engagement, assessment and planning
 - 1. Exploring clients problems
 - 2. Establish rapport and enhancing motivation
 - 3. Formulating a multidimensional assessment of problems, identify role in difficulties and identify relevant resources that can be tapped or must be developed
 - 4. Mutually negotiating goals to be accomplished in remedying or alleviating the problem and formulating a contract
 - Making referrals

Phase II implementation and goal attainment.

After mutually formulating a contract, the therapist and client enter the heart of the problem solving process – the implementation and goal attainment phase, also denoted as the action-oriented or change orientated phase.

- Enhancing self-efficacy
- Monitoring progress
- Barriers to gaol accomplishment
- Relational reaction
- Enhancing clients self awareness
- Use to self

Phase III termination.

Evaluation of results help the therapist, clients and interested parties such as funders determine whether termination is called for. By evaluating results, therapists are able to test the efficiency of interventions employed and monitor their own success, failures and progress in achieving favourable outcomes.

- Evaluating results
- Successfully terminating helping relationships
- Planning change maintenance strategies

A training manual for counsellors

- Confidentiality
- The need to keep notes
- Requirements of the counsellors own supervision
- The need to protect others
- Working in conjunction with professionals
- Education training programs, conference, workshops and seminars
- Where the law requires disclosures of information

- Respecting the clients right to privacy
- Professional ethics
- Respect for the client
- Responsibility of the counsellor
- Counsellor competence
- Referral
- Termination of counselling
- Legal obligations
- Self promotion
- Learning summary

Concluding the counselling relationship

Depending upon your orination to counselling, the process may involve several elements.

- 1. It is usually more difficult to conclude counselling relationships that are indeterminate in length.
- 2. Provide options for your clients.
- 3. Soften the perceived permanence of concluding the counselling relationship by leaving open a 'door' to a future relationship if such becomes necessary

- 4. If you work at an agency that limits the amount of assistance that can be provided to any one client, inform clients of this reality sooner rather than later
- 5. Review the progress clients have made and discuss with them how they will handle the period immediately following the conclusion of counselling.
- 6. Try to conclude the counselling relationship on a positive note.
- 7. Do not be afraid to voice your own feeling about ending the counselling relationship
- 8. In the final period before concluding the counselling relationship tread partially carefully the fine line between creating undue dependence upon you as the counsellor and conveying uncaring detachment

Feeling reactions to termination

The emotions surrounding this event are often intense, and working these emotions through is literally the final stage of therapy.

- Sadness
- Anger
- Fear
- Guilt
- Pleasant affect

Keep records of sessions

- Identifying the clients
 - Clients family name
 - Other names
 - Date of birth
 - Address
 - Contact phone numbers/email address
- Additional demographic information about the client
 - Martial status
 - Name of partner or spouse
 - Name and ages of children
 - > Referral source

- Notes about each counselling session
 - Date of the session
 - 2. Factual information given by client
 - 3. Details of the clients problem, issues, dilemmas
 - 4. Notes on the process that occurred during session
 - Notes on outcome of sessions
 - 6. Notes on the intervention used by the counsellor
 - Notes on any goals identified
 - 8. Notes on any contract between client and counsellor
 - Notes on the counsellor's own feelings relating to the client and the counselling process
 - 10. Notes on matters to be considered at subsequent session
 - 11. The counsellor's initials or signature

Thank you for watching this video and good luck with workbook 3. Bye for now 🔀