

EIRINI BAGANA

1301463

M6X01443

The main focus of this essay will be the critical discussion around the relationship between client and counsellor mainly through the cognitive-behavioural therapy approach, the benefits, disadvantages and risks in comparison to other approaches. According to Mental Health Foundation: “Cognitive behavioural therapy - commonly known as CBT - is a type of therapy that works by helping you to understand that your thoughts and actions can affect the way you feel. It teaches you to observe the way your behavior and thoughts can affect your mood, then work to build new habits that help you to feel better.”(Mental Health Foundation, n.d.) Also, there will be a discourse on how philosophical concept(s) is combined within the therapeutic session.

To begin with, in the twenty-first century, where the fast-paced environment of today's society does not seem to be slowing down for anyone, it is taking over people's lives and in this way, causes he society difficulty in handling issues which are affecting various aspects of their life; such as personal, emotional, mental and social; the necessity for an outlet to alleviate the burden — both mental and emotional — caused by the high demands of our community, has the potential to lead to several hardship(s) for the individual, hardships that could be inflicting physical strain. For this reason, the importance and need for counselling have increased over the years alongside with the therapeutic approaches counsellors have developed; to mention a few: Cognitive-behavioural therapy, psychodynamic and person-centred. Of course, it is recognised that every counselling approach has pros and contras; the counsellor will be assessing the client during the first sessions

with the objective of deciding which method will be more beneficial for the client's progress during the time in therapy.

Although, the majority of the population is either not aware of the counselling services existing around their living area, are not fully informed on what is entailed in a session or are influenced by the misconceptions society has fabricated upon counselling. Many people keep turning to their friends for advice, which, as an initial step can be helpful; yet, if the issue that is causing trouble to the individual is of a need to be discussed with an expert, friends will not be capable to support the client any longer. Additionally, the counsellor has certain qualities and tools at his/her disposal which are meant to be used for the client's best interest; some of those qualities are: self-awareness, communication, kindness, tenacity and persistence which enable the counsellor to competently help the client.(Counselling-directory.org.uk, 2015)

“The ‘being’ qualities of the counsellor coupled with construction of meaning by client self-narration, in the context of a complex yet facilitative therapeutic alliance, increased client self-esteem and self-control to address this damage and reconnect the client with their sense of self.”(Law, 2009)

Furthermore, CBT (Cognitive-behavioural therapy) — along with other approaches — has a number of advantages and disadvantages depending on the client's receptiveness on the therapy; to be more precise, CBT is used to fraction the individual's current issues in smaller portions. (nhs.uk, n.d.) There are several advantages of employing CBT to help the client tackle issues he or she is facing at the present time, which, based on the information on (website) are:

- “ Cognitive-Behavioral Therapies are very instructive. When clients / patients understand how to counsel themselves rationally, they have confidence that they will continue to do well. For this reason, cognitive-behavioral therapists teach their clients rational self-counseling skills.

- Cognitive-Behavioral Therapies are cross-cultural. They are based on universal laws of human behavior. They also focus on the client's goals, rather than attempting to impose the therapist's goals on the client.
- Cognitive-Behavioral Therapies can be researched. Because there are clearly defined goals and clearly defined techniques, CBT can be examined with scientific research.
- Cognitive-Behavioral Therapies are adaptive. The fundamental principle of CBT is that thoughts (cognitions) cause our feelings and behaviors.” (National Association of Cognitive-Behavioral Therapists, 2018)

Accordingly, the composition of CBT can be of benefit to those people who respond more positively to a structured layout as a result of the formula's analytical nature; by dismantling the issue in segments, the client is able to focus on the task with better ease as the matter at hand is not daunting due to the weight of the original issue.

Further, CBT

Moreover, not everything in life is fully in the benefit of the individual(s); there is a range of reasons as to why Cognitive-Behavioural Therapy could not be the most advantageous option for a client. In detail, CBT is generally used for a short-term period of treatment and is — which can be extended if the client is inclined to do so — it follows a pattern of steps to help the counselled address the matter(s) with a structured thought process. (Situation, Thoughts, Emotions, Physical Feelings and Actions). (RC PSYCH ROYAL COLLEGE OF PSYCHIATRISTS, 2015) More, through observation and assessment of pattern, the patient might be able to identify the technique which is used by the counsellor within the session for his or her treatment; there is the possibility of feeling let down and/or manipulated by the counsellor, the trustworthiness and sincerity of the professional person could be undermined due to the client's anxieties and thoughts created by such

event. Additionally, CBT utilises the part of the brain that is the command centre for emotions, which is linked to vulnerability, sensitivity and reluctance; in situations when a person's high brain activity overtakes the aforementioned section, rational thinking through the teachings of CBT cannot be implemented. In the words of Tom Bunn: "CBT and insight therapies rely on the left brain which, compared to the right brain, is emotionally fragile. When arousal becomes too high, executive function is overwhelmed and shuts down. Cognition can no longer regulate arousal or anxiety. At this point, the right brain may be able to save the day." (Bunn, 2014)

