UNIT 1 THE COUNSELING SETTING AND THE ROLE OF COUNSELORS IN GUIDANCE AND COUNSELING

Structure

1.0 INTRODUCTION

Human beings by nature are complex being who are often encompassed with myriads of problems, issues and serious pressing matters bombarding his or her existence on a daily basis. Every person resort to some kind of suggestion or advice at various points in life to ensure that good decisions are arrived at. Therefore Guidance and Counseling has been practiced right from time immemorial in an informal manner, today it is well established. Guidance and Counseling provides a platform where these enormous problems can be solved and lasting solutions are provided. It aims at helping individuals understand themselves and their environment and mobilise their resources in order to resolve their problems and/or modify attitudes and values so that they can function effectively in the society. In a nutshell Guidance and Counseling helps the client to attain a level of self actualisation through a professional counselor specially trained to render such services without age or gender discrimination both at counselor and counselee. In this unit we are delineating the concept of guidance and counselling, explain the features of counselling and guidance. We then present what kind of set up is required for counselling and guidance and describe the qualities required of a counsellor. Then we elucidate the counselling goals and analyse the role of counsellor in each stage of counselling.

1.1 OBJECTIVES

After completing this unit, you will be able to:

- Explain the concept of Guidance and Counseling;
- Explain the features of a counseling Setup;
- Elucidate the qualities of an effective counselor;
- Describe the counseling Goals;
- Explain the stages of counseling process; and
- Analyse the role of counselor in each stage.

1.2 DEFINITION OF GUIDANCE AND COUNSELING

Counseling is an interactive process conjoining the counselee who needs assistance and the counselor who is trained and educated to give the assistance (Perez, 1965).

"Counseling has also been defined as a process which takes place in a one to one relationship between an individual beset by problems with which he cannot cope alone and a professional worker whose training and experience have qualified him to help others reach solutions to various types of personal difficulties" (Hahn and Maclean).

Patterson (1959) characterised it as a process involving interpersonal relationships between a therapist and one or more clients by which the former employs psychological methods based on systematic knowledge of the human personality in attempting to improve the mental health of the latter.

Definition of counseling given by Gustad (1953) is considered to be very comprehensive, indicating both the scope and function of counseling. According to him 'Counseling is a learning oriented process, carried on in a simple, one to one social environment in which the counselor professionally competent in relevant psychological skills and knowledge, seeks to assist the client by methods appropriate to the latter's needs and within the context of the total personnel program, to learn how to put such understanding into effect in relation to more clearly perceived, realistically defined goals to the end that client may become a happier and more productive member of society".

Definition quoted above concurs on several points:

Counselor to be a professional

Counseling is a process that brings about sequential changes over a period of time leading to a set goal and relationship between counselor and counselee is not causal and business like rather characterised by trust, warmth and understanding.

According to Jones Guidance involves personal help given by someone; it is designed to assist a person to decide where he wants to go, what he wants to do or how he can best accomplish his purpose; it assists him to solve problems that arise in life.

Traxler considers guidance as a help which enables "each individual to understand his abilities and interests, to develop them as well as possible and to relate them to life-goals, and to finally to reach a state of competence and mature self-guidance as a desirable member of the social order.

1.3 DIFFERENCE BETWEEN GUIDANCE AND COUNSELING

Guidance focuses on helping individuals choose what they value most whereas counseling focuses on helping them make changes.

According to Arbuckle guidance focuses on educational, vocational and occupational problems and in Counseling the emphasis is the social, personal and emotional problems of the individual.

1.4 COUNSELING SETTING

1.4.1 Physical Setting

Counseling may take place anywhere but some kind of physical setting may promote and enhance the counseling process better than others. Benjamin (1987) and Shertzer and Stone (1980) emphasise that among the most important factor that influences the counseling process is the place where counseling occurs. Though there is no universal quality that a room should have certain optimal conditions within the room where counseling is to be rendered can provide a conducive environment to both counselor and counselee.

The optimal condition include a room with quiet colors, lighting that is neither too flashy and bright nor too dull and depressing clutter free with harmonious

and comfortable furniture and good ventilation. It should be free from outside disturbances and should exude a feeling of warmth. In short it should be comfortable such that a relaxed atmosphere is provided in which the counselee can talk in a relaxed mood.

1.4.2 Sitting Arrangement

The sitting arrangement within the room depends on the counselor. Some counselors prefer to sit behind a desk. However it has been postulated that a desk can be a physical and symbolic barrier against the development of a rapport between client and counselor. Benjamin (1987) suggests that counselors may include two chairs and a nearby table in the setting. The chairs could be at a 90 degree angle from one another so that the clients can look at their counselors or straight ahead. Counselors could opt for other variation of physical arrangement as per their comfort level.

1.4.3 Proximity between Counselor and Client

The distance between the counselor and client (the spatial features of the environment) can also affect the relationship. A distance of 30 to39 inches has been found to be the average range of comfort between counselor and client of both genders. This optimum distance may vary with room size and furniture arrangement.

Benjamin (1987) and Shertzer and Stone (1980) emphasises that regardless of the arrangement within the room, it is a universal requirement that counselors should not be interrupted while conducting sessions. All phone calls should be held. If possible counselors should put do-no-disturb sign on the door to keep others from entering. Auditory and visual privacy are mandated by professional codes of ethics and assure maximum client self-disclosure.

Self Assessment Questions

1) Define guidance and counseling.

.....

.....

.....

.....

.....

.....

2) Differentiate between guidance and counseling.

.....

.....

.....

.....

.....

3) Describe a counseling setting.

.....

.....

.....

.....

.....

4) What kind of seating arrangement should be there for counseling?

.....

.....

.....

.....

.....

5) Describe the proximity between the counsellor and client.

.....

.....

.....

.....

.....

1.5 CHARACTERISTICS OF AN EFFECTIVE COUNSELOR

The personal and professional qualities of counselors are very important in facilitating any helping relationship, and thereby bringing about therapeutical transformation in another person (i.e. the client).

Okun (1982) notes that "It is very hard to separate the helper's personality characteristics from his or her levels and styles of functioning, as both are interrelated".

Individuals who possess the following characteristics may become successful counselor.

1.5.1 Self-Awareness

It means to be aware of oneself i.e. one's own thoughts, feelings, attitudes, strengths, weaknesses, biases, behaviours and their effect on others. Counselor's who are self aware are likely to have clear perception of their own and clients' needs and accurately assess both. Such awareness helps counselors' to be honest with themselves and others and build trust and communicate clearly and accurately..

1.5.2 Empathy

The empathic behaviour is the ability of a counselor to stand in the shoes of the client i.e. to see the things from the point of view of the client. The quality of empathy is a must for the counseling process to succeed. Rogers (1961) describes *empathy* as the counselor's ability to "enter the client's" phenomenal world – to experience the client's as if it were your own without ever losing the as if quality.

Empathy has two components: Primary empathy is the ability to respond in such a way that it is apparent to both client and counselor that the counselor has understood the client. Advanced empathy "is a process of helping a client explore themes, issues, and emotions new to his or her awareness".

1.5.3 Unconditional Positive Regard

Rogers came up with a term called, 'unconditional positive regard' to refer to 'necessary and sufficient conditions for therapeutic change' in the counseling relationship. Rogers emphasised that the counselor's positive feeling for the client must never be conditional in nature. Counselor should have non-judgmental, positive and genuine dispositions towards the client irrespective of the client's feelings or emotions.

1.5.4 Genuineness

Genuineness on part of counselor is very important. In its most basic sense it means "acting without using a façade" functioning without hiding behind the veneer of one's role or professional status. A genuine interest in the client is a must for the counseling process to succeed. Rogers (1958) suggests that the counselor should be a real person to his/her clients.

1.5.5 Warmth

The quality of being warm refers to a situation, where a person shows interest in other individual/group. 'Cold' individuals rarely become good counselors. There is an element of support involved in being warm. Warmth implies attentiveness as well as patience to listen. A word of caution here, a too warm counselor may lead towards the development of over-dependence on the part of the client. The ideal feeling of being warm is the one which demonstrates that the counselor is non-judgmental and is honestly interested in his/her client.

1.5.6 Attentiveness

Empathy is fostered by attentiveness – the amount of verbal and nonverbal behaviour shown to the client. Verbal behaviours include communications that show a desire to comprehend or discuss what is important to the client. (Cormier and Cormier, 1991).These behaviours (which include probing, requesting clarification, restating, and summarising feelings). indicate that the counselor is focusing on the client.

Equally important are the counselor's nonverbal behaviours.

Egan (1990) summarises five nonverbal skills involved in attending and which conveys to the client that the counselor is interested in and open to him/her.

Skills are abbreviated as SOLER

S: Face the client *squarely;* that is, adopt a posture that indicates involvement.

O: Adopt an *open* posture. Sit with both feet on the ground to begin with and with your hands folded, one over the other.

L: Lean toward the client. However be aware of the clients space needs.

E: Maintain *eye* contact. Good eye contact with the clients indicates that the counselor is attuned to the client. For other less eye contact may be appropriate.

R: As counselor incorporates these skills into his /her attending or listening skills, he or she should *relax.*

1.5.7 Concreteness

It can be termed as a type of skill. It is an ability to listen, to what is being said by the client, instead of what is being implied. Concreteness in counseling is essential, if the counseling process has to succeed. A counselor possessing the skill of 'concreteness' does not go for details (regarding psychological explanations) of what the client is speaking about, but instead tries to understand what the client is trying to express. Any quick, preconceived or initial judgment about what the client is saying is not particularly helpful. In fact, it may be counterproductive. The concept of concreteness almost integrates all the important elements of the counseling process. A concrete counselor, invariably, listens to and accepts what the client is saying and does not quickly make his judgments.

1.5.8 Objectivity

To remain objective in the counseling process means to be able to stand back and observe whatever is happening from a neutral frame of reference and not distorted by perceptions, biases and expectations.

1.5.9 Open Mindedness

Open mindedness means freedom from fixed preoccupations and an attitude of open receptivity to whatever the client is expressing. The open minded counselor is able to accommodate the client's values, feelings and perceptions even if they are different from his or her own. Open-mindedness also implies the ability to listen, to respond, and to interact with the client free from the constraints of imposing value criteria. As per Anderson, Lepper and Ross (1980) if the counselor is not open-minded he will persist in believing incorrect things about a client, even in the face of countervailing evidence

1.5.10 Sensitivity

Sensitivity is a prime factor in contributing to counselor effectiveness. It implies that the counselor makes a deeper and spontaneous response (cognitive and emotional response) to the client's needs, feelings, conflict, doubts and so on.

1.5.11 Non Dominance

The non dominant counselor is one who is capable of sitting back and allowing the client to initiate and direct the course of counseling interview. Counseling requires counselor to be able to listen to whatever the client expresses and listening is possible only if the counselor controls any dominating tendencies.

1.5.12 Confrontation

Counselor's ability to confront should not be understood in a negative connotation. In confrontation the counselor challenges the client to examine, modify, or control

an aspect of behaviour that is improperly used. A good, responsible and appropriate confrontation produces growth and encourages an honest examination of oneself.

Example of Confrontation: "You have said you want to change this behaviour but it seems you keep doing it over and over again. Help me to understand what is going on and how repeating this pattern is helpful to you."

1.5.13 Sense of Humor

Humor involves giving a funny, unexpected response to a question or situation. It requires both sensitivity and timing on part of the counselor. A sense of humor comes quite handy, in rescuing most of the sensitive or delicate situations. It is never aimed at demeaning anyone. It also does not mean that a counselor should start taking the conversation during counseling session lightly. If used properly, it is a 'clinical tool that has many therapeutic applications' (Ness 1989). Humor can circumvent client's resistance, dispel tension and help clients distance themselves from psychological. Even subjects dubbed as 'taboos', can be easily confronted with the help of a sense of humor.

Self Assessment Questions

1) What are the characteristics of an effective counsellor?

.....

.....

.....

.....

.....

.....

2) What is meant by unconditional positive regard?

.....

.....

.....

.....

.....

.....

3) Describe warmth and attentiveness.

.....

.....

.....

.....

.....

.....

4) Describe SOLER.

.....

.....

.....

.....

.....

5) Describe confrontation and sense of humour.

.....

.....

.....

.....

.....

1.6 COUNSELING GOALS

Broadly speaking goal of counseling is to help individuals overcome their immediate problem and also equip them to meet future issues/problem. Counseling to be meaningful has to be specific for each client as it involves his/her unique problems and expectations. A statement of goal is not only important but also necessary, as it provides a sense of direction and purpose in the counseling process. It establishes a congruency between what is demanded or sought by the client and what is possible or practical.

Though specific counseling goals for each client are different and unique involving a consideration of the client's expectations as well as the environmental aspects the overall goals of counseling may be separated into the following categories.

1.6.1 Developmental Goals

Developmental goals are those wherein the client is assisted in meeting or advancing his or her anticipated human growth and developmental (that is socially, personally, emotionally, cognitively, physical wellness and so on).

1.6.2 Preventive Goals

In this the counselor helps the client to avoid some undesired outcome.

1.6.3 Enhancement Goals

In case the client possesses certain special abilities or skills, it can either be identified or further developed through the assistance of a counselor.

1.6.4 Remedial Goals

Remediation involves helping a client to either overcome and/or treat an undesirable development of his/her life.

1.6.5 Exploratory Goals

It implies examining options, assessing skills and trying new and different activities, environment relationships etc.

1.6.6 Reinforcement Goals

Reinforcement is used to recognise conditions wherein clients resort to appropriate ways of doing things, thinking and/or feeling

1.6.7 Cognitive Goals

Cognition involves acquiring the basic foundations of learning and cognitive skills.

1.6.8 Physiology Goals

Physiological goals ensure acquiring the basic understanding and lifestyle habits for good physical health

1.6.9 Psychological Goals

It represents developing good social interaction skills, learning emotional control, developing positive self-concept and so on. (Gibson, Mitchell and Basile 1993)

1.7 FUNCTION OF COUNSELING GOALS

Goal serves three important functions in the counseling process:

First Goal serves as a motivational factor in counseling.

Secondly Goal can have an educational function in counseling as it helps clients to acquire new responses and

Third goal meet evaluative function in counseling whereby client's goal help the counselor to select and evaluate different counseling strategies appropriate to achieve the client's goals. Hackney and Cormier (1996)

1.8 ROLE OF COUNSELORS IN GUIDANCE AND COUNSELING

The counseling process implies continuous change that take place or rather which should take place in the client in order to promote personality change in a desired direction. The kind of change that the counselor aims to bring through counseling is briefly

a) Awareness on the part of the client;

b) Behavioural change in a desired direction through which client can achieve his or her goals; and

c) Understanding the clients potentialities, limitations and how to utilise them best in achieving the desired goal.

