ONE

The Components of Counselling in a Nutshell

Counselling is a word that is much used, but as an activity it is much misunderstood. If I am going to present counselling in a nutshell, it is important that I make quite clear what I think counselling is and important that you understand how I am using the term. I am not going to offer you a formal definition of counselling, although I will presently discuss the current definition of counselling offered by the British Association for Counselling and Psychotherapy (BACP). What I will do is to outline the main components of counselling. Since this book is devoted to presenting counselling in a nutshell as it pertains to working with individuals (as I mentioned in the Preface), the components that I will outline and discuss in this chapter should be read as applying to individual counselling. My task is made more difficult since I will be endeavouring to present ideas that are broadly acceptable to adherents of the three main counselling approaches – psychodynamic, person-centred and cognitive-behavioural – as well as to those who consider themselves to be eclectic or integrative practitioners (that is, those who do not consider themselves to be adherents of any one counselling approach, but who draw upon different approaches in their work).

Please bear in mind as I write that I am referring to the ideal. Sadly, as is well documented, counselling does not always have helpful outcomes for clients and, just as sadly, counsellors do not always act in the best interests of their clients.
The components of counselling

In this chapter I will briefly outline some of the most important components of counselling. Let us begin by looking at the person who is adopting the role of counsellor, namely, you.

The counsellor

When you adopt the role of counsellor, you bring to counselling a number of ingredients. I will briefly discuss these ingredients one at a time.

A communicated genuine desire to be helpful to clients

Without a genuine desire to help your clients, you will just be going through the motions and this will probably be sensed by clients. As such, this genuine desire to be helpful needs to be both communicated by you, as counsellor, and experienced by your clients. If you are a trainee and your major motivation for seeing clients is to practise your counselling skills or to get the required ‘hours’ to fulfil your course requirements, then again you will probably communicate this at some level and it will be picked up by your clients with less than satisfactory results.

A demonstrated acceptance and respect for clients

Your attitude towards your clients will have a marked effect on your counselling work. If you accept and respect them and this is experienced by them, then this will encourage them to trust you and open up to you. However, if you demonstrate a negative attitude towards them by not accepting them or even disrespecting them, then counselling will, in all probability, stall.
An ability to listen to and understand clients’ psychological pain from their perspective

While a genuine desire to help clients is a central building block for counselling, this desire will count for little if you are not able to listen to and understand what your clients have to say to you from their point of view. The ability to listen to clients is a fundamental quality. It involves creating an environment in which clients feel safe enough to disclose their personal pain to you. This is dependent upon your doing a number of things, including: keeping relatively quiet while clients talk, intervening only to encourage them to continue their exploration; demonstrating non-verbally a keen interest in what they are saying; and communicating a non-judgemental, accepting attitude.

While listening is a key quality, its therapeutic power is enhanced when it is used in the service of understanding your clients from their point of view. In *To Kill a Mockingbird* by Harper Lee (1960) Atticus Finch says: ‘You never really understand a person until you consider things from his point of view – until you climb inside of his skin and walk around in it.’ Fortunately, you will not be called upon to do this literally in counselling, but being a counsellor will require you to view the world through your clients’ eyes as if you were inside his skin and walking around in it. As we will see in Chapter 2, this ‘as if’ quality is important. Unless you understand your clients from their perspective you will not be able to convey this understanding to them and they will not feel understood, and when clients do not feel understood the success of counselling is severely compromised.

Excellent therapeutic communication skills

You may be able to understand what your clients say to you, but this ability will not count for much if you do not succeed in conveying this understanding to them. Communicating empathic understanding to clients is a crucial skill and one that is recognised by all forms of counselling. However, there are other important therapeutic communication skills, some of which are emphasised more in certain approaches
than in others. For example, in psychodynamic counselling making interpretations is a key therapeutic communication skill, particularly with clients whose problems are rooted in past conflicts and who have developmental deficits (Howard, 2010). Where clients’ problems are rooted in conflicts, the assumption is made that such clients have a sufficiently functioning ego and can thus be helped to understand the connection between their present and past feelings, thinking and behaviour and how these are linked to certain unresolved conflicts in their life or internal world.

