







# **Models of Counselling**


**A brief [and a bit dated] look at some of the models of counselling**


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- A model of counselling is that which has been proposed and worked through so it is sustainable, understandable, and credible and achieves a particular goal.
  - It is a **process** whereby a counsellor and client can see progress being made towards that goal.


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- The process includes a contract or parameters that explore the situation, understand the situation, come to some decision about the situation and [hopefully] act upon the situation - even if that action is to do nothing!
  - Models have been put forward by Rogers, Gilmore, Egan etc and include Gestalt, TA,RET, CBT, psychodynamic, psychodrama etc.

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- Unlike a model, a theory is an idea or thought construction that helps explain something. Psychological ideas put forward by people such as Berne, Jung, Freud etc are theories.
  - Who is to say which theory is correct?


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- A model of counselling may or may not stem from a psychological theory. It is actually based on an experiential understanding or revelation.
  - It is seen as a particular process to get to a particular goal. Whether the process is explained one way or another is not really needed.
  - It is possible that any theory might get in the way of that process as it prejudices the process, beliefs and expectations of the participants, of both the client and counsellor.

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- All of counselling is a process.
  - What may *not* be appreciated is that the process is quite different for different models of counselling.
  - Different models have different end results in mind!

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- When talking about a client to a psychologist it is necessary to be able to use the language of psychologists, i.e. theories.
  - When talking about a client to a fellow counsellor it is necessary to be able to justify the evolving process by inclusion within a particular model.

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- A counsellor will obviously have a favourite model or models, but a proficient counsellor should be able to use most models competently.
  - Most counsellors tend to use a combination of models and tools called an 'Integrative' model.
  - Such an integrative model will be different for different counsellors but will have an essential or core model as its basis.



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- The danger of the Integrative model is that once a series has progressed, such a chop and change might well confuse the evolving process.
  - It is the mark of a good counsellor [especially with supervision] to be able to see whether the process is heading in the right direction and have the grace to change if necessary.
  - It is the mark of a bad counsellor to change too often for that only shows their lack of insight and expertise.

- Depending upon competence within a model and the client's particular need, it is up to the counsellor to decide as to which model he or she thinks is most likely to be the right one to fulfil the contract most easily, quickly or permanently.
- The counsellor always has a mind to make him or herself redundant - not only for the perceived problem but for all future problems for that client. The aim is to enable the client to stand on their own two feet.
- Unfortunately some agencies only prescribe to a certain model e.g. NHS uses CBT whilst Relate to their idiosyncratic or individualistic approach.

# Desired End Results

- The CBT model ensures, by positive [or even negative] reinforcement, that progress is being made when the ploys or stratagems are being adhered to.
- The Egan model shows progress is being made when the stages of counselling move forward. In this case that very movement anticipates further success.

# Desired End Results

- The progress of the Gilmore model is self explanatory when the process moves from Confusion Reduction to either Making a Choice or Effecting a Change. The process is completed when the contract is fulfilled.
- The Rogers' model is a process of self discovery, accepting responsibility for one's own actions and attitudes, and moving into the consequences of that exploration and revelation. It never ends.

# Desired End Results

- Progress is harder to ascertain with TA, Gestalt or Psychodrama except that as issues are explored, attitudes and actions effectively change.
- Hence the need to be clear as to the desired end result and the appropriate model to use.

# Core Conditions

For all models of counselling the core requirements of the counsellor are genuineness, empathy and acceptance.

Other words might be used to describe these three, especially within certain schools of counselling, so the buzz words might be congruence, rapport or non-judgemental attitude, or again 'being real', 'being alongside' and compassion.

What is in a name?

# Spectrum of Models

The spectrum of counselling models includes, but is not necessarily complete, as it moves from a client centred approach to a task orientation:-

- Rogers
- Gilmore
- Psychodynamic
- Gestalt
- Egan
- Psychodrama
- TA
- RET
- CBT

# Rogers

**Description** – client centred – client controlled – most gentle model – client is expert on client - counsellor simply tries to be ‘alongside’ client with their presented concern – empathy is implicit buzz word.

**Method** – counsellor ONLY uses material introduced by client – no insights allowed. Counsellor ONLY uses basic tools of stages 1 and 2. Counsellor ONLY goes where client wants to go.

**Disadvantages** – may take a very long time to explore the issues causing concern or even discover them. Open ended ‘contract’ that might never be fulfilled.

**End Result** – gaining understanding of what ‘becoming a person’ is about. Ultimate growth is moving from fixed ideas “That is the way the world just is!” to “I am alive and growing. I have responsibility for my life”.



# Gilmore

**Description** – client centred – counsellor controlled – ‘practical Rogers’ model – counsellor holds the session within agreed contract boundaries – everything revolves around ‘contracts’.