Counseling process and the role of counselor is by and large same for all problems and for all individuals. However there is a subtle difference in the role a counselor plays while giving vocational counseling and when handling emotional issues.

In vocational and educational counseling the major emphasis of the counselor is on collecting the factual information. The counselor helps the client to understand the information in a proper perspective. He tries to help in rational problem solving processes, clarifying self concepts, values etc. In this context counselors are often concerned with the appropriate choice in educational spheres.

On the other hand while counseling the individuals with personal and emotional problems the counselor assumes somewhat different role. In this context information and planning in logical terms do not play central role. Here the counselor helps the clients to

a) express their feelings, clarify and elaborate them as related to the problem

b) explore feelings and personal resources

c) make the client aware of desirable action for change

d) plan action in collaboration with the client and

e) help client implement the most appropriate action.

Overall it can be inferred that overall emphasis of vocational and educational counseling is on cognitive aspect whereas counseling related to personal issues lays stress on affective aspect.

Thus, though counseling goals may differ as per the needs of the client the counseling process follows a specified sequence of interactions or steps. Hackney and Cormier (1996) identified the stages or steps as follows:

- Establishing relationship with the client
- Problem identification and Exploration
- Planning for problem solving
- Solution application and termination.

Each of these stages is further elaborated:

1.8.1 Establishing Relationship with the Client

The core of the counseling process is the relationship established between the counselor and the client. The Counselor takes the initiative in the initial interview to establish a climate conducive to develop mutual respect, trust, free and open communication and understanding in general of what the counseling process involves.

Both the counselor's attitude and verbal communications is significant to the development of a satisfactory relationship. Verbal communication includes attentive listening, understanding and feeling with the client.

The quality of counselor client relationship determines the counseling outcomes. Factors that are important in the establishment of counselor client relationship are positive regard and respect, accurate empathy, and genuineness. To ensure these conditions the counselor needs to have openness: an ability to understand and feel with the client as well as value the client.

It is by means of this relationship that the counselor elicits and recognises the significant feelings and ideas that determine the behaviour of the client.

Counselor client relationship not only serves to increase the opportunities for clients to attain their goals but also be a potential model of a good interpersonal relationship, one that clients can use to improve the quality of their relationships outside the therapeutic setting. The counselor helps the client make effective interpersonal relationships and free him from unrealistic aspirations. In this the counselor plays the part of a teacher.

Pepinsky and Pepinsky (1954) define the relationship "as a hypothetical construct to designate the inferred affective character of the observable interaction between two individuals". He emphasised the affective or emotional element in the relationship.

Counselors main responsibility always remains to meet the clients need as much and possible. The counseling relationship seeks to assist the clients in assuming the responsibilities for his or her problem and its solution. This is facilitated by the counselor's communication skills, the ability to identify and reflect clients' feeling and the ability to identify and gain insight into the clients concerns and needs.

Establishment of a conducive relationship between client and counselor is important to be achieved in the initial counseling process as it often determines whether or not the client will continue for counseling.

Goals of initial counseling interview include:

Counselor's Goal

- Establish a comfortable and positive relationship.
- Explain the counseling process and mutual responsibilities to the client.
- Facilitate communication.
- Identify and verify the client's concern that brought him/her to the counselor.
- Plan with the client to obtain assessment data needed to proceed with the counseling process.

Clients Goal

- Understanding the counseling process and his/her responsibilities in the process.
- Share and explain reasons for seeking help.
- Cooperate in the assessment of both problem and self.

1.8.2 Problem Identification and Exploration

After the establishment of an adequate relationship, the clients become more receptive for in depth discussion and exploration of their concern.

In this phase counselor continues to exhibit attending behaviour and put forward questions to the client to facilitate continued exploration and elicitation of information of the client' concerns. Questions that might embarrass, challenge, or threaten the client are avoided as this would hinder the process of information elicitation from the client.

Counselor working in close harmony with the client with due understanding and regard tries to distinguish between the surface and deeper or complex problems.

Counselor also tries to ascertain whether the problem stated by the client is the actual problem that has led client to seek help .This may be a time for information gathering. The more useful information the counselor gathers the more accurate assessment of clients need could be done. It is therefore important for counselors to recognise the various areas of information to be gathered. Usually the desired information could be grouped under three headings: time dimension, the feeling dimension, and the cognitive dimension. Brief description of each dimension is indicted as follows.

i) **Time Dimension:** includes the clients past experiences which had major impact on his/her life. Present dimension would cover how well the client is functioning currently specially those current experiences that had an impact enough on the client to seek counseling. Future dimension would include future demands, goals and how the client plans to achieve them.

ii) **Feeling Dimension:** includes emotions and feelings the client has towards oneself (self concept) and significant others.

iii) **Cognitive Dimension**: includes how the client solves problems, the coping styles, the rationality used in making daily decisions and the client's capacity and readiness for the learning.

At this point counselors may use certain standardized test to diagnose the problem and sub problem. The counselor tries to collect as much relevant information as possible and integrate it into an overall picture of client's needs and concerns. Counselor shares this conceptualisation with the client as well as one of the counselor's goals during this stage is to help the client develop a self-understanding of the need to deal with a concern/problem – the need for change and action. The counselor continues to promote the client's understanding of action plans for resolving problems**.**

The steps or stages counselor follows for problem identification and exploration are as follows:

1) **Define the Problem:** Counselor with the corporation of client tries to identify the problem as specifically and objectively as possible. He also tries to identify the components or contributing factors, severity of the problem and its duration.

2) **Explore the Problem:** At this stage information needed to fully understand the problem and its background is gathered. The counselor may take a detailed case study or administer standardized psychological measures to collect the required information**.**

3) **Integrate the information:** In this step the counselor systematically organises and integrates all the information collected into a meaningful profile of the client and his problems. The Counselor also begins to explore the changes that are required and obstacles that exist for these changes to materialise.

1.8.3 Planning for Problem Solving

Once the counselor determines that all relevant information regarding the client has been gathered and understood in proper perspective and client has also developed awareness and has gained insight into the fact that something needs

to be done about a specific problem, counselor moves on to develop a plan in collaboration with client to remediate the concern of the client. The sequence of steps that the counselor usually follows to devises a plan is as follows:

1) **Define the problem:** It is important that both client and counselor view the problem with similar perspective and have the same understanding of its ramification.

2) **Identify and list all the solutions:** At this juncture, appropriate brain storming needs to be done for all possibilities. Efforts from both the sides (client and counselor) are required, but the client should be allowed to list as many possibilities as he/she can think off. In case some obvious solutions are overlooked, the counselor may suggest to the client "Have you also thought of _____? None of the possibilities should be eliminated just on face value.

3) **Analysis of the consequences of the suggested solutions:** Here the counselor encourages and suggests the client to identify the steps needed for the implementation of the suggested solutions. This process is important as it enables the client to assess the pros and cons of each proposed solutions and its consequences.

4) **Prioritize the solutions:** After weighing out the pros and cons of each possible solution, the client with the help of the counselor list the solutions with the best possible outcome down to least likely to give desired outcome. After finalising and selecting the best solution the client moves on to the application and implementation.

Client may not be able to smoothly follow the above mentioned steps and may have difficulties in arriving at basic insight, implications and probabilities, whereas this may be easier for the counselor. Hence the counselor guides the client towards realising these understandings. The counselor may use the techniques of repetition, mild confrontation, interpretation, information and obvious encouragements to facilitate client's understanding.

1.8.4 Solution Application and Termination

In this final stage the counselor encourages the client to act upon his or her determined solution of the problem. During the time the client actively involves in implementing the problem solution, the counselor maintains contact as a source of follow up, support and encouragement as the client may need the counselor's assistance in the event things do not go according to plan.

Once it is determined that the counselor and the client has dealt with the client's concern to the maximum possible extent, the counseling process is terminated. Termination refers to the decision, one-sided or mutual, to stop counseling. (Burke, 1989).The counselor usually concludes the counseling by summarising the main points of the counseling process.

Self Assessment Questions

1) How do you establish relationship between client and counsellor.

.....

.....

2) Describe problem identification and exploring.

.....

.....

.....

.....

.....

3) How do you plan for problem solving?

.....

.....

.....

.....

.....

.....

4) Describe solution application and termination.

.....

.....

.....

.....

.....

.....

5) Fill in the Blanks

a) Vocational Counseling lays emphasis on_____ aspect.

b) The optimal distance between counselor and counselee is considered to be _____inches.

c) Counseling related to personal problem lay stress on _____ aspect.

d) _____ goals represents developing good social interaction skills and learning emotional control.

e) Three functions of counseling goals are _____, _____, and _____.

f) _____ means free from fixed preoccupations.

g) _____ is the ability of a counselor to stand in the shoes of the client.

6) Match the following

1) Guidance	a) giving a funny, unexpected response to a question situation

2)	Termination	b)	Client's skills, are either identified or further developed through the assistance of a counselor.
3)	Advanced empathy	c)	enables each individual to understand his abilities and interests, and relate them to life-goals, to reach a state of competence.
4)	Enhancement Goals:	d)	refers to the decision, one-sided or mutual, to stop counseling
5)	Humor	e)	is a process of applying psychological methods based on systematic knowledge of the human personality in attempting to improve the mental health of the latter.
6)	Counseling	f)	is a process of helping a client explore themes, issues, and emotions new to his or her awareness.

1.9 LET US SUM UP

Counseling is the heart of the counselor's activity. It aims at helping the clients understand and accept themselves as they are so that they are able to work towards realising their potential.

Counseling may occur in any setting but some circumstances are more likely than others to promise its development. Counselors need to be aware of the physical setting in which the counseling takes place. Clients may adjust to any room, but certain qualities about an environment such as the seating arrangements, proximity between client and counselor make counseling more conducive.

Counselor seeks to identify and explore the client's problem with the objective of establishing counseling goals. Goals need to be established as it provides a sense of direction and purpose in the counseling process.

The counseling process initially focuses on relationship establishment. Certain qualities of counselor such as conveying of empathy, positive regard, being open-minded may enhance the counseling relationship. The counselor with the client explores the reasons for seeking help. Such disclosures leads to the planning and problem solving stage and finally to the applying of the solution and termination of the counseling relationship. Although these stages tend to blend into each other, they serve as a guide to a logical sequence of events for the counseling process. The effective application of the process is dependent upon the counseling skills of the counselor.

1.10 UNIT END QUESTIONS

1) Define Guidance and Counseling. Point out the differences between the two.
2) Briefly explain the characteristics of a counseling set up.
3) Why is it necessary to possess certain characteristics to become an effective counselor?
4) What are the nonverbal indicators that reflect that the counselor is attentive towards the client?
5) What are the goals of Counseling?
6) Discuss the role of counselor in the counseling process.
7) Why is it important to have counseling goals?
8) What characteristics one should possess to become good counselor.

1.11 SUGGESTED READINGS

Belkin, G.S. (1986). *Introduction to Counseling*. Brown Publishers U.S.A.

Gibson, R.L. & Mitchell, M.H. (2005). *Introduction to Counseling and Guidance*. Pearson Education.

Gladding, S.T. (1996). *Counseling A Comprehensive Profession*. Prentice Hall U.S.A.

Lakshmi, K.S. (2000). *Encyclopaedia of Guidance and Counseling*. Mittal Publications, New Delhi.

Patri, V R. (2001). *Counselling Psychology*. Authorspress New Delhi.

Rao, S.N. (1995).*Counseling and Guidance*. Tata McGraw-Hill Publishing Company Ltd. New Delhi.

1.12 ANSWERS TO SELF ASSESSMENT QUESTIONS

Fill in the Blanks

Cognitive

30 to 39

affective

Psychological

motivational, educational and evaluative,

Open-mindedness

Empathy

Match the following

1c, 2d, 3f, 4b, 5a, 6e.

UNIT 2 INDIVIDUAL AND GROUP TECHNIQUES IN COUNSELING AND GUIDANCE

Structure

2.0 INTRODUCTION

Counseling is a process that involves interpersonal relationships and helps the clients to become more self-directive and self-responsible. Though Counseling began as a person to person relationship, group counseling too has a long and distinguished history. Joseph Hersey Pratt is generally credited for starting the first counseling group with tuberculosis patients in 1905. With over 200 approaches to counseling, counselors have a wide variety of theories to choose.

Effective counselors scrutinise theories for its effectiveness and match them to personal beliefs about nature of people and change.

Most counseling approaches fall within four broad categories and each category comprises of several theories:

1) **Psychodynamic:** It comprises of classical psychoanalysis given by Sigmund Freud and Adlerian counseling and aims at developing client's insight into his/her unconscious.
2) **Affective:** It focuses on making an impact on clients' emotions to bring about change. Prominent affective theories are:
   i) Person centered counseling,
   ii) Existential counseling and
   iii) Gestalt therapy.
3) **Behavioural:** It uses learning principle to replace maladaptive behaviour with adaptive behaviour.
4) **Cognitive:** Cognitive approach focuses on the thinking pattern and its influence on the behaviour and feelings. Best known cognitive theories are Rational Emotive therapy Reality therapy, Cognitive therapy and Transactional Analysis.

Description of all the counseling theories is beyond the scope of this unit. Therefore an attempt has been made to discuss at least one theory from each approach to provide and give an overview of major counseling theories.

2.1 OBJECTIVES

After completing this unit, you will be able to:

- Delineate different approaches to counseling;
- Explain these approaches in regard to human behaviour;
- Elucidate different techniques used in each approach to address psychological issues; and
- Explain the Process of Individual and group counseling.

2.2 THEORETICAL APPROACHES OF COUNSELLING

2.2.1 Psychodynamic Approach

Psychoanalysis

Psychoanalysis was developed in the late 1800s and early 1900s by Austrian neurologist Sigmund Freud. The psychoanalytic perspective maintains certain assumptions about human behaviour and psychological problems.

Human behaviour is influenced by intrapsychic (within the mind) drives, motives, conflicts, and impulses, which are primarily unconscious.

Various adaptive and maladaptive ego defense mechanisms are used to deal with unresolved conflicts, needs, wishes, and fantasies that contribute to both normal and abnormal behaviour.

Conflicts between conscious view of reality and unconscious (repressed) material can result in mental disturbances such as anxiety, depression etc.;

Beside the inherited constitution of personality, early experiences and relationships, such as the relationship between children and their parents, play a critical and enduring role in psychological development and adult behaviour.

2.2.2 Role of the Counselor

To encourage the clients to talk whatever comes o their mind, especially the childhood experiences.

Help clients to gain insight by reliving and working through the unresolved past experiences that come into focus during sessions.

Encourage transference in order to help clients deal realistically with unconscious material.

Goals

Goals of psychoanalysis vary according to clients but the focus is mainly to reconstruct the basic personality of the client.