However, when problems involve deficits, such clients are deemed not to have a functioning ego and thus the purpose of such interpretations is to help the person become aware of certain aspects of their experience that they do not find it easy to identify, such as feelings and thoughts (Howard, personal communication). This helps the ego development of such clients. Communicating all this needs to be done skilfully if clients are to make use of such understanding, and issues of timing, the amount of information given, and the language used are all important skill considerations. Because good therapeutic communication is a skill, being able to learn, practise and get feedback on these skills should be a central feature of counsellor training courses.

Training that is sufficient to help the clients you are asked to see

As a counsellor, you will need to be trained. You may have a very therapeutic personality and your heart may be in the right place, but you will still have to be trained to acquire the knowledge, skills and professional discipline required to put your talent and desire to be helpful to best use. I am often asked how much training a person needs to have to be a counsellor. If you are on a professional training course, then this will have been laid down for you by one of the professional training bodies that exist in Britain today. However, if you are not training professionally and you are counselling clients in the voluntary
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sector, then you will need to receive sufficient training to enable you to
do the work effectively and safely.

Your personal strengths and weaknesses

When I was trained as a Samaritan many years ago, we were told to
leave ourselves outside the door when we came on duty. This is not the
case with counselling. The three major traditions in counselling all
recognise that counselling is a personal encounter between counsellor
and client, although each has a different idea about the nature of that
personal encounter, as we shall soon see (Chapter 2). Given the fact
that counselling is a personal encounter, albeit one where the focus is
on the well-being of one of the participants, it is important to consider
what you bring to the encounter as a person. Although you are in the
role of counsellor, your behaviour in that role is influenced for better
or worse by your own personal strengths and weaknesses. This is why
most approaches to counselling require their practitioners to be
involved in personal therapy or personal development work so that
they can monitor the impact of their personal contribution to the
counselling process.

The client

Your clients also bring to counselling a number of ingredients. I will
briefly discuss these ingredients, again one at a time.

Personal pain

In most cases, your clients will be seeking counselling because they are
in some degree of personal pain. This pain may be focused on and
reactive to a given life adversity (such as a bereavement or being made
redundant) or it may be enduring and more pervasive (for example,
chronic low self-esteem). In a small number of cases, your clients will
not be in pain, but rather they may be seeking counselling for some other reason, for example as a course requirement or out of interest. In my view, these are still legitimate reasons for seeking counselling and, in such cases, it often transpires that these people are in personal pain, but are not explicit about this at the outset.

In the 1960s and 1970s (a decade when I began my career as a counsellor), counselling was more likely to be sought by people who were not in personal pain, but who wanted to develop their personal potential. While this does not happen so much these days – indeed such people tend to seek life coaching – counselling for personal development rather than for personal pain is also a legitimate help-seeking reason.

It used to be widely held that counselling was a short-term intervention for people whose personal pain was focused and of short duration, while psychotherapy was longer-term and for people whose personal pain was more pervasive and chronic. However, a number of factors led to the blurring of these boundaries. First, people in the field struggled to differentiate counselling and psychotherapy as activities. In other words, it was not clear that the ways in which counsellors worked was reliably different from the ways in which psychotherapists worked. Secondly, people who deem themselves to be counsellors see people with pervasive and chronic problems and those who deem themselves to be psychotherapists see people with focused and shorter-lasting problems. Thirdly, counselling can be long-term and psychotherapy can be short-term. In recognition of some of these factors, and in response to their membership, the British Association for Counselling in September 2000 became the British Association for Counselling and Psychotherapy.

