

Essay – Unit 1

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1 # - Overview of Contemporary Counseling Methods"

Modern counseling methods refer to various approaches and techniques to assist individuals, couples, and families in handling emotional and mental health concerns. One example is the psychodynamic approach, which includes both psychoanalytic and Adlerian therapy. (Corye, 2012). Psychoanalytic therapy, developed by Freud explores the unconscious mind and past experiences to understand behavior and emotions. Adlerian therapy, developed by Adler, emphasizes individual perspective and social connections for personal growth and self-improvement. Both use techniques to analyze experiences and improve mental health and relationships (Tan, 2022).

Other example of modern counseling methods is cognitive-behavioral therapy (CBT), which focuses on thoughts, emotions, and behaviors. CBT suggests that negative thoughts and beliefs can lead to negative emotions and behaviors and changing these thoughts can improve emotional and behavioral functioning. Within the same approach, reality therapy emphasizes five basic human needs and uses various techniques such as confrontation, contracts, instruction, role-playing, and questioning to promote choice and self-improvement (Tan, 2022).

Another modern approach is experimental and relationship-oriented athecncics with focus on present behavior, emotions, and self-awareness, using existential therapy, person-centered therapy, and Gestalt therapy. Systems and postmodern approaches, which focus on the social

and cultural context of an individual's experiences, are other examples of contemporary counseling methods, including feminist therapy, postmodern approaches, and family system therapy (Tan, 2022). Family systems therapy, also known as family therapy, views the family as a complex system where one member's behavior affects others. It aims to identify and change behavior patterns causing problems and improve the family's functioning by working with the entire family.

After reviewing contemporary treatment models, I believe cognitive-behavioral therapy is effective for various mental health concerns. It is practical and goal oriented. However, I prefer an eclectic approach that incorporates multiple therapies. I have reservations about postmodern therapy as it is less structured, in my opinion, has less clear guidance, and is criticized for being overly theoretical with no concrete strategies.

References:

1 - Tan, S.-Y. (2022). *Counseling and psychotherapy a Christian perspective*. Baker Academic, a division of Baker Publishing Group.

2 - Corey, G. (2012). *Theory and practice of counseling and psychotherapy*. Cengage learning.

2 # - Stan's case

In my assessment of Stan, I noted that he represents many young people in our society today. He seems to lack a clear sense of self and is tormented by various personal issues. His father infused in him a feeling of inadequacy and a belief in his own failure. Furthermore, his mother's constant negative criticism further exacerbated his feelings of worthlessness. In addition, his brothers were often considered superior to him in an inadequate and depressing standard of comparison, solidifying his feelings of inferiority. His marriage was also a source of disappointment, as his

wife reflected many of the negative characteristics exhibited by his mother (the search for the mother in the wife?) In addition, there was a lack of religious principles and poor communication in his family. It is important to note that he resorts to alcohol as a way of managing, as it allows him to feel more confident and sociable and reduces anxiety. About the desire for suicide, it is vague, and I did not see any projection of planning, but it needs to be investigated with him better. His lack of religious principles makes him adrift in their deep-water world, with no solid grounds to project hope.

On a positive note, I observed that Stan is aware of his current situation and motivated to change his life's course. He recognizes the need for assistance and cites the encouragement from his boss as a catalyst for returning to school. Additionally, while he may not fully acknowledge his alcohol addiction, he is aware of his lack of control when under the influence of alcohol. This insight demonstrates self-awareness and a willingness to take steps toward positive change.

3 # I have an old book

4 # - Self-Inventory of Major Concerns as a Beginning Counselor

__1_ 1. I am concerned that my anxiety will keep me immobilized, and that I will be very passive as a counselor, lest I make mistakes.

__1_ 2. I fear that I will be so concerned about being appropriate that I will forget to be myself.

__2_ 3. I might say too much about myself, and in doing so I will burden the client and also take the focus off of him or her and put it on myself.

__1_ 4. I think that I should be pretty near perfect, and that if I blunder, I could really mess up my client.

- 2 5. I wonder about how honest I should be with a client.
- 2 6. I will feel threatened during moments of silence, thinking that I am expected to do or say something.
- 2 7. It will be difficult for me to deal with demanding clients.
- 2 8. I will feel helpless with clients who are not committed to working or with 31 involuntary clients.
- 1 9. I will probably demand instant results as a way of avoiding getting discouraged.
- 2 10. I have an expectation that I should be able to help every client.
- 2 11. I anticipate I will worry a lot about whether I am intervening appropriately.
- 2 12. I worry that I might over-identify with certain clients to the extent that I will take their problems on as my own.
- 2 13. I think that I might be inclined to give too much advice.
- 1 14. I can see myself trying to persuade clients to value what I value.
- 1 15. I have trouble in deciding how much responsibility is mine and how much is my client's.
- 1 16. I have real doubts about my ability to help someone who is in a crisis.
- 2 17. I worry that I lack the knowledge and skills to meet the needs of clients from diverse cultures.
- 1 18. A concern of mine is that I will get burned out.
- 1 19. I am concerned about giving everything I have and then not getting any appreciation in return.
- 2 20. I wonder if I can do what I believe is important as a counselor and still work within the system.