Primary goal is to help the client become aware of the unconscious aspect of his/her personality. The unconscious comprise of repressed memories or wishes that are painful and threatening and the client is unable to handle it.

Help client work through a developmental stage not previously resolved. Working through unresolved developmental stage requires major reconstruction of the personality. Once these conflicts are resolved client become more productive human being.

Strengthen the ego so that behaviour is based more in reality (ego) and not on the instinctual cravings that the id wants to express.

Techniques

1) **Free Association:** Psychoanalysts make the client lie on a couch and remains out of view (usually seated behind the clients head and motivates them to recall early childhood memories or emotional experiences.

The clients speak whatever comes to the mind even if it seems silly, irrational or painful. The analyst maintains an attitude of emphatic neutrality all through the session, maintaining a non-judgmental stance, without appearing seemingly unconcerned. At times the clients resist free association by blocking their thoughts. The analyst attempts to help clients work through their resistance by assuring that even trivial thoughts are important and needs to be expressed with a goal of leading the client toward better insights of the hidden dynamics.

2) **Dream Analysis:** In Freud's view dreams are the fulfillment of a repressed wish and are main avenue to understand the unconscious. Dreams are made by latent thoughts and manifest content. The manifest content is what the client reports and latent content is the unconscious meaning of the dream.

The therapist works to uncover the disguised meanings that are in the dream through dream interpretation include

1) Has the client associate to the elements of the dream in the order in which they occurred.

2) Make the client associate to a particular dream element.

3) Disregard the content of the dream, and ask the client what events of the previous could be associated with the dream.

4) Avoid giving any instructions and leave the client to begin.

The analyst uses the clients association to find the clue to the workings of the unconscious mind.

Analysis of Transference: Transference is the process whereby emotions are passed on or displaced from one person to another; during psychoanalytic therapy the displacement of feelings toward others (usually the parents) is onto the analyst. Transference analysis is one of the basic methods in Freudian psychoanalysis. The analyst encourages the transference and interprets the positive or negative feeling expressed. The release of the feelings is therapeutic and moreover the analysis increases the clients self knowledge.

Analysis of Resistance: Resistance occurs when a client becomes reluctant to bring unconscious or repressed thoughts to the surface and explore then. Once to therapeutic process may take many forms such as missing appointments, being late for appointments, persisting in transference, blocking thoughts during free association or refusing to recall dreams or early memories. The counselor immediately needs to deal with resistance as it helps clients gain insight into it as well other behaviours. The counselor educates the client about how to better work with the unconscious material as opposed to resist it. If resistance is not dealt with the therapeutic process might come to a halt.

Interpretation: The analyst provides the client with interpretation about the psychological events that were neither previously understood by the client nor were meaningful. Psychoanalytic interpretation encompasses explanations and analysis of clients' thoughts feelings and actions, meaningful statement of current conflicts and historical factors that influence them. Interpretations must be well timed. If it is employed early it may drive away the client as the client may not be prepared because of anxiety, negative transference or stress. On the other hand if it is not used at all or used infrequently the client may fail to develop insight. The proper timing of interpretation requires great clinical skill.

2.2.3 Affective Approach

Gestalt Therapy

Gestalt counseling is an existential/experiential form of counseling that emphasises personal responsibility, and that focuses upon the individual's experience in the present moment. The word 'gestalt' means whole figure. Gestalt counseling is associated with Gestalt psychology, a school of thought that emphasises upon perception of completeness and wholeness. The approach was popularised by Fritz Perls in 1960's.

Gestalt thinking stresses the importance of one's relationship to the environmental field. In Gestalt view an individual cannot be understood in isolation. Since people are continually engaged with their environment, they are fully comprehendible only when viewed in context. An individual is seen as part of an ever-changing field which includes not only one's immediate surroundings but also his or her culture, beliefs, and past experiences.

At any particular moment an individual's attention is devoted to exactly one primary figure from the field; the ignored and undifferentiated remainder of the field is called the background, but it is vital that the individual experiences that figure with full awareness, for if the individual fails to completely express feelings in the present, the unexpressed emotions would recede into the background as unfinished business, exerting a harmful influence and causing self-defeating behaviour

Gestalt thinking also emphasises upon the present moment, "now", as what an individual feels and perceives in the "now" is far more significant than explanations and interpretations of the past. Similarly, how someone behaves in the present is of more importance than is understanding why he or she behaves that way.

Gestaltian thinking teaches that individuals only know what they experience. Therefore to learn or to solve a problem an individual must discover something in his/her field, which can be of help. The whole of the human experience is greater than the sum of its parts, and any individual is meant to experience this wholeness rather than encountering its components in a piecemeal fashion.

As per Gestalt thinking a well adjusted individual is the one who has the capacity to organise his or her field into well-defined obligations which can be dealt with appropriately. He or she revels in the now, living it fully, making choices, freely experiencing and expressing emotion, and leaving behind no unfinished business. This self-awareness leads to the realisation of happiness, fulfillment, and wholeness.

Gestalt model emphasises, that dysfunction occurs when the natural flow of the figure/background process is disrupted. Unfinished business is the result of figures receding into the background before they are completely experienced and dealt with in the now. Painful feelings, never fully and properly expressed, lurk in the background and grow stronger as time passes. Eventually they grow powerful enough to hinder an individual's present moments, and self-defeating behaviour results. This condition persists until the person finally faces and deals with the unfinished business.

2.2.4 Role of the Counselor

The role of the counselor is to create an atmosphere that promote's client's exploration of what is needed in order to grow as it is believed that the clients ultimately change through their own activities. The counselor works towards restoring the personality to its gestalt, its organised whole by being honest and personally and intensely involved with the clients. Counselor tries to help the client better understand the relationship between himself or herself and his/her environment. i.e. awareness of now.

Gestalt counselors follow several rules while helping client become more aware of the now:

The principle of now: Always using the present tense.

I and thou: always addressing someone directly instead of talking about him or her to the counselor.

The use of I: substituting the word I for it especially when talking about the body.

The use of an awareness continuum: focusing on HOW and WHAT rather than WHY.

The conversion of Question: Asking Client to convert question into statements.

2.2.5 Goals

Gestalt counselling is an existential encounter between people, out of which clients tend to move in certain directions. As an outgrowth of genuine therapeutic encounter it is expected that clients would move towards increased awareness of themselves, be cognisant of every aspect of the present moment, every sensation and emotion, every facet of the environment, and fully experience and respond to every situation in the now

Gradually assume ownership of their experience

- Become more aware of all their senses
- Learn to accept responsibility for what they do, including accepting the consequences of their actions.
- Therapeutic relationship help clients resolve the past (unfinished business) in order to become integrated.

2.2.6 Techniques

The Gestaltian therapist engages in a dialogue with his or her client, proposing both experiments for the client to perform and therapeutic exercises to be used as interventions. Experiments are creative and spontaneous, with a particular outcome neither expected nor encouraged. For example, a client may be asked to engage in a seemingly odd activity such as "becoming" an object from a dream. Experiments force the client to face emotions in the present. Exercises are ready-made techniques such as role-playing and face-to-face encounters between group members. Again, the goal is to elicit emotions and thereby raze the barriers preventing resolution of unfinished business.

Dream work: Dreams are considered to be the messages that represent a person's place at the certain time. Dreams are not interpreted as in psychoanalysis rather

the client's present dreams and are then directed to experience what it is like to be each part of the dream. In this way, the clients get in touch with the more multiple aspects of the self. A person with repetitive dreams is encouraged to realise that there is some unfinished business that is being brought into awareness.

Empty Chair Technique: In this procedure, the clients talks to their various parts of their personality (dominant and passive part). A client may simply talk to an empty chair considering it to be a representative of one part of the self. The client may switch from chair to chair as a representation of different parts of personality. Through this exercise both rational and irrational parts of the clients comes into focus and enables him or her to deal with the dichotomy within the self.

Confrontation: Counselors point out to client's incongruent behaviours and feelings. Confrontation involves asking clients WHAT and HOW questions instead of WHY.

Making the Rounds: It is implemented when the counselors feel that a particular theme or feeling expressed by a client should be faced by every person in the group. For example the client may say "I can't stand anyone." Then the client is instructed to say this sentence to each individual in the group, adding some remarks about each group member. The rounds exercise is very flexible and may include non verbal and positive feeling too. Through this exercise the client becomes more aware of inner feelings.

I take responsibility: The client makes statement about perception with the phrase "and I take responsibility for it" the exercise helps client integrate and own perception and behaviour.

Loosening and integrating techniques: Often the patient is so fettered by the bonds of the usual ways of thinking that alternative possibilities are not allowed into awareness. This includes traditional mechanisms, such as denial or repression, but also cultural and learning factors affecting the patient's way of thinking. One technique is just to ask the patient to imagine the opposite of whatever is believed to be true.

Role Playing: In this clients are asked to play the other persons role. For example asking a client to be his mother and say what his mother would say if he/she comes back at 2.00 a.m. In this way the client develops full awareness of himself and others.

Enactment: Here the patient is asked to put feelings or thoughts into action. For example, the therapist may encourage the patient to "say it to the person". "Put words to it" is another example. The patient with tears in his eyes might be asked to "put words to it." Enactment is intended as a way of increasing awareness, not as a form of catharsis.

Exaggeration is a special form of enactment: A person is asked to exaggerate some feeling, thought, movement, etc., in order to feel the more intense (albeit artificial) enacted or fantasized vision. Enactment into movement, sound, art, poetry, etc., stimulates both creativity and is therapeutic. For instance, a man who had been talking about his mother without showing any special emotion was asked to describe her. Out of his description came the suggestion to move

like her. As the patient adopted her posture and movement, intense feelings came back into his awareness.

May I feed you a sentence? : The counselor who is aware that certain implicit attitudes or messages are implied in whatever the client is saying, ask if the client will say a certain sentence provided by the counselor that make the clients thought explicit. If the counselor is correct the client will gain insight.

2.2.7 Behavioural Counselling

The behavioural approach has developed from a strong scientific base, starting with Pavlov's early work on classical conditioning. Other major influences on the development of behaviour therapy have been Skinner's work on operant conditioning and Bandura's work on observational or social learning.

The behavioural approach focuses on overt (i.e., observable) behaviours acquired through learning and conditioning in the social environment. Basic assumptions of behavioural approach include that all behaviour is learned whether adaptive or maladaptive. Maladjusted person is one who has

a) failed to acquire competencies required for coping with the problems of living or;

b) has learned faulty reactions or coping patterns that are being maintained by some kind of reinforcement.

Behavioural perspectives include principles of operant conditioning, classical conditioning, and social learning.

i) **Classical Conditioning:** This refers to the changing of the meaning of a stimulus through repeated pairings with other stimuli.

ii) **Operant Conditioning:** In this type of conditioning the person's actions produce a consequence that either increases or decreases the probability of the recurrence of behaviour.

iii) **Social Learning:** In this form of learning an individual acquire new behaviour by observing other people and events.

2.2.8 Role of the Counselor in Behavioural Counselling

Behavioural counselor is active in counseling sessions and involves the client in every phase of counseling .The client learns, unlearns, or relearns specific ways of behaviour. In that process the counselor functions as a consultant teacher adviser, reinforcer and facilitator.

2.2.9 Goal of Behavioural Counselling

The goal of behavioural counseling is to modify or eliminate maladaptive behaviour and help clients acquire productive behaviour.

2.2.10 Techniques

Behavioural counseling is the most technique oriented of all counseling approaches.

1) **Contingency Management**

The behaviour to be performed, changed or discontinued and the rewards associated with the achievement of these goals are stated.

2) **Token Economy**

It is based on operant conditioning in which desired behaviours necessary for day-to-day functioning are specified and a unit of exchange (the token) is presented to the client contingent upon the occurrence of the desired behaviours. The tokens accumulated can be exchanged for other objects or privileges.

3) **Shaping**

It is a form of operant conditioning in which rewards are given for successive approximations towards the desired new behaviour e.g. a mentally retarded child dressing himself. The desired behaviour is broken into many steps, and often the therapist also acts as a model for the child to follow. It is a laborious process, and used only if a new behaviour is totally absent from the patient's repertoire.

4) **Modelling**

It refers to the acquisition of new behaviours by the process of imitation. The person models himself after another's behaviour.

5) **Extinction**

In extinction reinforcement is withhold/discontinued of a previously reinforced behaviour, resulting in the decrease of that behaviour. The behaviour is then set to be extinguished. In using extinction technique there is a temporary increase in the frequency, intensity, and/or duration of the behaviour targeted for extinction.

6) **Punishment**

Punishment is a process by which a consequence immediately follows a behaviour which decreases the future frequency of that behaviour. Punishment can either be positive (stimulus added) or negative (stimulus removed).

Broadly, there are three types of punishment:

Presentation of aversive stimuli such as spanking, pinching, electric shock, ammonia vapor loud or harsh sounds hair tugging etc.

Response cost

This involves the removal of a specified amount of reinforcer (for e.g. tokens) that the individual has already earned following a undesirable behaviour

Time out

This is a technique in which the individual is removed from the area where the inappropriate behaviour is reinforced. This is done either by transferring him/her to a non-reinforcing situation or removing the source of reinforcement from the present situation, for example a child is separated from classmates when he/she misbehaves.

Habit Reversal

It involves the use of a competing action, which is incompatible with the habit. A nail biter can grasp an object while a person with motor tics may be taught to contract the muscle of his upper limb isometrically.

Systematic desensitisation

This desensitisation is a form of classical conditioning in which the anxiety evoking situations are paired with inhibitory responses (relaxation), based on the premise that a person cannot feel anxious and physically relaxed at the same time, a phenomena known as reciprocal inhibition. The client is asked to describe the situation that causes anxiety and then with the help of the counselor prepare a list of anxiety evoking situations in order of intensity on a hierarchical scale of 0-100.

For example an individual may have a fear of flying in the plane and the hierarchy would comprise of driving to the airport, waiting in the lounge, boarding the plane, taking off, being in the airplane etc. To help the client overcome the anxiety the counselor teaches relaxation. After this the client is asked to imagine the least anxiety provoking situation and indicate his/her anxiety by raising index finger. Thereafter the counselor instructs the client to stop imagining the scene and relax. The full sequence is: relax, imagine, relax, stop imaging relax….. The same procedure continues for the rest of the items prepared in the list.

Exposure

This is similar to systematic desensitisation except that no attempt is made to relieve the anxiety during the period of exposure. It is based on the premise that with time, the anxiety would subside or disappear through the psychological process of habituation. The deliberate exposure aims at confronting the feared the situation instead of avoiding it. Exposure is either done gradually (graded-exposure) or the client is made to face the most feared situations all at once (flooding).