Help-seeking by choice

Counselling is based on the idea that your clients have chosen to seek help. Now, it may be that some of your clients have been mandated by the courts to ‘attend’ counselling, meaning that they can choose either to go for counselling or be sent to prison. While this is not the same as freely seeking counselling help, your ‘mandated’ client has still exercised
a choice in that he (in this case) has chosen to see you instead of being sent to prison. He may show much greater resistance to being in counselling than a client who has chosen to see you without constraint, but he has still exercised a choice.

Clients’ personal issues may well affect their behaviour in counselling

As I mentioned above, clients come to counselling in the main because they are in some kind of personal pain. While their personal problems relate to their life outside counselling, they may well bring these problems to counselling and thus these personal issues may well have a decided effect on their behaviour in counselling sessions. Indeed, there are some counsellors who hold the view that all client behaviours are a function of the issues with which they struggle outside counselling. Even if you don’t agree with this viewpoint, it is important that you recognise that your clients’ personal problems may well be played out with you since you may become a significant figure in their lives.

The working alliance between counsellor and client

At the end of the 1970s, Ed Bordin (1979) published a very important article which argued that counselling and psychotherapy could best be understood as an alliance between counsellor and client both of whom have work to do in the process. He argued that the resultant ‘working alliance’ has three features.

The ‘bond’ between you and your clients

This component focuses on the interpersonal relationship between you and your clients. There are a number of factors that need to be considered when examining the bond components of the working alliance and I will discuss these factors in Chapter 2.
The ‘goals’ of the counselling

You and your clients come together for a purpose and this component focuses on this purpose and on the direction of counselling. In the late 1960s, Alvin Mahrer (1967) edited a book entitled *The Goals of Psychotherapy*. In his closing chapter, Mahrer argued that the goals that his contributors focused on could be split into two types: (1) amelioration of psychological distress and (2) promotion of psychological growth. I have already mentioned that over the years the focus of counselling has moved more from the latter to the former. However, both are legitimate goals of counselling and should be considered. I will discuss the issue of goals more extensively in Chapter 4.

The ‘tasks’ that both you and your clients have to carry out in order to achieve these goals

The tasks of counselling are activities that both you and your clients engage in that ideally are in the service of the clients’ goals. While there are probably a number of tasks common to all counselling approaches (for example, the client disclosing her problems and/or life dissatisfaction), each approach has its unique tasks that counsellors and clients are called upon to engage in. I will discuss the task domain of counselling in Chapter 5.

To this list I have added a fourth feature known as ‘views’.

The ‘views’ that both you and your client have about salient aspects of the client’s problems and about the nature of counselling and the counselling process

Your attempts to understand your clients are likely to be influenced, at least in part, by the constructs put forward by the approach in which you have been or are being trained. This is also the case when we consider your attempts to help your clients. Different approaches to counselling emphasise different constructs and may use different language
to describe similar constructs. The other books in this series will make clear which constructs are used by which approach when understanding and helping clients.

Your clients are also likely to come to counselling with some idea of what determines their problems and the nature of the help that you will be providing them. If we consider the latter issue, for example, these ideas may be well informed and accurate, as in the case of a person who has read about a particular counselling approach and has sought a practitioner of that approach because she (in this case) has resonated with it and has a clear idea of what to expect. On the other hand, this idea may be inaccurate, as in the case of a person who expects advice from a practitioner who is very unlikely to give it (for example, a person-centred counsellor).

As you will see, this book is largely based on this expanded view of the working alliance concept and I devote one chapter to each of the four components of the alliance.

**Counselling is an ethical enterprise**

A central component of counselling is its ethical dimension. While a full discussion of the ethics of the counselling relationship is outside the scope of this volume (see Bond, 2000, for a more comprehensive treatment of this subject), I do want to outline briefly a number of important ethical considerations.

**The principle of ‘informed consent’**

It is a prime ethical feature of counselling that clients give their informed consent to proceed with counselling. This involves your informing their clients about salient aspects of counselling (e.g. how you, as counsellor, work and the practicalities of being in counselling with you, such as fees, the frequency of counselling sessions, and your cancellation policy) and clients giving their consent to proceed on
the basis of such information. I will discuss this issue more fully in Chapter 3.

