

Personal Model Paper

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The use of counseling styles and techniques are often driven by personality type, temperament and available opportunities for learning. It has been my observation that though most counselors profess to use one particular modality, this usually serves as an anchor and treatment becomes an integration of a few different theories. In their writings, Spruill and Benschhoff (2002) emphasize the importance of creating a therapeutic identity, through the integration of life experiences, learned competencies and skills.

The Theoretical Evaluation Self-Test, created by Dr. Dan Coleman, is a test of theoretical orientation given to mental health clinicians and or graduate students (Spruill & Benschhoff, 2002). As mentioned above, character traits, experience and temperament produce an affinity towards certain modalities or theories and according to the theoretical evaluation self-test, my theoretical counseling inclinations incorporate psychodynamic theory with a score of 26, cognitive theory also with a score of 26 and pragmatic or existential theory with a score of 24.

Sigmund Freud is credited as the father of Psychoanalysis, a theory that deals with the unconscious and how the past contributes to who a person is in the present (Corey, 2017). This theory posits that human behavior is a direct result of three components of the psyche: the id, ego and superego (Barlow & Durand, 2015). The “Id” operates on the pleasure principle and is said to be the source of strong sexual and aggressive energies (Barlow & Durand, 2015). This component of the mind seeks unchecked gratification, without rational and the consideration of consequences (Barlow & Durand, 2015). The “Ego” behaves in contrast to the “Id” as it operates according to the reality principle utilizing logic and reason and is referred to as a secondary process (Barlow & Durand, 2015). And finally, the “Superego,” also known as the conscience finds its basis in the moral principle seeking to abide by societal standards (Barlow &

Durand, 2015). Our morals are a compilation of learned societal norms learned from parents and culture (Barlow & Durand, 2015).

I utilized a psychodynamic approach with a middle-aged man, who came into my office very frustrated and angry. Mr. M's marriage was in danger because in order to avoid confrontation with his family he had emotionally checked out from his wife and two daughters and basically slept on the couch like a roommate for the whole summer all while continuing to be the provider and protector of the home. When he decided to check back in, his family was extremely angry with him and his wife was acting out. I wanted to learn who Mr. M was and why he had taken such extreme measures with his family. It was apparent to me that his choice of action was based on a very deep desire to escape and I wanted to understand where he learned how to cope in this manner and so we went back into his own childhood.

What I learned was that Mr. M was forced to grow up way too fast as he watched his mother get violently attacked by a boyfriend. Mr. M took on the responsibility of cleaning his mother up after these beatings for as early as he could remember, taking on the house chores, and finding a job to support his family. He recounted tales of going to the supermarket and shopping for household groceries, and washing clothes by hand, and always caring for others. And this became the person he would continue to be in every single relationship. He never considered his own feelings or happiness and was at a place as a middle-aged man where he felt unappreciated, frustrated and disconnected.

Uncovering this information gave great insight to the man that was sitting before me and so I after hearing all of this I asked him one question "what has Mr. M, ever done for Mr. M"? And was astonished to find that he really could not answer because his whole life was lived in duty to others. Understanding what was beneath some of the underlying causes for his behavior

helped him become more aware of his motives now and making sure that he is making a choice outside of just obligation.

Cognitive therapy focuses on identifying and reframing and or changing faulty, inaccurate or distorted thinking patterns, emotional responses and disturbing or dysfunctional behaviors (Corey, 2017). This theory is widely used for treatment and counseling of substance abuse, Generalized Anxiety Disorders (GAD), and adjustment disorders, to name a few.

I recently began individual counseling with a gentleman who was court mandated for counseling for a DUI. A huge part of Cognitive Behavioral Therapy (CBT) is educating the client on ways of coping with stress, coping with anxiety, and or helping the client adjust to life changes. Hence, we focused on teaching about the dangers of driving while under the influence, dispelled some myths and discussed some alternatives to ways of relaxing and destressing while abstaining. Mr. S admits that for the first time he has been able to abstain from alcohol because his attitude has changed towards drinking and he wants to stay healthy. He asserts that he had no clue as to the physical dangers of alcohol and did not believe that he was an alcoholic, but learning that there were different types of alcoholics and accepting that he fell into one of those categories helped him change his thinking.