Self Assessment Questions

1) Define counseling and state the psychodynamic approach to counseling.

.....

.....

.....

.....

.....

.....

2) Elucidate the psychodynamic approach to counseling.

.....

.....

.....

.....

.....

.....

3) What is involved in affective approach in counseling?

.....

.....

.....

.....

.....

4) Describe behavioural counseling.

.....

.....

.....

.....

.....

2.3 COGNITIVE COUNSELLING

2.3.1 Rational Emotive Therapy

The basic theory and practice of rational emotive therapy was formulated by Albert Ellis in 1962. Ellis posited that thoughts influence our emotions and behaviour.

In his ABC model he explained that emotional symptoms or consequences:

A) Are determined by a person's belief systems.

B) Regarding particular activating experiences or events

C) The belief system of an individual may be either rational or irrational.

Rational belief and behaviour is viewed as effective and potentially productive, whereas irrational belief results in unhappiness and non-productivity and leads to many types of emotional problems and stand in the way of achieving goals and purposes of an individual's live. Individuals holding unrealistic beliefs and perfectionist values often expect too much of themselves leading to irrational behaviour and consequently feel worthless failures. For example a person may continually think "I should be thoroughly adequate and competent in everything I do". Such unrealistic assumptions and self demands lead to ineffective and self-defeating behaviour and an emotional response of self devaluation. Ellis identified the following irrational beliefs that might be the root of most psychological maladjustment:

i) It is absolutely essential for an individual to be loved or approved by every significant person in his environment.

ii) To be worthwhile a person must be competent, adequate and achieving in everything attempted.

iii) Some people are bad, wicked or villainous and these people should be blamed and punished.

iv) It is terrible and catastrophic when things are not in the way an individual wants them to be.

v) Unhappiness is a function of events outside the control of the individual.

vi) If something is dangerous or harmful, an individual should constantly be concerned about it.

vii) It is easier to run away from difficulties and self-responsibility than facing them.

viii) A person must depend on others and have someone stronger on whom to rely

ix) Past events in an individual's life determine present behaviour and cannot be changed.

x) An individual should be very concerned and upset by other individual's problems.

xi) There is always a correct and precise answer to every problem and it is catastrophic if is not found.

2.3.2 Goals of RET

The goal of rational emotive counseling is to reduce or eliminate irrational behaviour by restructuring the belief system and self evaluation especially with respect to the irrational "should's", "musts" and "ought's" that prevents a positive sense of self worth and emotionally satisfying life.

2.3.3 Role of the RET Counsellor

In RET approach counselors are active and direct. They teach the clients how their thinking, emotions, and behaviour are interrelated. They actively challenge, provoke and dispute the client's irrational beliefs, agree upon homework assignments which help the client to overcome their irrational beliefs, and in general 'pushes' the client to challenge themselves and to accept the discomfort which may accompany the change process.

2.3.4 Techniques of RET

In order to challenge the clients' irrational belief and to strengthen their conviction in a rational alternative the counselor employs a variety of cognitive, behavioural, emotive and imagery techniques.

1) **Cognitive Techniques**

Disputation Cognitive disputation involves the use of direct questions, logical reasoning and persuasion. Direct questions may challenge the client to prove that his/her belief is logical by asking 'why'. Such inquiries enable the client to distinguish between rational and irrational thoughts.

a) **Coping Self Statements:** By developing coping self statement rational beliefs are strengthened. For example A person fearful of public speaking may write down and repeat" I want to speak flawlessly, but it is alright if I don't.

b) **Reframing:** Re-evaluate bad events as 'disappointing', 'concerning', or 'uncomfortable', rather than as 'awful' or 'unbearable'. A variation of this procedure is to list the positives of a negative event.

2) **Emotive Techniques**

a) **Rational emotive imagery:** A form of mental practice, in which the client imagines a situation that would normally upset a great deal, to feel the inappropriately intense feelings about that event and then change them to more appropriate feelings. The client keeps practicing such a procedure 'several times a week for a few weeks' then reaches a point where he/she is no longer troubled by the event.

b) **Shame attacking exercises:** Include activities that are harmless but dreaded such as introducing oneself to a stranger, wearing loud clothes to attract attention, asking a silly question at a lecture. Through this the client learns that the world does not stop even if a mistake is made and everything need not be perfect.

3) **Behavioural Techniques**

a) **Biblio Therapy:** In this client is asked to read a self-help book.

b) **Activity Homework:** The client actually does activities he/she previously thought impossible to do. For example rather than quitting a job a client may continue to work with unreasonable boss and listen to the unfair criticism and mentally dispute the criticism.

2.3.5 Cognitive Therapy

Cognitive therapy, a system developed by Aaron Beck stresses the importance of belief systems and thinking in determining an individual's behaviour and feelings. It is based on the idea that how an individual thinks (cognition), feels (emotion) and acts (behaviour) all interact together.

Aaron Beck used the term "schemas" to describe individual's thoughts, beliefs and assumptions about the world, people, events and environment. Cognitive schema may be positive (adaptive) and negative (maladaptive). Normal reactions are mediated by positive cognitive schemas that enable individuals to perceive reality accurately.

Maladaptive cognitive schema or cognitive distortions s (i.e. inaccurate ways of thinking) leads to faulty reasoning and individuals interpret situations negatively which in turn has a negative impact on the actions they take (behaviour)leading to distress and resulting in problems.

2.3.6 Goals of Cognitive Therapy

Basic goal of cognitive therapy is to remove biases or distortions in thinking. It aims to make individuals become aware of their negative interpretations, and behavioural patterns that reinforce the distorted thinking and helps people to develop alternative ways of thinking and behaving which reduce the psychological distress, so that individuals may function more effectively.

2.3.7 Role of CT Counsellor

The counselor and client collaborate on the treatment plan and work together as partners throughout the treatment. The counselor brings an expertise about cognitions, behaviours and feelings to guide the clients in determining goals for therapy and means for reaching these goals.

2.3.8 Techniques of CT Counsellor

Cognitive Restructuring: It is done following a series of steps:

1) **Self Monitoring and Daily Diaries**

   Client is instructed to recognise how situations elicit automatic thoughts, which influences subsequent behaviours.

2) **Examining Available Evidence**

   In collaboration with counselor the client evaluates their thoughts with respect to their usefulness as well as their validity.

3) **Socratic Questioning**

   Using this method a client is made to logically analyse his/her thoughts and replace distorted thoughts with more accurate and realistic thoughts. This method helps clients revise negative thinking and beliefs and bring about more objective thinking. For this questions such as What is the evidence for the belief? What is the evidence against it? How else can you interpret the situation?

Theoretical Approaches and their respective techniques discussed above are applicable both in the individual as well as in group counseling. However the implementation of the approaches differs when employed with a group because of group dynamics (interaction of members within the group). The following section will discuss the counseling process that takes place in both individual and group setting and how different counseling approaches are applied in the group context through group leaders i.e. counselors.

Self Assessment Questions

1) Discuss cognitive counseling in terms of its approaches and techniques.

   .....

   .....

   .....

   .....

   .....

2) Describe rational emotive counseling / therapy.

   .....

   .....

   .....

   .....

3) What is cognitive therapy?

.....

.....

.....

.....

.....

4) What are the techniques and goals of cognitive therapy?

.....

.....

.....

.....

.....

2.4 INDIVIDUAL COUNSELLING PROCESS

2.4.1 Establishing Relationship with the Client

The core of the counseling process is the relationship established between the counselor and the client. The Counselor takes the initiative in the initial interview to establish a climate conducive to develop mutual respect, trust, free and open communication and understanding in general of what the counseling process involves.

Counselors main responsibility always remains to meet the clients need as much and possible. The counseling relationship seeks to assist the clients in assuming the responsibilities for his or her problem and its solution. This is facilitated by the counselor's communication skills, the ability to identify and reflect clients' feeling and the ability to identify and gain insight into the clients concerns and needs.

2.4.2 Problem Identification and Exploration

After the establishment of an adequate relationship, the clients become more receptive for in depth discussion and exploration of their concern.

Counselor with the cooperation of client tries to identify the problem as specifically and objectively as possible and begins to explore the changes that are required and obstacles that exist for these changes to materialise.

2.4.3 Planning for Problem Solving

Once the counselor determines that all relevant information regarding the client has been gathered and understood in proper perspective and client has also developed awareness and has gained insight into the fact that something needs to be done about a specific problem, counselor moves on to develop a plan in collaboration with client to remediate the concern of the client.

2.4.4 Solution Application and Termination

In this final stage the counselor encourages the client to act upon his or her determined solution of the problem. During the time the client actively involves in implementing the problem solution, the counselor maintains contact as a source of follow up, support and encouragement as the client may need the counselor's assistance in the event things do not go according to plan.

Once it is determined that the counselor and the client has dealt with the client's concern to the maximum possible extent, the counseling process is terminated.

2.5 GROUP COUNSELLING PROCESS

Group counseling provides a unique forum for individuals to make changes in their lives. Unlike individual counseling groups provide a realistic social setting in which the client interacts with peers who may be sharing the same or a similar concern and have some understanding of the problem. The counseling group allows members to be open, honest and frank about their problems and provide a situation in which it is safe to test ideas and solutions to problems. Moreover through the group process and its interactions and sharing of experiences, clients learn to modify earlier behaviour patterns and seek new, more appropriate behaviours in situations that require interpersonal skills.

2.5.1 Group Size

Ideal size of counseling group is seven or eight members with an acceptable range of five to ten members. In small group (three or four members), member interaction diminishes, and counselors often find themselves engaged in individual counseling within the group. On the other hand in large groups the intimacy and comfort diminishes and groups become less personal and more mechanical in their process. Larger groups also increase the risks that some members may be inadvertently overlooked to the extent that their needs are not satisfied.

2.5.2 Group Process

The elements of the group counseling process share much in common with those of individual counseling. These may be separated into their logical sequence of occurrence.

2.5.3 The Establishment of the Group

The initial group time is used to acquaint the new group membership with the format and processes of the group, to orient them to such practical considerations as frequency of meetings, duration of group, and length of group meeting time. Additionally the beginning session is used to initiate relationships and open communications among the participants. The counselor also may use beginning sessions to answer questions that clarify the purpose and processes of the group. The establishment of the group is a time to further prepare members for meaningful group participation and to set a positive and promising group climate.

The group counselor must remember that in the initial group sessions the general climate of the group may be a mixture of uncertainty, anxiety, and awkwardness. It is not un-common for group members to be unfamiliar with one another and uncertain regarding the process and expectancies of the group regardless of previous explanations or the establishing of ground rules.

It is important in this initial stage of group establishment for the leader to take sufficient time to ensure that" all the groups' members have their questions and concerns addressed; that they understand the process and begin to feel comfortable in the group. Of course, the impression that the group counselor makes in this initial stage is of utmost importance to the smooth and successful process of the group.

2.5.4 Identification: Group Role and Goal

Once an appropriate climate has been established that at least facilitates a level of discussion, the group may then move toward a second, distinct stage: identification. In this stage, the group identity unfolds, the identification of individual roles emerges, and group and individual goals are established jointly by the counselor and group members and are made operational. All these develop simultaneously at this stage of the group counseling process.

The early identification of goals in group counseling facilitates the group's movement toward a meaningful process and outcomes. Goals are stated in objectives that are not only measurable but are also attainable and observable and are likely to be realised in view of the group strategies planned. It is also important in this process that the sub-goals of each individual group member is recognised and responded to in turn.

Counselors need to be aware of the probable, or at least possible, conflict and confrontation that may emerge during this stage of the group's development. Yalom (2005) labels this second phase "the conflict, dominance, rebellion stage." He considers it a time when the group shifts from preoccupation with acceptance, approval, commitment to the group, definitions of accepted behaviour, and the search for orientation, structure, and meaning, to a preoccupation with dominance, control, and power. The conflict characteristic of this phase is among members or between members and leader. Each member attempts to establish his or her preferred amount of initiative and power. Gradually a control hierarchy, a social pecking order, emerges.

As members attempt new patterns of behaviour and new approaches to group goals, different perceptions as well as differences in solutions generated by the individual members may lead to a range of behaviours from normal discussions to active and open confrontation. In this stage, the counselor needs to keep the discussions relevant and prevent them group members from making personal attacks on individuals' values and integrity. The counselor should also remain alert to the possibility that silence of certain group member may be a signal of resistance rather than group compliance.

At this stage the group members might express their dissatisfaction with the group process or leadership when controversial issues are discussed or when there is a difference between the way a group member sees himself or herself and the way the group stereotypes the individual, leading to the member's challenging the reactions or impressions of the rest of the group.

However, when conflicts and confrontations occur, a more cohesive group usually emerges, resulting in increased openness in communication, consensual group action and cooperation, and mutual support among the members.

2.5.5 Productivity

As the group achieves some degree of stability in its pattern of behaving, and the members become more deeply committed to the group, and ready to reveal more of themselves and their problems productivity process begins.

This sets the stage for problem clarification and exploration, usually followed by an examination of possible solutions.

In this regard, the group counselor clarifies the individual and group concern. This clarification includes a thorough understanding of the nature of the problem and its causes. Next along with the group members the counselor identifies what the group desires to accomplish, examines all possible solutions in terms of their consequences and also whether it is capable of being realised (obtainable). Finally the group members employ the chosen solution to achieve the desired outcomes. In this entire process, by making their own decisions members establish their ownership of the problem and the chosen solution.

2.5.6 Realisation

By the time group members reach this stage they recognise the inappropriateness of their past behaviours and begin to try out the selected solutions or new behaviours, making progress toward realising their individual goals. They take responsibility of acting on their own decisions. The counselor at this point encourages the sharing of individual experiences and goal achievement both inside and outside the group. Although success with the new behaviours may provide sufficient reinforcement for many members to continue, for others a support base of significant others outside the group needs to be developed in order to help them maintain the change once the counseling group is terminated.

2.5.7 Termination

Termination may be determined by the counselor or by the group members and the counselor together'. Termination, like all other stages of the group counseling experience, requires skill and planning by the counselor. It is most appropriate when the group goals and the goals of the individual members have been achieved and new behaviours or leanings have been put into practice in everyday life outside the group.

At times the group members resist termination of a counseling group and continue indefinitely as the counseling group provides a base for interpersonal relationships, open communication, trust, and support. Therefore it becomes important that from the very beginning the group counselor keeps on emphasising the temporary nature of the group and establish, if appropriate, specific time limitations and reminds the group, of the impending termination as the time approaches.

Under less favorable circumstances, groups may be terminated when their continuation promises to be nonproductive or harmful, or when group progress is slow and long-term continuation might create over dependency on the group by its members.