Confidentiality

One of the defining aspects of the counselling relationship is its confidential nature. This means that, with stated exceptions, clients can expect you to keep to yourself what you are told by your clients during counselling. This is summed up in the often quoted piece of advice given to counsellors: ‘What you hear here, stays here.’ A complete discussion of this complex topic is beyond the scope of this book although I will discuss it further in Chapter 4 (see Bond, 2000, for a fuller discussion of confidentiality in counselling).

Protection and development

Research has clearly shown that counselling and psychotherapy can have unhelpful as well as beneficial effects on clients (Lambert and Ogler, 2004). It is also recognised that counselling can be a stressful occupation and that doing such work can have harmful effects on you and your counsellor colleagues. Given these two points, it is another ethical feature of counselling that you engage in a number of activities designed to protect the welfare of your clients as well as your own. Three major activities fall under this heading.

1. Supervision

It is now a professional requirement for counsellors to have their work supervised. Supervision of your counselling work enables you to offer your clients a more effective and safer service. It is also designed to protect you. Counselling can be very stressful and sensitive supervision of your work can help to minimise this stress and enable you to avoid burn-out.
2. Personal therapy and/or personal development

In Britain it is a criterion for professional accreditation in the British Association for Counselling and Psychotherapy (BACP) and in most of the organisations that fall under the umbrella of the United Kingdom Council for Psychotherapy (UKCP) that practitioners have had to have engaged in personal therapy or some form of personal development. This is in recognition of the fact that counselling is personally demanding and that you need to understand both the impact that your work has on your own personal functioning and the impact that you may have as a person on your clients and on the counselling process. Different counselling approaches advocate different activities under the rubric of personal therapy/personal development and vary according to how much therapy/development is advocated.

3. Continuing professional development

It is now agreed by virtually all professional counselling organisations that some form of continuing professional development is necessary if counsellors are to have their accreditation renewed. My view is that you should engage in CPD activities both within your counselling approach (to keep abreast of new developments) and also outside it (to learn about and consider integrating the best that other approaches have to offer).

Counselling is a ‘process’

The major goal of counselling may be said to help clients live more resourcefully, as free as possible from the restraining influence of emotional disturbance. How you and your clients go about working towards achieving this goal is going to be dependent in part upon your therapeutic orientation as counsellor. However, no matter which approach to counselling you use, the developing relationship between
you and your clients can be viewed as a process from beginning to end. Indeed, one of the major features of the books in the *Counselling in Action* series that I edit for Sage Publications is that authors write about specific approaches to counselling as they unfold over time from the beginning phase through the middle phase to the ending phase. Specific issues become salient at each of the three phases and I discuss a sample of these issues in Chapter 6. For a more detailed examination of counselling as a process, see the second edition of *Key Issues for Counselling in Action* (Dryden and Reeves, 2008).

**The context that frames counselling has an impact on its practice**

While counselling is a confidential relationship between counsellor and client (with stated exceptions as mentioned above), it is not free from outside influence. Indeed, the context in which counselling occurs exerts a powerful influence on what is discussed in the counselling relationship. This can happen in a number of ways which I will consider in the following chapters. To illustrate my point about the impact of the context on counselling, I will consider the impact of the context’s position with respect to the number of counselling sessions to be offered to clients on counselling.

**The influence of context-specified length of counselling on what is discussed in counselling sessions**

Imagine that a person (let’s call her Susan) recognises that she has a problem and that she wants to seek counselling to address this concern. Susan has a choice of two counselling services in which to become a client. If she approaches ‘Agency 1’ counselling is free but she is limited to six sessions, while if she approaches ‘Agency 2’, counselling is time-unlimited, but she is expected to pay £25 per session.
If Susan chooses to be a client at Agency 1 then the chances are that she will be helped to focus on her presenting problem and, if underlying issues come to the surface, the counsellor would pick them up but suggest that Susan may need to address them in a setting which is more open-ended with respect to time. By contrast, if Susan decided to become a client in Agency 2, she would be allowed much more opportunity to explore her concerns without the constraints of time being so pressing. As such, she may be able to identify and deal with any underlying problems that need to be addressed if she is to live resourcefully. Not that time unlimited counselling is without its problems, however. It may unwittingly encourage a client to avoid identifying or focusing on issues that need to be dealt with (since there is always time to do that later!) with the result that again the client may not be helped to live resourcefully.