Besides, apart from the disadvantages of a treatment, there are also potential risks to be considered for the client; the therapy itself, while it has been solving issues can end up creating more of them; in retrospect, even though the examination has the possibility of helping the individual attending the session, the side effects caused by CBT can be the product of the client's realisation that the matters they have been encountering, in the form of further distress, tension in existing relationships with others and negativity; this sort of exposure with one's problem's through CBT is producing a constant reminder of events the client has experienced. (Jarret, 2018) Another danger stems from CBT acclaim among therapists; many young and inexperienced therapists will use CBT to treat their clients without the proper framework and sincerity needed to create balanced dynamic between counsellor and client. In addition, for the aforementioned risks to be avoided, the counsellor as the expert, has the responsibility of being qualified and prepared to aid the client for the purpose of avoiding and/or managing those side effects.

Correspondingly, another method used in counselling is the Person-Centred approach. To clarify, in line with Julia Miller: "Person-centered therapy (PCT) is based on a foundation of empathy, unconditional positive regard, and authenticity. It assumes that people are naturally inclined toward positive growth and that they have a great capacity for self understanding and modifying their behavior and attitudes, given the right environment/climate/support." (Miller, 2017) Further, the Person-Centred process has a more interactive relationship in comparison to CBT; while the

counsellor is attentive to the client's story and has a positive attitude towards him/her, the client as the recipient views the counsellor favourably because of the supporting nature of the former therapy; the client is able and encouraged to articulate the experiences he or she has encountered throughout their life, a place where the individual is safe to speak about anything that is on their mind in a non-judgemental environment. According to writepass.com:

“Its strengths include the fact that the patient is the one guiding the experience whereas the therapist reflects on what the patient is doing or saying and can paraphrase the ideas together with practices (Giddens, 2001). The therapist does not judge the patient as being right or wrong. The objective of the person-centred therapy is improving the trust of the patient in themselves and their self-confidence. It also helps them in becoming more able to live in the period, and letting go of the emotions that are unproductive and negative, such as guilt regarding the past events that are difficult to change (Branaman, 2001).” (The WritePass Journal, 2017)

On the other side, the contras can outweigh the positives depending on the client's condition and experiences he/she has had prior to counselling. Firstly; the continuous optimism can create a feeling of oppression and restraint, there is a possibility of the client to be in need of assistance for analysis and ways of facing dissenting emotions in order to be able to handle them in the future. (Person-centred Therapy, n.d.) Although, in times of distress and need for methodology, the CBT method will enable the client to follow a thought process which would serve as a guide for future events. Secondly; if the counsellor is being passive and mainly focusing on the supportive feature of the session, the client will not become competent in challenging the problems that are holding them back, whereas, in Cognitive-Behavioural Therapy, the counsellor's role is active on a different scale; by acting in accordance with the mechanism of CBT, questioning the client with a set of questions tailored for the client and not diverting from its basis the counsellor is able to achieve the

goal desired. In addition, the counsellor is challenging the client by wielding the knowledge and method of CBT to the advantage of the client.

More, by using PCT (Person-Centred Therapy) and its three conditions: empathy, congruence and unconditional positive regard; the relationship of therapist and client within the counselling sphere has the danger of enforcing negative behaviour on the client's part; as a result, by solely having unconditional belief and optimism in a person the individual(s) may not be able to realise on their own where they might be wrong, continue with that behaviour and will not succeed in making any changes or improving themselves. Also, it is understood that some people need to be heard, encouraged to gain confidence and appreciation towards themselves, yet for others if the centre of attention does not shift or there is no constructive dialogue within the safety of the counselling setting, they will not come to be in a position of identifying with their issues and explore themselves.

“Whether or not that self should be developed in any particular way, or whether that self should acquire any particular background knowledge, seems to me a question which is more often side-stepped than answered within the person-centred tradition.”(Dr Greg Mulhauser et al., n.d.)

Indeed, counselling by definition is: “The provision of professional assistance and guidance in resolving personal or psychological problems.”(Oxford Dictionaries | English, n.d.) Throughout a session, there is an exchange of thoughts between the client and the counsellor, because of this a dialogue is taking place during the session. More, one of the formats of speech used in CBT is based on the Socratic questioning; to elucidate, the Socratic Questioning is: “The Socratic approach to questioning is based on the practice of disciplined, thoughtful dialogue... believed that disciplined practice of thoughtful questioning enabled the student to examine ideas logically and to determine the validity of those ideas.” (Intel.com, n.d.). The principles of philosophical teachings are efficiently supporting the counselling community; new and creative strategies can be integrated

for the purpose of a more constructive dialogue and interaction within the session. In particular, within the Cognitive-Behavioural Therapy method discussion between the participants is essential to be of assistance to the client, through dialogue the counsellor is challenging the client in order to confront any thoughts provoking negative emotions and behaviour; by way of questioning, challenging the client on the notions in mind and pace necessarily adjust to the client.