The point of termination is a time for review and summary by both counselor and clients. Some groups will need time to allow members to work through their feelings about termination. Even though strong ties may have developed along

with pressures from the group to extend the termination time, those pressures must be resisted, and the group must be firmly, though gently, moved toward the inevitable termination.

Self Assessment Questions

1) Discuss individual counseling process.

.....

.....

.....

.....

.....

2) How problem identification and exploration is take place in this process?

.....

.....

.....

.....

.....

3) Describe the group counseling process.

.....

.....

.....

.....

.....

4) Elucidate the process of establishing the group.

.....

.....

.....

.....

.....

5) What are the methods to ensure productivity in a group?

.....

.....

.....

.....

.....

6) Differentiate between individual and group counseling processes.

.....

.....

.....

.....

.....

2.6 GROUP LEADERS OF DIFFERENT THEORETICAL STANCE

In groups led by counselors with a *psychoanalytic* theoretical orientation, the counselor understands that within the group context each member re-experiences emotionally and repeats behaviourally his/her early childhood experiences and needs that were not met. They try to find satisfaction in the group through in much the same way they tried earlier and failed. The psychoanalytic group leader teaches the individuals "how" to satisfy the needs in an appropriate and effective way. The leader is also sensitive to the phenomena of group transference as a whole and individual transference occurring simultaneously within the group. The counselor interprets transference and resistances in order to free the client's unconscious. The analysis, focus on the behaviour of both the individual members of the group and/or the behaviour of the group as a whole.

2.6.1 The Behavioural Counsellor

The *behavioural* counselor in the group setting proceeds to systematically identify the members' problems in behavioural terms and establish behavioural objectives for members. Behavioural objectives are accomplished either through modeling or reinforcement paradigm. The group provides rich behavioural resources and the group leader identifies new appropriate behaviour which may be beneficial for group members and help the members of the group to learn productive behaviour by observing (modeling) other members of the group or the leader himself. In Behaviourally oriented group, groups are also used to dispense reinforcement. Peer pressure is used either to encourage or discourage certain specified behaviours. Behavioural group leader may help the members learn to give or withheld reinforcement's thereby making the consequences of an individual's behaviour dependent on the group as well as on the individual. This is known as group contingencies. This practice teaches the value of cooperation to group members.

2.6.2 The Rational Emotive Therapist

In group counseling the *rational-emotive* therapist, is prominent in promoting client change. Within the group, members help each other in identifying illogical, emotionally driven behaviours and the counselor seeks to bring about cognitive and rational behaviour change through reason, persuasion, role-playing, and so forth.

2.6.3 Gestalt Therapist

Gestalt therapy focuses on the integration of the person "getting it all together". It emphasises that a person's experiences form a meaningful whole when there

is a smooth transition between those set of experiences which are immediately within the focus of awareness (figure) and those that are in the background. The gestalt group, work towards this end by using some member's perceptions of themselves and others as catalyst for changing other member's cognition of themselves and others in the group.

2.6.4 Cognitive Therapist

Cognitive oriented group leader perceives that the group setting provides diverse emotional, social, and intellectual opportunities to the group member for enriched experiences. Group interactions increase their ability to use their logical processes in order to arrive at a better understanding of the world and of themselves.

2.7 SIMILARITIES: INDIVIDUAL AND GROUP COUNSELING

The objectives of both techniques are similar i.e. helping the counselee achieve self integration, self-direction and responsibility.

In both the techniques the counselor presents an accepting, permissive climate for the clients to participate freely such that their defenses are reduced.

Both techniques aim at clarifying feelings, restatement of content, and the like. The counselor helps the client to become aware of their feelings and attitudes and also to examine them.

Both approaches provide for privacy and confidentiality of relationship.

2.8 DIFFERENCES: INDIVIDUAL AND GROUP COUNSELING

Individualised counseling is a one to one, face to face relationship marked by intimacy, warmth and rapport between the counselor and counselee. In group counseling there is the physical proximity of other members with perhaps similar problems. The client may obtain solace from the knowledge that he is not only one with problems and that there are others who have similar problems.

In group counseling unlike in individualised counseling, the counselees not only receive help but also give help to others. The more cohesive the group, the more are the members able to help one another. This cooperative feeling brings the members closer, which in turn helps in facilitating the mutual expression of feelings.

The counselor's task is somewhat more complex in group counseling. He has not only to follow sense and appreciate what a member says but also how this affects other members and their reactions. The counselor in a group counseling situation has more demands to meet and satisfy.

2.9 LET US SUM UP

In this unit we dealt with counseling and its definition and characteristics. Then we took up counseling and discussed the theoretical approaches which included

psychodynamic approach, affective approach to counseling, and behavioural counseling. In regard to all the three approaches, we also presented the role of the counsellor in each of these approaches, the goals of each of the approach and the techniques thereof. Then we took up in the next section cognitive counselling, explained what it is and under its rubric we discussed the rational emotive therapy, the goals of this therapy and the role of the rational emotive counsellor. Then we discussed the cognitive therapy, its goals and the role of counsellor using cognitive approach. We then discussed the techniques of cognitive therapy. We then elucidated the individual counseling processes within which we discussed establishing relationship with the client, how to identify and explore the problems faced by the client, how to plan and solve the problem systematically etc. This was followed by the group counseling process. In this we discussed the size of the group, the process of the group, and how to establish the group, the methods to identify the group goal, the productivity and termination of the group therapy. Then we discussed the leaders of different theoretical stance under which we presented the behavioural counsellor, the rational emotive therapist, gestalt therapist and cognitive therapist. This is followed by similarities and differences between the individual and group counseling.

2.10 UNIT END QUESTIONS

1) What are the learning principles on which behavioural approach is based? Describe the various behavioural techniques briefly.
2) Describe the techniques used by a psychoanalytic counselor to achieve counseling goals.
3) What are irrational beliefs that cause psychological problems? Discuss the techniques used by a rational emotive counselor to dispute the irrational beliefs.
4) Explain the Group process of counseling. How do counselors of different theoretical orientation differ in leading the group?
5) Describe briefly the Cognitive approach of counseling.
6) Explain the Gestalt conceptualisation of psychological problems. What are the goals and techniques used in Gestalt counseling?

2.11 SUGGESTED READINGS

Belkin, G.S. (1986*). Introduction to Counseling.* Brown Publishers U.S.A.

Corey,G.(2001).*Theory and Practice of Counseling and Psychotherapy*. Brooks/ Cole. Thomson Learning. U.S.A.

Gibson, R.L. & Mitchell, M.H. (2005). *Introduction to Counseling and Guidance*. Pearson Education.

Gladding, S.T. (1996). *Counseling A Comprehensive Profession*. Prentice Hall U.S.A.

UNIT 3 COUNSELING AND GUIDANCE FOR CAREER PLANNING AND DECISION MAKING

Structure

3.0 INTRODUCTION

In this unit we will be dealing with counseling and guidance for career planning and decision making. We start with definition and description of counseling and guidance. Then we take up career planning and within this present the inter relationship between counseling and career planning followed by presenting of inter relationship between guidance and career planning. Then we take up decision making and within this we put forward two principles viz., declaring a decision and working a decision. Within declaring a decision we discuss the framing of the decision, the right people and the right choice to make. Following this we take up working a decision within which we discuss a complete set of alternatives, values against which to make trade off and information that describes the value of each alternative.

3.1 OBJECTIVES

After completing this unit, you will be able to:

- Define counseling and guidance;
- Differentiate between counseling and guidance;
- Explain the concept of career planning;
- Elucidate the relationship between counselling and career planning;
- Explain the relationship between guidance and career planning; and
- Discuss and understand the process of decision making.

3.2 COUNSELING AND GUIDANCE

Counselling is a process that focuses on enhancing the psychological well being of the client, such that the client is then able to reach their full potential. This is achieved by the counsellor facilitating your personal growth, development, and self understanding, which in turn empowers you to adopt more constructive life practices.

The purpose of guidance is to provide 'learning experiences to enable clients to acquire knowledge, skills and competencies related to making personal, educational and career decisions'

Guidance includes, but is not limited to, educational guidance and counselling services staffed by trained professionals.

Career planning is a lifelong process, which includes choosing an occupation, getting a job, growing in our job, possibly changing careers, and eventually retiring. We will focus on career choice and the process one goes through in selecting an occupation. This may happen once in our lifetimes, but it is more likely to happen several times as we first define and then redefine ourselves and our goals.

Career development and the career planning process include a number of specific steps that help to identify personal skills and attributes. Finding out how those skills can be utilised in the job market is accomplished by researching a number of career fields that are of interest to you and then by gaining experience in those fields and/or speaking to people currently working in the field.

Career counselors provide mainly career counseling outside the school setting. Their chief focus is helping individuals with career decisions. Vocational counselors explore and evaluate the client's education, training, work history, interests, skills, and personality traits. They may arrange for aptitude and achievement tests to help the client make career decisions. They also work with individuals to develop their job search skills and assist clients in locating and applying for jobs. In addition, career counselors provide support to people experiencing job loss, job stress, or other career transition issues.

Career guidance refers to services and activities intended to assist individuals of any age and at any point throughout their lives, to make educational, training and occupational choices and to manage their careers. Such services may be found in schools, universities and colleges, in training institutions, in public employment services, in the workplace, in the voluntary or community sector and in the private sector. The activities may take place on an individual or group basis and may be face to face or at a distance.

A decision is a choice between two or more alternatives. If you only have one alternative, you do not have a decision.

Decision making can be regarded as the mental processes (cognitive process) resulting in the selection of a course of action among several alternative scenarios. Every decision making process produces a final choice. The output can be an action or an opinion of choice.

3.2.1 Counselling

Counselling is a process that focuses on enhancing the psychological well-being of the client, such that the client is then able to reach their full potential. This is achieved by the counsellor facilitating your personal growth, development, and self-understanding, which in turn empowers you to adopt more constructive life practices.

In simple terms, counselling involves one person (the counsellor) helping another person (the client) to work through some difficult or painful emotional, behavioural or relationship problem or difficulty. That is the form of individual counselling.

Counselling may be helpful in a number of ways. It can enable you to develop a clearer understanding of your concerns and help you acquire new skills to better manage personal and educational issues. The counsellor can offer a different perspective and help you think of creative solutions to problems. Sharing your thoughts and feelings with someone not personally involved in your life can be most helpful.

1) **Confidentiality**

The counsellor treats all the information shared by the client as confidential material. The counsellors are involved in case consultations and supervision for the purposes of best practice. These meetings involve discussion of clients concerns with the aim of formulating the best possible assessment and intervention plan. Where possible, the identifying personal information is removed from the discussion.

Counselling takes place in a confidential meeting, in a quiet room, and is subject to a code of ethics which specifies what the counsellor can and cannot morally do in that context.

2) **Restrictions on the Release of Information**

Information that client share with the counsellor will not be released to anyone outside without their prior written permission, except under certain unusual and rare circumstances where the well being of client matters. Client is free to discuss any concerns regarding confidentiality with the counsellor.

3) **The Counselling Process**

The counselling process depends upon the individual counsellor, the individual client and the specific issue. However, there is a general counselling process that the counsellors will follow:

- Background information collection
- Identification of core issues
- Case formulation
- Goal setting for the therapeutic process
- Implementation of intervention
- Evaluation of intervention
- Closure

No further counselling is required at this time, if during the initial interview you have been able to clarify your concerns and plan an appropriate course of action.

Further appointments are needed to continue to explore the issues before reaching a decision. A second appointment will be made with client by the counselor.

Alternative services are appropriate and the counsellor will assist the client to identify specific resources to consider and pursue.

4) **Differing Counselling Approaches**

Counsellors work from differing theoretical approaches. Different counsellors will place varying levels of emphasis on behaviour, on thinking and/or on emotional aspects. All counsellors have the central goal to assist the client in increasing your sense of well-being.

5) **Length of Counseling**

Change does not happen quickly for most of us. The length of treatment depends on a number of variables. Variables include: the severity of the problem, the motivation of the client, the type of problem and the age of the client. The more focused and limited the problem being addressed, the shorter treatment can be. The more the treatment addresses healing emotional injuries, the longer it is likely to take.

3.2.2 Guidance

The purpose of guidance is to provide 'learning experiences to enable clients to acquire knowledge, skills and competencies related to making personal, educational and career decisions' (Clark, 1999, p. 10)

Guidance includes, but is not limited to, educational guidance and counselling services staffed by trained professionals. It can also include:

- Human resource development (HRD) work
- Assessment processes and appraisals by managers
- Advice and guidance from managers
- Advice and guidance from shop stewards or other trade union representatives
- Guidance which is a part of educational or training courses, both in-service and provided externally
- Peer guidance and counselling, carried out by fellow-employees etc.
- Mentoring by appointing a more experienced person who can listen, advise and give feedback when the mentee asks for this
- Self-assessment methods (paper or electronic)
- Information resources such as careers libraries
- Telephone helplines.

The activities of guidance that can be carried out or organised by employers include:

- Giving information on learning opportunities;
- Giving advice on the choice of learning opportunities;
- Assessing the educational and training needs of individual employees;
- Counselling to examine barriers to learning and ways to overcome these;
- Careers education in the sense of suitable courses to help employees progress within the firm;
- Referral to other agencies, including professional guidance services;
- Feedback to learning providers on courses needed and the suitability of those already on offer;
- Follow-up to find out what decisions were taken and what progress was made by individual employees.

Self Assessment Questions

1) Fill in the blanks

   a) Counselling involves _____person helping another person.

   b) Counselling takes place in a _____ meeting and in a quiet room.

   c) Counselling is a process that focuses on enhancing the _____ well-being of the client.

   d) The counselling process depends upon the _____ counsellor.

   e) _____ education in the sense of suitable courses to help employees progress within the firm.

3.3 CAREER PLANNING

Career planning is a lifelong process, which includes choosing an occupation, getting a job, growing in our job, possibly changing careers, and eventually retiring. We will focus on career choice and the process one goes through in selecting an occupation. This may happen once in our lifetimes, but it is more likely to happen several times as we first define and then redefine ourselves and our goals.

Career development and the career planning process include a number of specific steps that help to identify personal skills and attributes. Finding out how those skills can be utilised in the job market is accomplished by researching a number of career fields that are of interest to you and then by gaining experience in those fields and/or speaking to people currently working in the field.

The career planning process is comprised of four steps. Whether or not you choose to work with a professional, or work through the process on your own is less important than the amount of thought and energy you put into choosing a career.

Career planning means know about yourself, explore your options, make decisions and move towards your goal.

1) **Self**

Evaluate who you are as a person. This involves taking a personal inventory of which you are and identify your individual values, interests, skills, and personal qualities. What makes you tick as a person? You will look at those personal attributes under a microscope and come up with key qualities you can identify and use in your search for the perfect career. Career assessments may be required to promote a better understanding of personal attributes and skills.