**Method** – exploration within understanding that all issues can be categorised as Confusion Reduction, Make a Choice, or Effect a Change. Counsellor may offer tools and further sub-contracts to facilitate exploration of presented issues of initial contract.

**Disadvantages** – deeper issues may be uncovered that necessitate revision of contract or another series of sessions.

**End Result** – Content contract fulfilled.

# Psychodynamic

**Description** – client centred – counsellor controlled – series mainly depends upon counsellor insights.

**Method** – exploration of presenting issues to look for unhelpful or inappropriate patterns of behaviour. Existential in that the client is brought to awareness of such patterns or motivation, understanding them as previous learnt survival techniques and finding resources within to change.

**Disadvantages** – progress is greatly dependent upon counsellor's skill in identifying patterns and bringing appropriate challenge for acceptance by client. Could go seriously wrong!

**End Result** – Behaviour modified to client's satisfaction.

# Gestalt

**Description** – client centred – counsellor controlled – not concerned with story line but immediacy and holistic presentation of client.

**Method** – usually considerable challenge as counsellor voices discrepancy between client's statements and non-verbal communication. Counsellor's aim is to enable client to be more aware of totality of self, be congruent in word and posture, and learn to listen to 'silent' body signals.

**Disadvantages** – sessions can be fraught if counsellor not skilled. Built in resistance of client to accept counsellors observations. Counsellor holds the emotional temperature – needs considerable emotional maturity and presence of mind.

**End Result** – Client has greater awareness of relationship of inner thoughts and outer presentation of self – that 'health' is a function of that relationship.

# Egan

**Description** – task orientated – counsellor controlled – easily identified stages – counselling by numbers – both client and counsellor can see progress clearly defined.

**Method** – using basic counselling tools explore the presented problem. Table as many alternative possible scenario solutions – then evaluate each - choose preferred scenario – find resources to act.

**Disadvantages** – Although the most versatile model that can be applied to many task orientated situations, it may fail to uncover underlying issues if they are more person centred. Might be too simplistic.

**End Result** – Client has not only established an end result to the presented problem but has learnt a technique that may cover many problem solving situations. Client gains self esteem as success breeds success.

# Psychodrama

**Description** – Spontaneous revelations – fast development through role play, imagination and/or dramatic involvement.

**Method** – mirroring posture, position and attitude of client or role play the drama of the situation. Sculpting a major feature. Works better in group situations. Effective within a single session.

**Disadvantages** – May build up a pure fiction or fantasy that bears little resemblance to real life, especially if the group mind is large [not everyone can be wrong!]. Depends strongly on charisma of facilitator as controlling and developing channel of understanding.

**End Result** – Client(s) has experiential understanding that does not require an intellectual basis.

# Transactional Analysis

**Description** – analysis of interplay between participating people – all these ‘strokes’ can be described within three modes of operation – parent, adult and child, and what ‘game’ is being played.

**Method** – explore situations to discover which mode of operation is employed, its depth or intensity of play and whether it is a positive or negative display. Only meaningful exchange of information is adult to adult.

**Disadvantages** – loses sight of long held issues behind behaviour patterns that of themselves can be altered.

**End Result** – client has an established intervention(s) that can deal with the presented problem situation along with insights to personal behaviour that invite both personal growth and relationship stability.

# Rational Emotive Therapy

**Description** – Use of Will Power to encourage control of irrational emotion driven behaviour.

**Method** – personal tailoring of affirmations, acclamations and behavioural routines.

**Disadvantages** – Only effective on surface issues. Deeper issues require more effective models. Could be seriously counter productive if not immediately effective.

**End Result** – client has generalised technique to cope with discomfiting behaviour or irrational behaviour.

# Cognitive Behaviour Therapy

**Description** – Very effective coping mechanism that is self explanatory in assessment – task or target orientated – counsellor dependent as being ‘expert’ therapist.

**Method** – behavioural schemes or stratagems worked out to cope with presenting problem – invariably counsellor dictated.  
Feedback system of evaluation to adapt or fine tune stratagems.

**Disadvantages** – Sticky plaster job. Deeper issues ignored that might eventually exacerbate the problem.

**End Result** – Client has solution to problem delivered without in depth soul searching.



# Integrative

**Description** – outside of counselling spectrum – amalgam of two or more models using one as core or basic model.

**Method** – an advantageous flexible use of models that is dependent upon the immediate need of the client.

**Disadvantages** – May lead to confusion of outcome and inefficient use of resources. Who is paying for this?

**End Result** – as determined by core model.

# Transpersonal this and Transpersonal that

More models appear every year. They include 'Transpersonal this or that', 'Focussing', 'Mindfulness', and 'Human Givens'.

Often the latest model is just putting old ideas in new formats.

The boundary between many of these models and theory is becoming blurred as time goes by! Be careful!

There is an element of 'new is best' or it is a way of being elitist and one step ahead of 'The Counselling Jones', with some medical jargon thrown in to impress. Does it really help the Client?