And finally, the last orientation that was amongst the high-ranking on my self-test was that of the pragmatic orientation. This orientation is commonly referred to as the existentialism and is based on the principle of finding self and the meaning of life through free will, choice, and personal responsibility (Tan, 2011). Tan (2011) contends that existential therapy is not a specific technique but philosophical approach which makes it ideal for a wide array of individuals and focuses on helping the client experience their existence in a congruent, meaningful and responsible way.

This type of approach was recently used with a client who came into my office with a conflict of faith. Ms. F is a Christian and recently had a personal crisis and conflict that was causing her extreme anxiety. When she arrived at her first appointment Ms. F complained of extreme anxiety and had experienced a few panic attacks as a result. As we continued through our sessions she totally opened up about a secret she had which had cause this conflict of faith, hence she was not living harmoniously, she was not living according to her faith and this was what was causing this sense of incongruency and in so causing this extreme anxiety. The counseling sessions then became tailored to helping her get back to living an authentic life and the result of this was that her anxiety disappeared. Counseling with Ms. F consisted of talk therapy, evaluating her own values, reading some helpful books and having her find her own accountability partner.

In integrating the three orientations psychodynamic, cognitive and pragmatic I will consider Mr. M as an example of my interpretation of how these models would work together because we already have an idea of what has happened with him and his family. My priority, before implementing any techniques, would be to develop a healthy rapport making sure the client is comfortable and ready to be vulnerable and transparent without fear of judgement. Next step, and as mentioned above, would be the psychodynamic approach going back into his childhood, considering family history, relationship dynamics and his family roles. A genogram could be a helpful tool during this point to give a physical representation of what his family looks like.

The existential approach allows for flexibility and tailoring of the theories to fit Mr. M's counseling sessions, hence as we begin to dive into his past, I would also ask questions about his core beliefs, who he is and who he would like to be, especially because he communicated his

dissatisfaction with where he currently is in his life. Another important question would be about his expectations as a man, husband and father as well as ask him about his own needs and if he feels as though they are being met. Asking these types of questions will help reveal any incongruencies in Mr. M's life and help him understand his own needs a deeper level. The analysis of his past can also reveal information about why he feels so compelled to deny his own happiness and seek to be in the role of protector and provider.

And finally, the addition of a cognitive technique will help Mr. M as it will consist of reframing some of his faulty thinking, specifically that which he learned as a child about survival and a man's role. Also, I would implement some homework into our sessions, like writing goals out for himself, or listing things that made him happy that he no longer practiced. Other suggestions would include meditation and prayer. Studies have proven that these practices have improved mental health and shown to reduce stress in individuals as well.

To conclude I find that the orientations that I received high levels in were accurate as I use a combination of the three techniques in one form or another. No counselor utilizes just one technique but often uses a combination of modalities to create an individualized, holistic approach to treatment and this allows for the most appropriate and effective course of treatment for the client.

References

- Barlow, D. H., & Durand, V. M. (2015). *Abnormal psychology: An integrative approach* (7th ed.). Belmont, CA: Brooks/Cole, Cengage Learning.
- Corey, G. (2017) *Theory and Practice of Counseling and Psychotherapy* (10th Ed.). Boston, MA.
- Greggo, S.P., & Sisemore, T. (Eds.). (2012). *Counseling and Christianity: Five approaches*. Downers Grove, IL: Intervarsity Press.
- Spruill, D., Benschhoff, J.M., (2000). *Innovative methods: Helping beginning counselors develop a personal theory of counseling*. Counselor Education and Supervision: Sep 2000; 40. 1; ProQuest Central
- Tan, S-Y. (2011). *Counseling and psychotherapy: A Christian perspective*. Grand Rapids, MI: Baker.