The individual should gather information about oneself. That is self assessment in terms of their interests, values, roles, skills / aptitudes, preferred environments, developmental needs and their realities.

2) **Options**

The individual should be able to explore the various occupations in which they are interested. The exploration should be in each and every field the individual is interested and keen. After the area of occupation is chosen, the research or a survey on industries and labor market should be done to see in which they would like to work.

Once the individual is clear about the specific information on the area to be chosen, he / she can go in for part time work, internships and can also go in for volunteering jobs or opportunities.

3) **Match**

After the option is clear to the individuals, they will be able to identify the possible occupations and evaluate the opportunities within that occupation. The individual can explore the alternatives available, and thus chose both a short term and long term option.

4) **Action**

The individuals in order to reach and achieve their goal have to explore and investigate the sources for additional training and education. They would have to develop a job search strategy, write an effective resume, gather information regarding company and prepare themselves for job interviews.

3.3.1 Interrelation between Counseling and Career Planning

Career planning is a process in which an individual decides and chooses an occupation of his / her interests with the help of counselor. Counsellor helps the individual to realise, explore and analyse within themselves, their interest and their capability.

Career counseling is an interactive process by which counselors and clients exchange and explore information concerning clients' backgrounds, experiences, interests, abilities, self esteem, and other personal characteristics that help or inhibit their work readiness and career planning. Career counseling is a systematic approach to providing information and advice to clients in such areas as outreach programs, training, internships, apprenticeships, and job placement.

Although the career counselor's primary concern is the client's career development, counselors also may provide screening and referral services to employers. Counselors use information gathered through assessment to understand and respond to clients' needs and concerns. Clients use this information to understand themselves better, clarify their goals and perspectives, and make plans for the future.

Counselors provide individuals and groups with career and educational counseling. Counselors use interviews, counseling sessions, interest and aptitude assessment tests, and other methods to evaluate and advise their clients. They also operate career information centers and career education programs. Often, counselors work with students who have academic and social development problems or other special needs.

Career counselors provide mainly career counseling outside the school setting. Their chief focus is helping individuals with career decisions. Vocational counselors explore and evaluate the client's education, training, work history, interests, skills, and personality traits. They may arrange for aptitude and achievement tests to help the client make career decisions. They also work with individuals to develop their job-search skills and assist clients in locating and applying for jobs. In addition, career counselors provide support to people experiencing job loss, job stress, or other career transition issues.

Counselors help the individual to plan their career in a structured manner.

The process begins with self assessment. Steps involved by counselor in a Career Planning Process are:

Step One: Self Assessment

The first and foremost step in career planning is to know and assess yourself. You need to collect information about yourself while deciding about a particular career option. You must analyse your interests, abilities, aptitudes, desired lifestyle, and personal traits and then study the relationship between the career opted for and self.

Self assessment involves the close examination of core interests, personality traits, skills, values, and beliefs. These are all important variables in the decision-making process; they reflect your innermost needs and desires, and, most importantly, will lead you to favour some occupational fields over others.

Once self assessment is complete, you may begin generating and exploring a wide range of career options. By obtaining information, you will be able to sort through your initial list of occupations and reduce the options to your most favoured ones. To focus on the most appealing career option, you need to access detailed information by engaging in a more rigorous research endeavour.

This step involves exploring the options on your list by obtaining occupational information, such as education and training required to enter into the field, job tasks, and salary potential. It is at this point that you will be ready to decide on the most promising career option that matches your profile most closely and that affords you the greatest chances of succeeding. Keep in mind that it is also important to identify a few back up choices.

You will then set up an action plan that will outline the next most crucial steps for you to take in meeting your educational and / or occupational goals.

Finally, evaluate the outcomes of your efforts and determine whether you are indeed on the right path. If you think the educational and / or occupational path decided upon earlier is not appropriate, at this point, you may go back a step or two and decide on an alternative, and more personally satisfying, course of action.

Step Two: Goal Setting

Set your goals according to your academic qualification, work experience, priorities and expectations in life. Once your goal is identified, then you determine the feasible ways and objectives how to realise it.

Step Three: Academic/Career Options

Narrow your general occupational direction to a particular one by an informatory decision making process. Analyse the various career avenues by keeping in mind your present educational qualification and what more academic career courses you need to acquire for it.

Step Four: Plan of Action

Recognise those industries and particular companies where you want to get into. Make the plan a detailed one so that you can determine for how many years you are going to work in a company in order to achieve maximum success, and then switch to another. Decide where you would like to see yourself after five years and in which position. If you are looking for career in education, then you must research about the various leading companies and industries and abroad to get into the best company.

3.3.2 Interrelation between Guidance and Career Planning

Choosing the right career can be a very daunting task especially in a world which offers an array of paths, all of which seem to be leading to a golden goal. Careers can actually make or break one's life, so it is important to make the right choice. Career guidance can help you in pursuing the right courses, in the right colleges or institutes and can guide you in choosing a suitable career.

Career planning is an exercise that is well worth the time invested in it because it sets you going on the path that leads to where you would like to go. This exercise provides you with a lot of clarity regarding your career objectives as well and it best done before you embark on your job search.

Career guidance refers to services and activities intended to assist individuals of any age and at any point throughout their lives, to make educational, training and occupational choices and to manage their careers. Such services may be found in schools, universities and colleges, in training institutions, in public employment services, in the workplace, in the voluntary or community sector and in the private sector. The activities may take place on an individual or group basis and may be face-face or at a distance.

Choosing a career is a difficult matter, in the best of times. Add to this opinions of friends and parents, and the young person is caught up in a confusing situation where making a decision is almost impossible. We are providing here a model that can help young generation to choose a career, gain competencies required for it, make decisions, set goals and then take an action. This information is helpful not only for fresher but also throughout one's life.

Choosing a career is a multi-step process. It involves gathering information on a number of things, the first being yourself.

Often most people get stuck at the very beginning of the planning process itself. There seem to be too many choices that are throwing themselves at you with all kinds of material gains, fame and wealth, comfort and luxury, glamour and beauty. From acting to singing, writing to banking, software programming to business, choices confuse you. Naturally feelings of self-doubt might creep in at this stage. Am I good enough for that, you may ask, or how do I become successful at this. After some time of pondering over many career paths you may end up thinking that maybe you are no good for any of these things after all.

Here is where a bit of career planning helps. There are two ways of starting off. One is to find out what you really like doing and do it irrespective of the gains and growth patterns and the second is to find out what really motivates you, find out which among the careers gives you what you want and build up competencies for it. Either way you will get what you want – in the first method the journey itself is your reward (though many will discourage you on this path, but don't worry, many have tread this path and quite successfully at that too) and in the second you are carefully working your way to your reward which could be clearly spelt out to be a consequence of your work or occupation.

Whichever path you choose, it is most important to know your individual strengths and weaknesses. Sit down and assess yourself honestly. Think of all your accomplishments, of all the compliments you got, of all the work that really inspired you, of the times when you worked with passion at and jot them all down. You will find that as you note down your victories, your achievements etc a pattern will emerge. You can find that you are good at organising, at making people comfortable, at leading, at solving puzzles, at physical activity, at playing music or games. Each of these represents a career option by itself or throws up some characteristic in you - qualities that could be good assets in your future career options.

Now list out things that motivate you, that you aspire for, your dreams – things you would want more than anything else in the world. Find your fit between the person you are and the dream you wish to achieve. As this picture gets clearer you become more aware, confident and purposeful. Attributes that serve you

well along the way. You have now formed a sharp picture of yourself with specific saleable qualities.

Based on your aspiration level and your aptitude, you can also identify the careers that offer the kind of lifestyle or returns that you wish. If you wish to frequently travel and be in command of a dynamic business you can zero down to careers in marketing with a goal to set up your own firm or to head a large company (the same may not be possible if you inherently like to paint for long hours). It is best to be honest with yourself at this stage because most people take decisions based on glamorous misconceptions about certain careers and later change them. For example if you wish to be an airhostess, check out the sources available to the kind of work that is associated with being an airhostess. Only if you really enjoy doing that kind of work and the rewards that come with it must you opt for it. Else look further for what really fits you. Growth, rewards, recognition and most importantly job satisfaction and a good quality of life come from one thing – loving your job.

Having decided on a particular direction, build competencies. Specific careers need specific education and training. Whichever area you choose to be in, you will fare well if you strive to be the best in it. Leave your individual brand on it. Learn the ropes by acquiring information, by taking up courses, by taking up internships and summer jobs, by learning the economics of the job, by adding special skills that help in handling the job with greater proficiency.

All careers without exception would certainly require a good writing and verbal communicating ability so please work on that, a pleasing and well-mannered personality, a professional work ethic and good inter-personal skills. Work on these important soft skills along with as you plan your career.

Self Assessment Questions

Fill in the blanks

1) The career planning process is comprised of _____steps.

2) Evaluate who _____are as a person.

3) Career counseling is an _____process.

4) Career _____can help you pursue the right courses, in the right colleges or institutes and can guide you in choosing a suitable career.

5) Choosing a career is a _____process.

3.4 DECISION MAKING

A decision is a choice between two or more alternatives. If you only have one alternative, you do not have a decision.

Decision making can be regarded as the mental processes (cognitive process) resulting in the selection of a course of action among several alternative scenarios. Every decision making process produces a final choice. The output can be an action or an opinion of choice.

Problem solving and decision-making are important skills for business and life. Problem-solving often involves decision-making, and decision-making is especially important for management and leadership. There are processes and techniques to improve decision-making and the quality of decisions.

Decision making is more natural to certain personalities, so these people should focus more on improving the quality of their decisions. People that are less natural decision-makers are often able to make quality assessments, but then need to be more decisive in acting upon the assessments made. Problem-solving and decision-making are closely linked, and each requires creativity in identifying and developing options, for which the brainstorming technique is particularly useful.

A high quality decision comes with a warrant: a guarantee. Not a guarantee of a certain outcome remember this is the real world we're talking about, and there are certain things that just aren't knowable until after they happen—but a warranty that the process you used to arrive at a choice was a good one.

This level of confidence implies a process: a set of steps and rules that provide an assurance of thoroughness and rigor. This means breaking decisions down into component parts and doing one thing at a time.

With a process or framework, you have the mechanism you need to warrant the quality of your own decisions. Perhaps more importantly, you also have a common language and set of mental models that makes conversations about decisions more efficient and effective. This common understanding of decision processes, criteria, and roles avoids many of the common organisational decision traps, allowing people in your organisations to spend their conversational energies on creating better alternatives and validating assumptions and ultimately warranting their own decisions.

The framework we use for breaking down and working decisions of virtually any size and complexity begins with two large ideas: declaring a decision and working a decision. Each of those larger elements is then broken down into three sub components, which are illustrated in the following diagram.

3.4.1 Declare a Decision

1) **Frame the Problem**

What are you deciding and why? What shouldn't you be deciding and why? What's not in the box is as important as what is. Without a good definition of the problem or opportunity to be worked, there is no possibility that you'll reliably reach a high quality decision.

Frames are mental structures we create to simplify and organise our lives. They help us reduce complexity. That's the good news and the root of another set of problems. The way people frame a problem greatly influences the solution they will ultimately choose. And the frames that people or organisations routinely use for their problems control how they will react to almost everything they encounter."

2) **The Right People**

If you're a single actor, or hold all the prerogatives of a dictator, this one is easy. In other cases, you'll want to put some thought into declaring who needs to be involved in what steps of this decision. Too few, or miss some, and you risk the problems of rework, low adoption rate and poor buy in. Too many too much inclusion and you invite the possibility of an unnecessarily painful or drawn out decision process.

3) **The Right Process**

It would depend on the decision situation. Making a high quality decision doesn't have to be time consuming. In some cases, the best process might just be a coin toss or relying on some rules of thumb. In other cases, the only way to work a decision is to really work it, and that will take time.

This element of declaration pulls the frame and people together into a coherent whole that will govern how you will reason this decision through.

3.4.2 Work a Decision

1) **A Complete Set of Alternatives**

The more options you generate, the greater your chance of finding an excellent one. "Collectively exhaustive" means that the alternatives you're considering fill the frame: a rational observer would conclude that you've thought of everything that matters. "Mutually exclusive" means that the alternatives are unique and different from each other: they're not just restatements of the same choice.

2) **Values against which to make Tradeoff**

Values define your preferences among alternatives. They are your criteria. Values can be expressed by "attributes." Attributes are characteristics of the outcomes that we find desirable or undesirable. They typically occur over time and may have some degree of uncertainty associated with them.

3) **Information that describes the value of each alternative**

Good decision making requires not only knowing the facts, but understanding the limits of your knowledge. The most valuable insights are often found in exploring uncertainties and "disconfirming" information.

A high quality decision process highlights the frame, potential alternatives, and key assumptions the drive value. This allows leaders to spend their time declaring the right decisions, providing a set of common criteria, and testing the key assumptions of each decision.

Self Assessment Questions

Answer the following statements in True or False

1) A decision is a choice between two or more alternatives. (True/False)
2) There are no processes for changing a decision or its quality. (True/False)
3) Frames help us reduce complexity. (True/False)
4) Mutually exclusive means that the alternatives are unique and different from each other. (True/False)
5) Values are different from attributes. (True/False)

3.5 LET US SUM UP

Counselling is a process that focuses on enhancing the psychological well-being of the client, such that the client is then able to reach their full potential. This is achieved by the counsellor facilitating your personal growth, development, and self-understanding, which in turn empowers you to adopt more constructive life practices.

The purpose of guidance is to provide 'learning experiences to enable clients to acquire knowledge, skills and competencies related to making personal, educational and career decisions'

Career development and the career planning process include a number of specific steps that help to identify personal skills and attributes. Career counselors provide mainly career counseling outside the school setting. Their chief focus is helping individuals with career decisions. In addition, career counselors provide support to people experiencing job loss, job stress, or other career transition issues.

Career guidance can help you in pursuing the right courses, in the right colleges or institutes and can guide you in choosing a suitable career. Career guidance refers to services and activities intended to assist individuals of any age and at any point throughout their lives, to make educational, training and occupational choices and to manage their careers.

A decision is a choice between two or more alternatives. If you only have one alternative, you do not have a decision.

Decision making can be regarded as the mental processes (cognitive process) resulting in the selection of a course of action among several alternative scenarios. Every decision making process produces a final choice. The output can be an action or an opinion of choice.

Problem solving and decision making are closely linked, and each requires creativity in identifying and developing options, for which the brainstorming technique is particularly useful.

A high quality decision comes with a warrant: a guarantee. Not a guarantee of a certain outcome remember this is the real world we are talking about, and there are certain things that just aren't knowable until after they happen but a warranty that the process you used to arrive at a choice was a good one.

