

CHAPTER 2

PERSONAL AND PROFESSIONAL ASPECTS OF COUNSELING

CHAPTER OVERVIEW

This chapter focuses on the personal and professional qualities associated with effective counselors. It emphasizes that some individuals make better counselors than others because of their temperament, experiences, knowledge, and skills. The importance of self-examination and growth is emphasized along with professional development. Academic standards for becoming a professional counselor and credentialing are discussed too.

Systems in counseling are focused on including the development/wellness approach, and the medical/pathology model. Finally, the importance of engaging in professional counseling-related activities is highlighted particularly continuing education, supervision, advocacy and communication through portfolios.

KEY TERMS, CONCEPTS, AND PEOPLE

- advocacy
- accredited counselor education program
- Association for Counselor Education and Supervision (ACES)
- burnout
- certification
- certified mental health counselor (CCMHC)
- compensatory model
- Council for Accreditation of Counseling and Related Educational Programs (CACREP)
- continuing education units (CEUs)
- credentialing
- developmental/wellness approach
- Diagnostic and Statistical Manual (DSM)
- eclectic counseling
- empathy
- enlightenment model
- generalist human services workers
- inspection
- licensure
- Master Addiction Counselor (MAC)
- medical model
- moral model
- National Board of Certified Counselors (NBCC)
- National Certified Counselor (NCC)
- National Certified School Counselor (NCSC)
- National Counselor Exam (NCE)
- paraprofessional
- patients
- peer supervision
- portfolio (working/presentation)
- professional helper
- psychiatrist
- psychologist
- reflective team model

registration
self-awareness
social worker
stress inoculation training (SIT)
STIPS
supervision
synchronicity
wounded healer

CHAPTER 2 - PERSONAL AND PROFESSIONAL ASPECTS OF COUNSELING

The effectiveness of a counselor and of counseling depends on numerous variables including:

- The personality and background of the counselor,
- Formal education of the counselor, and
- The ability of the counselor to engage in professional counseling-related activities such as continuing education, supervision, advocacy, and the building of a portfolio.

The Personality and Background of the Counselor

Negative Motivators for Becoming a Counselor

- Not every one is cut out to be a counselor. Inappropriate reasons for entering counseling include:
 - Emotional distress – unresolved emotional traumas
 - Vicarious coping – living life through your clients or others rather than having meaningful relationships yourself
 - Loneliness and isolation – seeking friendships through counseling others
 - A desire for power – seeking to control others who feel powerless in their own lives
 - A need for love – individuals who are self-absorbed and believe problems are resolved through love and tenderness alone: They think they can give these to the client.
 - Vicarious rebellion – unresolved anger; acting out their own thoughts and feelings through their clients' defiant behaviors

Personal Qualities of an Effective Counselor

- Positive reasons for entering counseling:
 - Feel it's a "calling"
 - Curiosity and inquisitiveness – a natural interest in people
 - Ability to listen
 - Comfort with conversation
 - Empathy and understanding
 - Emotional insightfulness – comfort dealing with a wide range of feelings, from anger to joy
 - Introspection – the ability to self-examine one's feelings and thoughts
 - Capacity for self-denial – ability to set aside personal needs to listen and take care of others' needs first
 - Tolerance of intimacy – the ability to sustain emotional closeness
 - Comfort with power – the acceptance of power with a certain degree of detachment
 - Ability to laugh – the capability of seeing the humor in life's situations and the ability to teach others to see humor
- Personal characteristics
 - Effective over time: stability, harmony, constancy, and purposefulness

- Personal togetherness
- Personality of counselors is as or more important than mastery of skills or techniques
- Sensitivity to self and others – monitoring their own biases, listen, ask for clarification, and explore cultural differences
- Appropriate use of themselves as instruments. They are able to be spontaneous, creative, and empathetic.
- Wounded Healer – (Rollo May)
 - An individual who has resolved emotional experience that has made a person sensitive to him/herself and to others in a helpful way. Therefore, these individuals can be empathetic to others.
- A balance between interpersonal and technical competence
 - Intellectual competence
 - Energy
 - Flexibility
 - Support
 - Goodwill
 - Self-awareness
- John Holland – Certain personality types are attracted to and work in certain vocational environments. Counselors work well in problem oriented environments; calls for investigating possibilities and creating new ideas.
 - Counselors rated as “highly effective” scored highest on social and artistic dimensions. Counselors rated as “ineffective” generally scored highest on realistic and conventional themes.