My point here is that agencies that set a specified number of sessions influence the content of what is discussed in counselling for better or for worse.

**The BACP definition of counselling**

I mentioned at the beginning of this chapter that I would not be attempting to define counselling. Rather, I would outline a number of components that most people in the field would consider defining aspects of the counselling endeavour. I also said that while I would not define counselling myself, I would consider the current definition of counselling put out by the British Association for Counselling and Psychotherapy (BACP) published in November 2003. This definition is reprinted below:

‘Counselling takes place when a counsellor sees a client in a private and confidential setting to explore a difficulty the client is having, distress they may be experiencing or perhaps their dissatisfaction with life or loss of a sense of direction and purpose. It is always at the request of the client as no one can properly be “sent” for counselling.’
By listening attentively and patiently the counsellor can begin to perceive the difficulties from the client's point of view and can help them see things more clearly, possibly from a different perspective. Counselling is a way of enabling choice or change or of reducing confusion. It does not involve giving advice or directing a client to take a particular course of action. Counsellors do not judge or exploit their clients in any way.

In the counselling sessions the client can explore various aspects of their life and feelings, talking about them freely and openly in a way that is rarely possible with friend and family. Bottled up feelings such as anger, anxiety, grief and embarrassment can become very intense and counselling offers an opportunity to explore them, with the possibility of making them easier to understand. The counsellor will encourage the expression of feelings and as a result of their training will be able to accept and reflect the client's problems without becoming burdened by them.

Acceptance and respect for the client are essentials for a counsellor and, as the relationship develops, so too does trust between counsellor and client, enabling the client to look at many aspects of their life, their relationships and themselves which they may not have considered or been able to face. The counsellor may help the client to examine in detail the behaviour or situations which are proving troublesome and to find an area where it would be possible to initiate some change as a start. The counsellor may help the client to look at the options open to them and help them to decide the best for them.

I will now discuss the BACP definition of counselling in light of my component-based approach presented earlier in this chapter. Table 1.1 summarises the extent to which the BACP definition is reflected in my component-based approach, presented earlier in this chapter.

**The BACP definition: the counsellor**

As you can see from Table 1.1, the BACP definition of counselling focuses on certain aspects of what the counsellor brings to counselling (acceptance and respect for the client, the ability to listen attentively
Table 1.1  Elements of the BACP definition of counselling (right-hand column) to be found in Dryden’s component-based analysis (left-hand column)

<table>
<thead>
<tr>
<th>COUNSELLOR</th>
<th>CLIENT</th>
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<tr>
<td>• a communicated genuine desire to be helpful</td>
<td>• personal pain</td>
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<tr>
<td>• a demonstrated acceptance and respect for clients</td>
<td>• help-seeking by choice</td>
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<tr>
<td>• an ability to listen to and understand people’s psychological pain from their perspective</td>
<td>• ideas about being helped</td>
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<tr>
<td>• excellent therapeutic communication skills</td>
<td>• personal issues affect behaviour in counselling</td>
</tr>
<tr>
<td>• sufficient training</td>
<td>• difficulty, distress, dissatisfaction with life, loss of a sense of direction and purpose</td>
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<tr>
<td>• constructs to understand and to help</td>
<td>• always at the request of the client</td>
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<tr>
<td>• personal strengths and weaknesses</td>
<td>• not mentioned</td>
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<th>WORKING ALLIANCE</th>
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<tr>
<td>• bonds</td>
<td>• do not judge or exploit clients</td>
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<tr>
<td>• goals</td>
<td>• acceptance and respect for clients</td>
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<td></td>
<td>• enabling choice, change or reducing confusion</td>
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### Table 1.1 (Continued)