The framework we use for breaking down and working decisions of virtually any size and complexity begins with two large ideas: declaring a decision and working a decision.

3.6 UNIT END QUESTIONS

1) Define counseling and guidance.
2) Describe the characteristic features of counseling and guidance.
3) What is career planning?
4) Discuss the relationship between counseling and career planning.
5) Elucidate the relationship between guidance and career planning.
6) What is involved in the process of decision making?
7) Discuss declaring a decision.
8) Explain working a decision.

3.7 SUGGESTED READINGS

Sharma, V.K. (2005). *Administration and Training of Educational and Vocational Guidance.* Saujanya books, New Delhi

Gupta, Sarla (Ed) (2001). *Career and Counseling Education* . Saujanya Books, New Delhi

Srivastava, Sushil Kumar (2007). *Career Counselling.* Saujanya Publications, New Delhi

Walsh W.Bruce (1990). *Career Counselling: Contemporary Topics in Vocational Psychology.* Lawrence Erlbaum Associates, Publishers. Hillsdale, New Jersey and London

UNIT 4 MULTICULTURAL COUNSELING AND GUIDANCE: ROLE OF COUNSELORS IN PREVENTING ILLNESS AND PROMOTING POSITIVE HEALTH

Structure

4.0 INTRODUCTION

In this unit we are dealing with multicultural counseling. We start with Multiculturalism and its History, followed by Multicultural Counseling and Guidance. In this we discuss the Role of Counselors, the client and counsellor in multicultural counseling and trends in multicultural counseling. Then we take up positive health and discuss under it the philosophical orientation, role of optimism in positive health. This is followed by a section on Preventing Mental

ill Heath and Promoting Positive Health within which we discuss positive Psychology. Then we take up the issue of Understanding Illness: its Causes and Prevention within which we present how healthful living could be achieved. In this context we discuss how risks towards any kind of illness could be avoided and what actions to be taken to avoid or reduce known risks. Then we elucidate Practical steps for reducing risk and promoting health, and discuss factors for Motivating persons to take positive steps towards positive health. Lastly we discuss the involvement of youth and community in the process.

4.1 OBJECTIVES

After completing this unit, you will be able to:

- Define the concept and origin of multiculturalism;
- Describe multicultural counseling and guidance;
- Discuss the role of counselors in multiculturalism;
- Define health and positive health;
- Explain the role of optimism in positive health;
- Discuss how to prevent mental health and promote positive health; and
- Analyse the relationship between illness and a healthful balance.

4.2 MULTICULTURALISM AND ITS HISTORY

Multiculturalism is the appreciation, acceptance or promotion of multiple cultures, applied to the demographic make-up of a specific place, usually at the organisational level, e.g. schools, businesses, neighborhoods, cities or nations. In this sense multiculturalism approximates to respect for ethnic diversity.

‘‘Multicultural’’ is thus often equated with multiethnic in public discourse, which in turn is conflated with multiracial, indicating the extent to which debates on multiculturalism are concerned predominantly with the presence of non-white migrant communities in white, Western societies. In this context, multiculturalism is variously evoked as a response to the need to address real or potential ethnic tension and racial conflict.

In multicultural guidance and counselling, a counsellor and a client are different. These differences are generated by a certain culture via the effects of socialisation or child-rearing in a certain ethnic community.

We consider all guidance and counselling to be multicultural in the sense that counselors need to recognise that all of their clients bring their unique personal history and cultures into the guidance and counselling process.

Positive health describes a state beyond the mere absence of disease and is de?nable and measurable. Positive health can be operationalised by a combination of excellent status on biological, subjective, and functional measures.

Health is a state of complete positive physical, mental, and social well-being and not merely the absence of disease or infirmity.

Optimism is, of all personality traits, in addition to being strongly associated with greater well-being, it seems to play an important role in physical and positive health.

Primary prevention involves actions to keep disease from occurring. Secondary prevention involves actions to detect the presence of disease in its early stages when it is easier to treat. Tertiary prevention involves actions to reduce the severity of a disease that has already occurred, to minimize its complications, or to promote recovery.

The term multiculturalism generally refers to a "de facto" state of both cultural and ethnic diversity within the demographics of a particular social space.

4.2.1 History of Western and Eastern Societies

As a philosophy, multiculturalism began as part of the pragmatism movement at the end of the nineteenth century in Britain and in the United States, then as political and cultural pluralism at the turn of the twentieth. Philosophers, psychologists and historians and early sociologists such as Charles Sanders Pierce, William James, George Santayana, Horace Kallen, John Dewey, W.E.B. Du Bois and Alain Locke developed concepts of cultural pluralism, from which emerged what we understand today as multiculturalism.

Europe

Especially in the 19th century, the ideology of nationalism transformed the way Europeans thought about the state. Existing states were broken up and new ones created; the new nation-states were founded on the principle that each nation is entitled to its own sovereign state and to engender, protect, and preserve its own unique culture and history. Unity, under this ideology, is seen as an essential feature of the nation and the nation-state – unity of descent, unity of culture, unity of language, and often unity of religion. The nation-state constitutes a culturally homogeneous society, although some national movements recognised regional differences.

It has been argued that the concept, if not the 19th century methodology, of monoculturalism has been gaining favour in recent years. This is generally fueled by a desire to safeguard national cultures or identities that are perceived as being under threat – particularly by globalization and the promulgation of multiculturalism by Left Wing political parties – as opposed to the outright xenophobia of the 19th century

USA

In the United States, continuous mass immigration had been a feature of economy and society since the first half of the 19th century. The absorption of the stream of immigrants became, in itself, a prominent feature of America's national myth. The idea of the Melting pot is a metaphor that implies that all the immigrant cultures are mixed and amalgamated without state intervention. The Melting Pot implied that each individual immigrant, and each group of immigrants, assimilated into American society at their own pace. An Americanised (and often stereotypical) version of the original nation's cuisine, and its holidays, survived.

Australia

Prior to settlement by Europeans, the Australian continent was not a single nation, but hosted several Indigenous cultures and between 200 and 400 active languages at any one time. The present nation of Australia resulted from a deliberate process of immigration intended to fill the "empty" continent (also excluding potential rivals to the British Empire). Settlers from the British Isles, after 1800 including Ireland, were the earliest people that were not native the continent to live in Australia. Dutch colonisation and possible visits to Australia by explorers and/ or traders from China, did not lead to permanent settlement. Until 1901, Australia existed as a group of independent British settler colonies.

Proposals to limit immigration by nationality were intended to maintain the cultural and political identity of the colonies as part of the British Empire. While there was never any specific official policy called the White Australian policy, this is the term used for a collection of historical legislation and policies which either intentionally or unintentionally restricted non-European immigration to Australia from 1901 to 1973. Such policies theoretically limited the ethnic and cultural diversity of the immigrant population and in theory facilitated the cultural assimilation of the immigrants, since they would come from related ethnic and cultural backgrounds.

India

India is the second most culturally, linguistically and genetically diverse geographical entity after the African continent. India's Republican democracy is premised on a national belief in pluralism, not the standard nationalist invocation of a shared history, a single language and an assimilationist culture. State boundaries in India are mostly drawn on linguistic lines. In addition India is also one of the most religiously diverse countries in the world, with significant Hindu (80.5%), Muslim (13.4%), Christian (2.3%), Sikh (2.1%), Buddhist, Jain and Parsi populations. Cities like Mumbai in Maharashtra display high levels of multilingualism and multiculturalism, spurred by political integration after independence and migration from rural areas.

Indonesia

There are more than 700 living languages spoken in Indonesia and although predominantly Muslim the country also has large Christian and Hindu populations. Indonesia's national motto, "Bhinneka tunggal ika" ("Unity in Diversity" lit. "many, yet one"), articulates the diversity that shapes the country.

4.2.2 Multicultural Counseling and Guidance

The concept of culture is a very complex one including different levels and different perspectives. The concept *multicultural* is difficult to define because there is no agreement about what is included in culture. Broadly defined, all groups of people who identify themselves or have connections to each other based on some shared aims, needs, or the similarity of background, belong to the same culture (Axelson 1993, 3).

The ideas may help the individual to construct his or her own relation to the concept of culture sometimes explicitly and sometimes implicitly.

The following aspects of culture could be seen as linking threads:

- Human beings are social beings who have developed cultures with both similarities and differences: similarities as well as differences should be noted in guidance and counselling.
- Culture surrounds us from the beginning of our life and we learn our "home" culture or cultures naturally in our everyday interactions; we are often unaware of our own culture and therefore becoming aware of the impact of one's own culture is important.
- Learning our culture is not just passive assimilation, but we also construct the culture together with other human beings.

4.2.3 Client and Counsellor in Multicultural Counselling

In multicultural guidance and counselling, a counsellor and a client are different. These differences are generated by a certain culture via the effects of socialisation or child-rearing in a certain ethnic community (Locke 1990, 18).

We consider all guidance and counselling to be multicultural in the sense that counselors need to recognise that all of their clients bring their unique personal history and cultures (e.g. gender, social class, religion, language, etc.) into the guidance and counselling process. However, given the current challenges that immigration and multiculturalism pose to Europe and other parts of the world, the main emphasis should be on how to address the needs of cultural minorities in guidance and counselling.

Guidance in a broad sense refers to "a range of processes designed to enable individuals to make informed choices and transitions related to their educational, vocational and personal development", including activities such as informing, advising, counselling, assessing, enabling, advocating and giving feedback (Watts & Kidd 2000, 489). Guidance has often been associated within formation having the key role in all guidance activities (e.g. Brown 1999).

Counselling often refers to "deeper" processes where counsellors work together with their clients to help them solve their problems and make choices of their own. Sometimes a strict division has been made between guidance and counselling, often associated with forming professional organisations which strive for a certain professional identity, even though in many ways guidance and counselling should have interconnecting links and complement each other (Watts & Kidd 2000, 492–494). Guidance and counseling is preferred to seen as "companions" working together to help people in multi-cultural societies. But in most cases the term multicultural counselling is used instead of the "twin term" multicultural guidance and counseling.

The term multicultural counseling is used because it helps us to think and express nicely that multiple cultures exist in Europe and also in other parts of the world. The term reflects both the reality (there are several cultures) and the ideal - constructive and interaction-oriented co-existence of multiple cultures as a goal for Europe and the world.

4.2.4 Trends in Muticultural Counselling

There are two major trends in multicultural counselling:

The universal trend emphasises that all counselling is multicultural: all individuals belong to many cultures that are different from those of others.

The culture-specific trend emphasises the importance of culture-specific knowledge and the special nature of certain cultural groups. According to this trend, a cultural group is defined mainly by race and ethnic background.

4.2.5 Role of Counselors

A trained counselor is aware of how their own cultural background and experiences have influenced attitudes, values, and biases about psychological processes. They believe that cultural self-awareness and sensitivity to one's own cultural heritage is essential. They are able to recognise the limits of their multicultural competency and expertise; and their sources of discomfort with differences that exist between themselves and clients in terms of race, ethnicity and culture.

Counselors are aware of their negative and positive emotional reactions toward other racial and ethnic groups that may prove detrimental to the counseling relationship. They are willing to contrast their own beliefs and attitudes with those of their culturally different clients in a nonjudgmental fashion. They are aware of their stereotypes and preconceived notions that they may hold toward other racial and ethnic minority groups.

Counselors respect clients' religious and/ or spiritual beliefs and values, including attributions and taboos, because they affect worldview, psychosocial functioning, and expressions of distress. They respect indigenous helping practices and respect helping networks among communities of color. They value bilingualism and do not view another language as an impediment to counseling (mono lingualism may be the culprit).

Counselors have specific knowledge about their own racial and cultural heritage and how it personally and professionally affects their definitions and biases of normality/abnormality and the process of counseling. They possess knowledge and understanding about how oppression, racism, discrimination, and stereotyping affect them personally and in their work. This allows individuals to acknowledge their own racist attitudes, beliefs, and feelings. Although this standard applies to all groups, for White counselors it may mean that they understand how they may have directly or indirectly benefited from individual, institutional, and cultural racism as outlined in White identity development models.

Counselors understand how race, culture, ethnicity, and so forth may affect personality formation, vocational choices, manifestation of psychological disorders, help seeking behaviour, and the appropriateness or inappropriateness of counseling approaches. They understand and have knowledge about sociopolitical influences that impinge upon the life of racial and ethnic minorities. Immigration issues, poverty, racism, stereotyping, and powerlessness may impact self esteem and self concept in the counseling process.

They seek out educational, consultative, and training experiences to improve their understanding and effectiveness in working with culturally different populations. Being able to recognise the limits of their competencies, they

a) seek consultation,

b) seek further training or education,

c) refer out to more qualified individuals or resources, or

d) engage in a combination of these.

A trained counselor is able to engage in a variety of verbal and nonverbal helping responses. They are able to send and receive both verbal and nonverbal messages accurately and appropriately. They are not tied down to only one method or approach to helping, but recognise that helping styles and approaches may be culture bound. When they sense that their helping style is limited and potentially inappropriate, they can anticipate and modify it. They are able to exercise institutional intervention skills on behalf of their clients. They can help clients determine whether a "problem" stems from racism or bias in others (the concept of healthy paranoia) so that clients do not inappropriately personalise problems.

Counselors should take responsibility for educating their clients to the processes of psychological intervention, such as goals, expectations, legal rights, and the counselor's orientation.

4.3 POSITIVE HEALTH

Positive health describes a state beyond the mere absence of disease and is de?nable and measurable. Positive health can be operationalised by a combination of excellent status on biological, subjective, and functional measures.

Health is a state of complete positive physical, mental, and social well-being and not merely the absence of disease or infirmity.

To reach the state of complete physical, mental and social well-being, an individual or group must be able to identify and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is positive concept emphasising resources, as well as physical capacities.

The self perception of healthy people, characterised by having positive feelings about themselves, a feeling of self-control and optimistic vision of future, provides reserves of and a driving force for resources not only to cope with everyday difficulties but also with those which are especially stressful and even threatening for one's existence. Having a good physical and mental state should not only consist in not having an illness or disorder, but also in enjoying a series of resources or abilities that allow for coping with adversities. And through the perspective of positive health, the very state of well-being makes it possible to achieve a greater psychological, social and community development.

The definition of health has made the idea of positive health turn around the concept of well being. This can be discussed in two philosophical orientations.

4.3.1 Philosophical Orientation

The first perspective is called *Hedonism* which defines well being as the presence of positive affect and the absence of negative affect. The idea behind hedonism is that the objective of life is to experience the greatest possible amount of pleasure (although oriented towards enjoyment and noble activities). Happiness would be in some sense, the sum of pleasurable moments.