Maintaining Effectiveness as a Counselor

- Handling stressful life events while still counseling others can result in synchronicity, events that occur coincidentally result in a meaningful connection. In other words, handling one’s own life events may enhance his/her counseling.
- Remain objective, accepting and confronting situations, asserting own wishes, participating in a wellness lifestyle, and grieving.
 - Counselors who have healthy lifestyles and learn from their mistakes and successes are more likely to be effective with their clients.
 - Those who wish to enter the profession need to adapt to losses as well as gains and remain relatively free from destructive triangling patterns (i.e., mom tells daughter about frustration with dad, dad tells daughter about frustrations with mom).
- Avoid problematic behaviors, such as burnout.
 - Burnout is the state of becoming emotionally or physically drained to the point that one cannot perform functions meaningfully. Counselors must develop interests outside counseling and avoid taking their work home.
 - Ways to prevent burnout:
 - Associate with healthy individuals.
 - Work with committed colleagues and organizations that have a sense of mission.
 - Be reasonably committed to a theory of counseling.
 - Use stress-reduction exercises.
 - Modify environmental stressors.
 - Engage in self-assessment.

- Periodically examine and clarify counseling roles, expectations, and beliefs.
- Obtain personal therapy.
- Set aside free and private time.
- Maintain an attitude of detached concern when working with clients.
- Retain an attitude of hope.

Professional Aspects of Counseling

- Levels of Helping
 - Nonprofessional helpers
 - Friends, colleagues, untrained volunteers, or supervisors
 - Various degrees of wisdom and skills
 - No specific educational requirements, level of helping varies
 - Generalist human services workers
 - Have some formal training in human relations skills but work as part of a team
 - Mental health technicians, child care workers, probation personnel, and youth counselors
 - Professional helpers
 - Educated to provide assistance on both a preventive and a remedial level
 - Counselors, psychologists, psychiatrists, social workers, psychiatric nurses, and marriage and family therapists
 - Have specialized advanced degrees and have had supervised internships
- Professional Helping Specialties
 - Counselors frequently interact with psychiatrists, psychologists, and social workers:
 - Psychiatrists – have an MD and complete a residency in psychiatry. They work with people who have major psychological disorders. They work within the biomedical model and prescribe medicine for disorders. Their clients are called patients. They must pass a national and state exam.
 - Psychologists – have a doctorate of philosophy (Ph.D.), doctorate of education (Ed.D.), or a doctor of psychology (Psy.D.). Coursework and internships are centered on clinical, counseling, or school-related areas. State licensures vary. Clinical counselors are usually listed in the national Register of Health Service Providers.
 - Social workers – usually earn a master’s of social work degree (M.S.W.); however, some universities grant a bachelor’s of social work. Some M.S.W.s have advanced training at the doctoral level. All social workers have completed internships in social agencies.
- The Education of Professional Counselors
 - Professional counselors hold either a master’s or doctorate (or both) in counseling and complete internships in specialty areas. They are usually certified by the National Board of Certified Counselors (NBCC) and/or are licensed by a state.
 - Standards for CACREP approved master’s degree programs are listed in your text.

Credentialing of Counselors – Four types of professional credentials

- Inspection - mental health centers are subject to personnel and program inspections (much like a child care center must be inspected). Inspections might include reviewing case notes on treatments, agency procedures, and personal interviews.
- Registration – submission of information to the state about the nature of the practice. Professional organizations, such as ACA, set standards for qualifications as a registrant.
- Certification – State or national boards or departments issue certification stating that an individual has met the requirements for a specialty (just like teacher certification). A competency test is usually required along with letters of reference before certification is issued. Counselors who desire to be a NCC (national certified counselor) must have a minimum of 48 semester hours of graduate study in counseling or a related field, including a master's degree in counseling from a regionally accredited institution of higher education.