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<th>Therapist’s tasks</th>
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<tr>
<td>tasks</td>
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<tr>
<td>• explore client’s difficulty, distress, dissatisfaction or loss of direction/purpose</td>
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<td>• listen attentively and patiently</td>
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<td>• perceive difficulties from client’s point of view and help them to see things more clearly … possibly from a different perspective</td>
</tr>
<tr>
<td>• no advice or directing client to take a particular course of action</td>
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<tr>
<td>• explore feelings with the possibility of making them easier to understand</td>
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<tr>
<td>• encourage expression of feelings (especially bottled-up feelings)</td>
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<tr>
<td>• able to accept and reflect the client’s problems without being burdened by them</td>
</tr>
<tr>
<td>• enable client to look at many aspects of their life, their relationships and themselves which they may not have considered or been able to face before</td>
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<tr>
<td>• help the client to examine in detail the behaviour or situations which are proving troublesome and to find an area where it would be possible to initiate some change as a start</td>
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<tr>
<td>• help the client to look at the options open to them and help them to decide the best for them</td>
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<tr>
<th>Client’s tasks</th>
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<tr>
<td>Views</td>
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<tr>
<td>• explore various aspects of their life and feelings, talk about them freely and openly</td>
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<tr>
<td>• not mentioned</td>
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</table>
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Table 1.1 (Continued)

COUNSELLING AS AN ETHICAL ENTERPRISE

- Informed consent
- Confidentiality
- Protection and development (supervision; personal work; CPD)
- not mentioned
- private and confidential setting
- not mentioned

COUNSELLING AS A PROCESS

- development of trust

and patiently, and training which enables the counsellor to develop the personal strength of being able to accept and reflect the client’s problems without being burdened by them), and neglects others (communicating a genuine desire to be helpful to clients, excellent therapeutic communication skills and a professional set of constructs to enable the counsellor to understand and help the client).

The BACP definition: the client

When it comes to what the client brings to counselling, the BACP definition acknowledges that they bring their personal pain and that they seek help by choice, but it does not mention that they bring their own ideas of being helped or that their personal issues are likely to be reflected in their in-session behaviour with their counsellor.

The BACP definition: the working alliance

When it comes to the working alliance between counsellor and client, the BACP definition does have something to say about the three aspects of the alliance outlined by Bordin (1979), that is, bonds goals and tasks, but it does not consider views, the fourth aspect introduced by me.
Bonds

When it comes to addressing the bond aspect of counselling, the BACP specifies two counsellor qualities that should be present: acceptance and respect for clients; and two which should be absent: judging and exploiting clients. Note that this definition addresses neither the client’s contribution to the bond nor the interactive nature of the bond between client and counsellor.

Goals

The BACP definition does specify the goals of counselling, which it is says are to enable choice, change or to reduce confusion. While these are rather vague goals, they do address Mahrer’s (1967) point that the goals of counselling are twofold: to overcome emotional disturbance (BACP’s ‘reduce confusion’) and to promote growth (BACP’s ‘enable choice and change’).

Tasks

As can be seen from Table 1.1, The BACP definition of counselling focuses heavily on the counsellor’s tasks, almost to the exclusion of the tasks of the client, who is just asked to explore various aspects of their life and feelings and to talk about them freely and openly. Perhaps this imbalance is not surprising given that the BACP is attempting to define what the counsellor’s tasks are, but it does tend to relegate the client to playing a bit part in the ‘action’ of counselling.

The BACP definition: counselling as an ethical enterprise

In my component analysis of counselling, I argued that there are three ethical domains to the counselling endeavour: informed consent, confidentiality and activities in which counsellors engage both to protect themselves and their clients and to further their own personal
and professional development. Interestingly, the BACP definition just focuses on counselling taking place in a private and confidential setting and does not mention the two other ethical domains.