Eudaimonia the second perspective suggests that wellbeing does not consist in maximizing positive experiences and minimizing negative ones but refer to living fully or to allow for the richest human potential possible. It is both as ancient and modern.

In the field of modern psychology, the predominant concept stemming from hedonic psychologists is *subjective well-being*. Subjective well-being usually includes two elements, namely *affective balance*, which is obtained by subtracting the frequency of negative emotions from the frequency of positive emotions. Secondly, *perceived life satisfaction*, which is more stable and has a greater cognitive component. Even though affective balance and life satisfaction imply different time frameworks for subjective well-being, as life satisfaction is a global judgment on life itself, whereas affective balance makes reference to the relative frequency of pleasant or unpleasant affects in one's immediate experience, they can be understood as concepts linked to an hedonic perspective.

Each dimensions of psychological well being posits a different challenge that people find in their efforts to function positively. People whom manifest eudaimonic well being are characterised as follows:

- They have positive self regard that includes awareness of personal limitations. (Self-Acceptance)
- They have developed and kept warm ties with others. (Positive relations with others)
- They create a surrounding context so as to satisfy their needs and desires. (Environmental Mastery)
- They have developed a strong sense of individuality and personal freedom. (Autonomy)
- They have a sense of direction in life that unifies their efforts and challenges. (Purpose in life)
- They have a dynamic of life-long learning and of continuous development of their abilities. (Personal growth)

The *Self-Determination Theory* also links the ideas of eudaimonic and self-realisation as central aspects in the definition of well-being and positive health. The Self-Determination theory states that healthy psychological functioning implies adequate satisfaction of all three basic psychological needs, namely autonomy, competence and relatedness, as well as a system of congruent and coherent goals. Satisfaction of basic needs consists in keeping a life balance that guarantees an adequate level of satisfaction in each one of the areas independently.

4.3.2 Role of Optimism in Positive Health

Optimism is, of all personality traits, in addition to being strongly associated with greater well-being, it seems to play an important role in physical and positive health. Optimism can affect health through several paths. Firstly, optimism, hope and positive expectations are elements that can protect health in challenging situations for people's equilibrium by means of direct paths. For example, body systems of most optimistic people generate better immune competence responses than those of pessimistic ones, taking as an indicator the activity of natural killer's cells.

Optimism also seems to be related to a better state of the immune system.

Self Assessment Questions

1) Discuss multiculturalism in one or two sentences for each:

   i) Europe

   .....

   .....

   ii) USA

   .....

   .....

   iii) Australia

   .....

   .....

   iv) India

   .....

   .....

   v) Indonesia

   .....

   .....

2) Name two trends in multicultural counseling.

   .....

   .....

   .....

   .....

   .....

3) Define the following:

   i) Health

   .....

   .....

   ii) Hedonism

   .....

   .....

   iii) Eudaimonia

   .....

   .....

4.4 PREVENTING MENTAL ILLHEALTH AND PROMOTING POSITIVE HEALTH

Understanding signs and symptoms of mental health disorders is important for early detection and intervention. It is also important, however, to define mental health in positive terms (rather than merely the absence of illness) and to promote well-being through affirming, strength-based approaches.

4.4.1 Positive Psychology

Developing Mental Health in Young People

With so much emphasis on disorder, we might well wonder if freedom from illness is the best we can hope for. The emerging field of positive psychology seeks to bring balance to mental health research through the study and promotion of psychological strengths. Linking youth development to the positive psychology framework, the Commission on Positive Youth Development (2006) summarises positive psychological characteristics in five broad categories:

Positive emotions, including joy, contentment, and love

"Flow," is defined as "the psychological state that accompanies highly engaging activities"

Life satisfaction is the sense that one's own life is good, which correlates with characteristics such as self-esteem, resiliency, optimism, self-reliance, healthy habits, and prosocial behaviour.

Character strengths such as curiosity, kindness, gratitude, humor, and optimism

Competencies in the social, emotional, cognitive, behavioural, and moral realms

These characteristics gesture toward a much more vibrant vision of mental health, and are suggestive of ways concerned communities might create supports, opportunities, and services to promote optimum health. Along these same lines, positive psychology inquires into the role institutions play in facilitating the development of positive traits: how organisations, naturally occurring socialising systems, and communities help young people produce positive outcomes.

4.5 UNDERSTANDING ILLNESS: ITS CAUSES AND PREVENTION

A variety of hereditary, environmental and behavioural factors affect health and the risk of illness. The availability of health care (access to health care) also affects health risks; this factor is usually not within the health consumer's control. However, there are proven, effective ways to reduce the risks from other factors, including:

- practicing healthful living
- taking action to avoid or reduce known risks
- obtaining regular check-ups and recommended services to prevent disease

4.5.1 Practicing Healthful Living

Be proactive in developing a healthy lifestyle-eat a healthy diet, stay physically active.

4.5.2 Taking Action to Avoid or Reduce Known Risks

Avoid the use of tobacco and activities such as riding without a safety belt or riding with an intoxicated driver. The use of alcohol and other drugs and/or participation in unprotected sexual activity also present known risks that can be avoided or prevented.

4.5.3 Obtaining Regular Checkups and Recommended Services to Prevent Disease

Get needed medical services, including immunisations and dental care, in order to keep disease from occurring or to catch disease in an early stage when it is more easily treated. Of course, health care must be available (and affordable) if health consumers are to access these needed services.

4.5.4 Ways to Reduce Risk and Promote Health

Primary prevention involves actions to keep disease from occurring (such as immunisations). These actions include:

- developing and maintaining a healthy lifestyle
- reducing health risks

Secondary prevention involves actions to detect the presence of disease in its early stages when it is easier to treat (such as mammography). These actions include:

- accessing professional health services
- medical examinations
- medical testing
- conducting self-examinations

Tertiary prevention involves actions to reduce the severity of a disease that has already occurred, to minimize its complications, or to promote recovery (such as managing diabetes, cardiac rehabilitation, or alcohol and other drug rehabilitation). These actions include effectively managing diagnosed disease

4.5.5 Principles for Reducing Risk and Promoting Health

- Substitute healthy behaviours for risky behaviours.
- Reduce environmental risks, such as infectious diseases, sexually transmitted diseases or toxic exposure.
- Minimize any known hereditary risks. For example, a family history of breast cancer indicates importance of early onset of self-examination and professional screening.
- Effectively use health care resources.

4.5.6 Practical Steps for Reducing Risk and Promoting Health

- Identify personal risks.
- Learn about ways to reduce these risks. Healthy living is a *primary* means of disease prevention. Healthy living includes a variety of positive personal actions, such as eating a healthy diet, leading a physically active life, obtaining adequate rest, dealing effectively with stress, promoting good oral health and obtaining recommended services, such as immunisations, to prevent disease.
- Make a plan to improve your health or reduce a specific risk. Based on the information from Step One and Step Two, prepare a draft statement of a short-term goal to promote a healthy behaviour and/or to reduce your risk for disease.
- Plan for success. Certain factors must be in place for behaviour change or new learning to occur. They include:

  a) motivating or predisposing factors

  b) enabling factors

  c) reinforcing factors

4.5.7 Motivating or Predisposing Factors

What does a person need to know and value to want to engage in the new healthy behaviour? Discover these by considering:

- experiences
- perceived benefits (e.g., appearance, sports performance, feeling good)
- perceived threat (e.g., How bad does the adverse impact seem to be?)
- perceived susceptibility (e.g., genetic risks, environmental risks, behavioural risks)
- perceived peer norms (e.g., Everybody does it.)

4.5.8 Enabling Factors

What information and skills does a person need to be able to participate in the new healthy behaviour? Enhance enabling factors by:

- identifying and removing perceived barriers
- identifying available resources
- building confidence (self-efficacy
- building awareness (e.g., that it matters what you do, eat and smoke)

4.5.9 Reinforcing Factors

What kinds of reinforcement or rewards would help a person continue with the new healthy behaviour?

- external rewards (e.g., a star on a chart)
- internal rewards (e.g., pride in achieving)
- people who provide positive or negative reinforcement?

4.5.10 Healthful Balance

Overgrowth of germs that normally live in the body destroys the healthful balance and allows infection or disease to develop from the overgrowing organisms. Overgrowth of germs can occur due to frequent or over-use of antibiotics or steroids, malnutrition, immunosuppressive drugs or heavy irradiation (as in cancer treatment), or with chronic diseases such as diabetes and cancer.

Overuse or unnecessary use of antibiotics is not wise. Bacteria can become resistant to antibiotics as mutation occurs in the bacteria. The bacteria change in ways that cause the antibiotics to no longer be effective. These resistant bacteria can emerge resistant to one antibiotic or to closely related groups of antibiotics.

Balance is also destroyed by germs from a source outside the body that invade the body. The germs that may be normal to one person may not be normal to another person's body and may cause sickness when introduced into another person. This forms the basis for routine hygiene measures such as hand-washing following urination or defecation. The germs in the body of one person may be non-pathogenic (non- disease causing), but these same germs can create serious illness in another person.

4.6 YOUTH DEVELOPMENT AND COMMUNITY

In calling for a focus on strengths over deficits, and community responsibility in balance with individual responsibility, positive psychologists join the growing movement toward youth development as a public health strategy.

Relying on research that demonstrates the protective effects of youth development approaches, organisation explicitly endorses youth development strategies that involve all community sectors to address health and safety. Rather than saying to a young person "the problem is with you," this approach engages youth together with families, schools, health care providers, youth-serving agencies, faith communities, media, colleges and universities, employers, and government agencies to build strengths and reduce risks at the environmental as well as individual level. Emphasis falls on community responsibility, community solutions, and community connectedness: the problem is with us; the answers are with all of us.

This commitment to supporting health through community level change grew out of research that demonstrates the importance of social context to individual health. Although some individuals are physiologically vulnerable to development of mental illness and disorders, studies consistently show that environment matters a great deal in mental health functioning. Relationships with caring adults, development of positive life goals, and belief in a positive future have all been consistently linked to healthy social and emotional functioning in youth and adults. Similarly, history of trauma and abuse as well as high environmental instability is consistently linked with poor mental function. This suggests that environments that foster connection with others and provide opportunities for meaning and mastery serve as buffers against mental disorders and promote positive mental health.

Environments that cultivate both positive emotional relationships and the ability to understand and articulate emotional states may prove particularly useful in supporting positive mental functioning.

Self Assessment Questions

Fill in the Blanks:

a) Flow is defined as the _____ that accompanies highly engaging activities".

b) _____ is the sense that one's own life is good.

c) _____involves actions to detect the presence of disease in its early stages when it is easier to treat.

d) Tertiary prevention involves actions to_____ the severity of a disease that has already occurred.

e) Healthy living is a _____ means of disease prevention.

4.7 LET US SUM UP

Multiculturalism is the appreciation, acceptance or promotion of multiple cultures, applied to the demographic make-up of a specific place, usually at the organisational level, e.g. schools, businesses, neighbourhoods, cities or nations. In this sense multiculturalism approximates to respect for ethnic diversity.

In a political context it has come to mean the advocacy of extending equitable status to distinct ethnic and religious groups without promoting any specific ethnic, religious, and/or cultural community values as central. Multiculturalism as "cultural mosaic" is often contrasted with the concepts assimilationism and social integration and has been described as a "salad bowl" rather than a "melting pot."

Multiculturalism, as distinct from the adjective multicultural (''of or pertaining to a society consisting of varied cultural groups''), first came into wide circulation in the 1970s in Canada and Australia as the name for a key plank of government policy to assist in the management of ethnic pluralism within the national polity. In this context, the emergence of the term is strongly associated with a growing realisation of the unintended social and cultural consequences of large-scale immigration. Coined by a Canadian Royal Commission in 1965, this governmental use of ''multiculturalism'' is widely supported and endorsed by its proponents as both a progressive political imperative and an official article of faith – a term associated in principle with the values of equality, tolerance, and inclusiveness toward migrants of ethnically different backgrounds.

''Multicultural'' is thus often equated with multiethnic in public discourse, which in turn is conflated with multiracial, indicating the extent to which debates on multiculturalism are concerned predominantly with the presence of non-white migrant communities in white, Western societies. In this context, multiculturalism is variously evoked as a response to the need to address real or potential ethnic tension and racial conflict.

In multicultural guidance and counselling, a counsellor and a client are different. These differences are generated by a certain culture via the effects of socialisation or child-rearing in a certain ethnic community (Locke 1990, 18).

We consider all guidance and counselling to be multicultural in the sense that counselors need to recognise that all of their clients bring their unique personal history and cultures (e.g. gender, social class, religion, language, etc.) into the guidance and counselling process. However, given the current challenges that immigration and multiculturalism pose to Europe and other parts of the world, the main emphasis should be on how to address the needs of cultural minorities in guidance and counselling.

Positive health describes a state beyond the mere absence of disease and is definable and measurable. Positive health can be operationalised by a combination of excellent status on biological, subjective, and functional measures.

Health is a state of complete positive physical, mental, and social well-being and not merely the absence of disease or infirmity.

To reach the state of complete physical, mental and social well-being, an individual or group must be able to identify and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is positive concept emphasising resources, as well as physical capacities.

Optimism is, of all personality traits, in addition to being strongly associated with greater well-being, it seems to play an important role in physical and positive health.

The availability of health care (access to health care) also affects health risks; this factor is usually not within the health consumer's control. However, there are proven, effective ways to reduce the risks from other factors.

Primary prevention involves actions to keep disease from occurring. Secondary prevention involves actions to detect the presence of disease in its early stages when it is easier to treat. Tertiary prevention involves actions to reduce the severity of a disease that has already occurred, to minimize its complications, or to promote recovery.

Environments that cultivate both positive emotional relationships and the ability to understand and articulate emotional states may prove particularly useful in supporting positive mental functioning.

4.8 UNIT END QUESTIONS

1) Define and describe multicultural counseling.
2) Trace the history of multicultural counseling.
3) Describe the relationship between multicultural counseling and guidance.
4) What are the trends in multicultural counseling?
5) Define positive health and indicate how is it concerned with counseling?
6) How will you prevent mental ill health and promote positive health?
7) Discuss illness, its causes and prevention from multi cultural counseling point of view.
8) What are the principles and ways to reduce risk and promote health?

9) Discuss the practical steps for reducing risk and promoting health.

10) What is meant by healthful balance?

4.9 SUGGESTED READINGS

Phil Hughes and Ed Ferrett (2007). *Introduction to Health and Safety in Construction* Oxford, Elsevier / Butterworth Heinemann, London

Neil M. Orr, David Patient (2007). *Positive Health*: Empowerment Concepts, London.

Elliot D. Cohen and Gale Spieler Cohen, (1999). *The Virtuous Therapist: Ethical Practice of Counseling and Psychotherapy* (Belmont, CA: Brooks/Cole.