“Socratic questioning is a technique used in cognitive therapy, where a therapist will use a line of questioning in order to identify, and challenge the validity of, thoughts, beliefs and assumptions associated with a client’s troubles...”(Psychologyconcepts.com, n.d.)

In conclusion, the therapeutic relationship between counsellor and client is affected by an assortment of factors, to mention a few: the method the counsellor is applying to help the individual, the environment and interaction between the participants. CBT is frequently used for people with anxiety and depression disorder does not mean it cannot be utilised for other disorders; yet, since every individual has his/her own idiosyncrasies. The involvement of philosophical principles is aiding the therapist through the structured; for example, in conversations between counsellor and client where CBT is used the Socratic questioning is a tool with great strength. There are other therapies which can be more effective depending on the individual’s straits and response — if existent — to previous therapeutic methods. However, that does not mean that other techniques do not possess their own risks, challenges and merits. Also, by building an empathic, accepting, genuine and open atmosphere for the client; counselling itself becomes more approachable to people who could be struggling to open up.

References

Sites

nhs.uk. (n.d.). *Cognitive behavioural therapy (CBT)*. [online] Available at: <https://www.nhs.uk/conditions/cognitive-behavioural-therapy-cbt/> [Accessed 26 Nov. 2018].

Mental Health Foundation. (n.d.). *Cognitive behavioural therapy (CBT)*. [online] Available at: <https://www.mentalhealth.org.uk/a-to-z/c/cognitive-behavioural-therapy-cbt> [Accessed 26 Nov. 2018].

National Association of Cognitive-Behavioral Therapists. (2018). *Why Cognitive Behavior Therapy (CBT)?*. [online] Available at: <http://www.nacbt.org/whycbt-htm/> [Accessed 26 Nov. 2018].

RC PSYCH ROYAL COLLEGE OF PSYCHIATRISTS. (2015). *Cognitive Behavioural Therapy (CBT)*. [online] Available at: [https://www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/cognitive-behavioural-therapy-\(cbt\)](https://www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/cognitive-behavioural-therapy-(cbt)) [Accessed 27 Nov. 2018].

Bunn, T. (2014). *Why CBT Can't Regulate Anxiety*. [online] Psychology Today. Available at: <https://www.psychologytoday.com/gb/blog/conquer-fear-flying/201402/why-cbt-cant-regulate-anxiety> [Accessed 29 Nov. 2018].

Miller, J. (2017). *Person-Centered Therapy vs. Cognitive-Behavioral Therapy: What's the Difference?*. [online] Lifedodojo.com. Available at: <http://www.lifedodojo.com/blog/person-centered-therapy-vs.-cognitive-behavioral-therapy-whats-the-difference> [Accessed 1 Dec. 2018].

National Association of Cognitive-Behavioral Therapists. (2018). *Why Cognitive Behavior Therapy (CBT)?*. [online] Available at: <http://www.nacbt.org/whycbt-htm/> [Accessed 1 Dec. 2018].

Person-centred Therapy. (n.d.). [ebook] J & S Garret Pty Ltd. Available at: <https://www.counsellingconnection.com/wp-content/uploads/2013/03/Person-Centred-Therapy.pdf> [Accessed 1 Dec. 2018].

Law, N. (2009). *Clients' Experiences of Counselling: A Phenomenological Investigation*. [online] Era.lib.ed.ac.uk. Available at: <https://www.era.lib.ed.ac.uk/handle/1842/3593> [Accessed 1 Dec. 2018].

Oxford Dictionaries | English. (n.d.). *counselling* | *Definition of counselling in English by Oxford Dictionaries*. [online] Available at: <https://en.oxforddictionaries.com/definition/counselling> [Accessed 1 Dec. 2018].

Intel.com. (n.d.). [online] Available at: <https://www.intel.com/content/dam/www/program/education/us/en/documents/project-design/strategies/dep-question-socratic.pdf> [Accessed 1 Dec. 2018].

Psychologyconcepts.com. (n.d.). *Socratic Questioning* | *Psychology Concepts*. [online] Available at: <http://www.psychologyconcepts.com/socratic-questioning/> [Accessed 2 Dec. 2018].

Jarret, C. (2018). *Psychotherapy is not harmless: on the side effects of CBT – Christian Jarrett | Aeon Ideas*. [online] Aeon. Available at: <https://aeon.co/ideas/psychotherapy-is-not-harmless-on-the-side-effects-of-cbt> [Accessed 2 Dec. 2018].

Dr Greg Mulhauser, M., Psychotherapy, T., Dr Greg Mulhauser, M. and Dr Greg Mulhauser, M. (n.d.). *Person-Centred Counselling*. [online] CounsellingResource.com: Psychology, Therapy & Mental Health Resources. Available at: <https://counsellingresource.com/therapy/types/person-centred/> [Accessed 2 Dec. 2018].

Counselling-directory.org.uk. (2015). *20 qualities to look for in a potential therapist*. [online] Available at: <https://www.counselling-directory.org.uk/counsellor-articles/20-qualities-to-look-for-in-a-potential-therapist> [Accessed 4 Dec. 2018].