**The BACP definition: counselling as a process**

Earlier in this chapter, I argued that the process nature of counselling is one of its major components and I expand on this theme in the final chapter. The BACP definition of counselling does mention this subject, but only once and, in doing so, focuses on the development of trust between the counsellor and client as a hallmark of their developing relationship. In making this clear, the BACP definition also mentions that there are consequences of this development of trust: it enables clients to look at many aspects of their lives, their relationships and themselves which they may not have considered or been able to face. This shows the interactive nature of the components of counselling, a fact which should be borne in mind in the following chapters.

**The BACP definition: the influence of context on counselling**

As mentioned above the BACP definition of counselling stresses that ‘Counselling takes place when a counsellor sees a client in a private and confidential setting.’ However, there is no other mention of the influence of context on counselling in the definition.

Having now considered one definition of counselling in depth, I will now clarify the nature of counselling by discussing what it does not involve.

**What counselling is NOT**

Another way of understanding counselling is to look at other helping activities that are typically not used by counsellors – to look at what
counselling is not, as it were, and a number of writers on counselling have taken this approach. For example, here is Pete Sanders’s (2002) view.

**Counselling is NOT being a friend**

Friendship has a mutual two-way focus which involves many different aspects, while counselling has a one-way focus on the well-being of one of the participants – the client. Friends go out together and go on holiday together. Counsellor and client decidedly do neither of these!

**Counselling is NOT befriending**

Befriending is different from friendship in that it is more of a one-way relationship, whereas friendship is two-way. While the befriending relationship is similar to counselling in that it is focused on the ‘client’s’ well-being, it is dissimilar in that it has much looser boundaries than the counselling relationship. Thus, as a befriender you may well accompany the befriended to social gatherings to offer company and immediate support, whereas you would not do this as a counsellor. The major goal of befriending is to help lessen the person’s sense of social and personal isolation. In so doing, the befriender is prepared to be the *direct* source of the person’s social contact. When counselling has the goal of lessening the client’s sense of isolation, the counsellor aims to facilitate the client to find others in life to relate to, and will not aim to be the source of that contact.

**Counselling does NOT involve caring in a parental way**

Being a parent has a much greater involvement in the person’s life than being a counsellor. In addition, being a parent often involves encouraging the person to do what the parent wants rather than what the person wants. This is not a part of counselling (or should not be!).

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Counselling is NOT ‘treating’ or ‘healing’ like a doctor

Treating or healing implies the administration of a healing procedure by an expert to a person who passively receives it. Counselling involves the active involvement of the client and, while the counsellor has expertise, this is not used to get the person to accept passively what the counsellor says. Having said that, there are some counsellors who embrace the medical model and who talk of counselling as treatment.

Counselling is NOT instructing or teaching

Counsellors who are person-centred and psychodynamic would claim that they would not instruct or teach clients a body of knowledge or even skills to help themselves. These practitioners do not regard these activities as part of the counselling process. On the other hand, cognitive-behavioural counsellors would not hold this view. These practitioners argue that there is an important place in counselling for teaching their clients the cognitive-behavioural perspective on their problems and for instructing them in important self-help skills. This is one area in which CBT (cognitive-behavioural therapy) differs from person-centred and psychodynamic counselling.

Counselling does NOT involve guiding the client

Guidance involves giving a person access to accurate and appropriate information to help them make informed choices. It suggests that the helper is knowledgeable about where this accurate information is to be found, and most counsellors would not claim such expertise. On the other hand, other counsellors do have such expertise (for example, career counsellors) and as long as they help their clients (a) to explore the use of such information in a way that respects the clients and (b) to make the best choices for themselves,
it is a moot point whether such guidance can be seen as part of counselling or as complementary to it.