5 # - Cases discussion

5.1 - A client who has not questioned her religious beliefs.

5.1.1 - Upon listening to Brenda, I intend to initiate a discussion by having her identify her primary emotional struggles, such as feeling sad due to her dependence on her parents. This will serve as a foundation for further conversation regarding her struggles with dependence and independence. By clarifying the dynamics of her relationship with her parents, Brenda will better understand her current circumstances.

5.1.2 - After listening to Brenda, I plan to start a discussion by having her identify her primary emotions related to her issues, such as feeling sad or angry about being dependent on her parents. It will form the basis for our conversations about her struggles with parental dependency and her need for independence. By understanding the dynamics of her relationship with her parents, Brenda will better understand her current situation and why she feels confused.

5.1.3 - As a professional, my values will guide my approach to Brenda but will not impose on her. The focus will remain on her needs and goals. If Brenda shares similar values, they will be incorporated practically. Brenda's autonomy and choices must be respected and honored.

5.1.4 - It is possible that utilizing religious values to justify actions or behaviors may indicate a superficial commitment to one's religiosity or even a convenient way to avoid self-evaluation and taking a necessary stance on one's commitment to their faith. In my initial assessment, the individual's relationship with their parents may present negative dynamics, but it does not necessarily block the possibility of a healthy and significant religious life.

5.2 - A woman struggling over an abortion decision.

5.2.1 - Explore the value of life and its importance in Melina's decision-making process. Nurture confidence and belief that love can change her world. Show empathy towards Melina's financial limitations and dreams of returning to school and open a dialogue about her reasons for considering abortion. Propose a time frame for deeper conversation before making any final decision while always prioritizing active listening and a welcoming attitude towards Melina. Also, inquire about her husband's position on the decision.

5.2.2 - In my professional opinion and inside of my Christian beliefs, these two points are crucial in providing hope and support in her decision to continue with her pregnancy. Therefore, I will place a significant emphasis on these two points in our discussions.

5.2.3 - As a Christian professional, I would advise continuing with the pregnancy and exploring different possibilities for the child's life after birth. With my advice about considering continuing with the pregnancy, I will express to her my beliefs about the value of life. I always choose life as a gift from God.

5.2.4 - By talking with her about continuing with the pregnancy, providing information about the options available and potential outcomes, and clarifying that the decision should be theirs (for her and her husband). It is important to remember that my role as a therapist is to provide support and guidance, but ultimately the decision should be based on their values, beliefs, and goals. However, showing her the power of love from an external perspective can give her hope and strength to make a better decision.

5.2.5 - As a professional, it would be beneficial to have a deeper understanding of Melina's beliefs, emotional status, and family composition if we have already had a long-term process. It would enable me to better align my approach with her specific needs and concerns. However,

regardless of the circumstances, I will always strive to present the option of continuing with the pregnancy positively, highlighting its potential benefits and minimizing any negative emotional impact. Providing her with a well-rounded perspective on the decision and its potential implications is essential while ensuring that her autonomy and choices are respected and honored.

5.3 - Values pertaining to a client who is intolerant of others.

5.3.1 - I would approach Mrs. Charles' case utilizing a cognitive-behavioral therapy (CBT) strategy. This approach focuses on the individual's thoughts, beliefs, and attitudes and how they influence their behavior. It can be a powerful tool for addressing the issues that Mrs. Charles is facing, particularly regarding her intolerance and difficulty in accepting social and racial differences.

5.3.2 - Working with an older individual can present its own challenges, such as a greater likelihood of entrenched beliefs and a reluctance to change. However, the CBT approach can still be effective in this case. By identifying and addressing the underlying thoughts and beliefs that contribute to her intolerance and difficulty in accepting differences, we can work towards helping her develop new, more inclusive, and accepting perspectives.

5.3.3 - As a therapist and Christian, my understanding of tolerance and love has evolved. I believe in God's love for all, regardless of race, color, beliefs, or sexual preferences. In therapy, I will address and explore the roots of Mrs. Charles's beliefs of superiority, and guide him towards understanding and acceptance, while being mindful of my own preconceptions and beliefs. I will create a safe, non-judgmental space for him to explore and process these issues.