**Counselling is NOT advising**

When advice is given – and assuming that it is well-meaning – it is usually given within the adviser’s frame of reference. In other words, the adviser has a clear sense of what would benefit the advisee and advice is given to encourage the latter to do certain things that in the adviser’s view will benefit the advisee. Advice frequently has undertones of ‘if I were you, I would …’ Counsellors generally do not give advice, for two reasons. First, counsellors work within their clients’ frame of reference rather than from their own. Thus, a course of action that may be right for the counsellor may not be right for the client. Secondly, advice-giving does little to encourage clients to think for themselves. What counsellors (at least from certain orientations) are prepared to do is to help their clients develop various ways of achieving their goals and evaluate the advantages and disadvantages of each course of action so that they can choose the best course for themselves. In advice-giving, advisers are basically using their brains; in counselling, counsellors encourage their clients to use their own brains. Thus counselling fosters client autonomy in ways that advice-giving generally does not.

**Counselling is NOT just using counselling skills**

Many professionals may use counselling skills in the course of their work, but this does not mean that they are engaged in counselling. Thus, when a nurse in the course of nursing a patient listens attentively and encourages that patient to express and clarify their fears, that nurse is not engaged in counselling; rather he or she is being a good nurse. Here the nurse is using skills that a counsellor would use, but is using them in the service of nursing. As Sanders (2002: 9) notes, when a
professional such as a nurse, teacher or manager employs counselling skills it is ‘in a manner consistent with goals and values … of the profession … in question’. He also notes that the use of such skills generally enhances the profession-specific skills of the practitioners in these professions. That is why I said that when the nurse in the above example uses counselling skills with the patient, he or she is being a good nurse. When a counsellor uses counselling skills, to use Sanders’s words, it is in a manner consistent with the goals and values of the profession of counselling. From a person-centred perspective, however, there tends to be an avoidance of the use of skills, but instead a strong focus on integrating the three core conditions as integrated attributes (Casemore, 2006, 2011).

Counselling is NOT life coaching

Since Sanders (2002) published his view on what counselling is not, life coaching has grown in popularity. In my view, while there are some similarities between counselling and life coaching in that they are both concerned with helping the client live more resourcefully, there are sufficient differences for me to state that counselling is not life coaching (a point also made by McMahon, 2005). Life coaching is a predominantly future-oriented form of helping where the focus is on helping the client to identify and work towards personal objectives. In general, lengthy discussion of the client’s past is eschewed and if the client has a number of personal problems that impede him (in this case) from working towards his objectives then he is referred for counselling or psychotherapy. By contrast, while counselling can help the client to identify and work towards personal objectives this is not its only raison d’être. Counsellors will help the client to discuss what he wants to discuss, be it issues rooted in the past or present or likely to appear in the future. Counsellors will help the client discuss enduring emotional problems (whereas life coaches will not) and their training equips them to do so (whereas training for life coaching does not do so).
If we take a process view of counselling, then counsellors are more likely to help clients identify and work towards their personal objectives in the latter phase of counselling once the clients have sufficiently addressed their emotional problems to do so. It may be that CBT therapists are the group of counsellors most able to adopt the mantle of a coach at that time, given CBT’s emphasis on specificity and goal-setting. Psychodynamic counsellors seem less comfortable in adopting a focused goal-setting approach (unless they are practising brief psychodynamic therapy) and person-centred counsellors will help their clients do so, particularly if the request to do so emanates from the client.

Segue

In this opening chapter, I have outlined and briefly discussed what I see as the components of counselling and considered these in the context of the latest definition of counselling published by the British Association of Counselling and Psychotherapy in November 2003. I also discussed the nature of counselling by considering several things that counselling is not. In the next chapter, I will amplify my view of the nature of counselling by considering the nature of the bonds between counsellors and clients.

Discussion Issues

1. What are your views of the BACP definition of counselling?
2. What are your views of my component-based analysis of counselling?
3. How useful do you find the concept of the working alliance that I have presented in this chapter?
4. What are your personal strengths and weaknesses and how may these impact on your work as a counsellor?
5. In general terms, how do you think that the context in which you practise as a counsellor influences your work?