<http://www.nbcc.org/users/applicants.htm>

- Courses required for a program of study:
 - Human growth and development
 - Groups work
 - Research and program evaluation
 - Counseling theories/helping relationships
 - Professional orientation
 - Career and lifestyle development
 - Ethics
 - Social/cultural foundations
 - Appraisal
- Supervision
 - Two academic terms of supervised field experience in a counseling setting
- Must pass National Counselor Examination (NCE)
- Non-CACREP programs require 3000 client contact hours postmaster's experience and 100 hours of weekly face-to-face supervision.
- Both national and state licensure is recommended for recognition, state politics, networking, and areas of specialty.
- Licensure
 - All states govern the licensure process. State licensure boards oversee the codes of ethics and offer discipline to those who are licensed who violate the codes.

Attribution and Systematic Framework of the Counselor

- Attributes – what the counselor attributes the cause of a client's problem. A system is a set of ideas, principle, and behaviors (counselor's approaches to client's problem or issue). Four main attribution models are used by counselors:
 - Medical Model – client is not held responsible for the cause or solution of their problem. Counselors of the model are usually experts and provide the necessary services for change. Client may become dependent on counselor.

- Moral Model – self –help model and opposite of the medical model. Client is seen as responsible for causing and solving his/her problem. Counselors are coaches or motivators. Victims may be held responsible for their own victimization.
- Compensatory Model – client is not responsible for the cause of the problem, only for the solution. Counselor and clients are partners to overcome problem. Counselor acts as a teacher who educates, provides skills and opportunities for client to change. Clients may feel pressure to continually solve problems not created by them.
- Enlightenment Model – Client is responsible for the cause but not for the solution. Clients are seen as “guilty.” They need enlightenment about their problem and ways to resolve these problems. Counselors provide the solution. Client may become dependent on counselor.
- Systems of Counseling
 - Developmental/Wellness Approach – based on the idea of developmental growth at different stages of life. For instance, what might be acceptable behaviors at one stage may not be appropriate at another stage of life. Ivey suggests applying Piagetian concepts of cognitive development to clinical interviews. That way, counselors can work from the sensorimotor level to bring out unrecognized feelings of the client. Wellness emphasizes the positive nature and health of clients. Individuals are seen as capable in solving their own problems. Children at-risk even show resilience and may become coping adults.
 - Examples: Solution-focused theory, stress inoculation training (SIT)
 - Emphasis on prevention and education: Counselors and clients function best when they are informed about the mental, physical, and social spheres of human life. They learn to focus on avoiding or minimizing internal or external stress.
 - Medical/Pathological Model – treatment is based on the Diagnostic and Statistical Manual of Mental Disorders (DSM). It is compatible with the International Classification of Diseases manual (ICD), published by the World Health Organization, in codifying psychiatric disorders.

Engaging in Professional Counseling-Related Activities

- Continuing Education
 - Treatment and practice of clients must be evaluated. Counselors can become dated in the delivery of skills (just like a medical doctor). Counselors must obtain CEUs annually to stay abreast of the latest and best methods. CEUs may be earned by attending workshops, taking correspondence courses or even reading journals.
- Supervision
 - Supervision is an interactive evaluative process in which someone with more proficiency oversees the work of someone with less knowledge and skill to enhance the professional functioning of the junior member. It is required in CACREP doctoral programs. Supervisor status can also be gained and applied toward CEUs. Supervisors may help counselor trainees increase their case

note skills by using a format for organizing and structuring such as the acronym STIPS:

- S = “signs and symptoms”
 - T = “topics discussed in counseling”
 - I = “counseling Interventions used”
 - P = “clients’ Progress and counselors’ continuing plan for treatment”
and
 - S = “any Special issues of importance regarding clients (e.g., suicide potential)”
- Advocacy
 - Advocacy is the promotion of an idea or a cause through public relations. By advocating for the concerns of clients, counselors correct injustices and improve conditions for an individual or groups. Presentation can be made to clubs and civic groups, writing articles for newspapers, engaging in community issues. Advocacy is also needed in the passage of laws when conditions adversely affect clients of the profession. Counselors may write letters or visit legislators.
 - Portfolios
 - Portfolios are forms of communication that document an individual’s training, work, and pertinent life experiences. Documentation is needed for licensure, managed care organizations, employer evaluations, and even new jobs.
 - Working portfolio – a continuous collection of unabridged artifacts that counselors can use as evidence of professional competence: vita/resume, documentation on counseling courses including practicum and internships, post degree supervision, work experience, professional credential, continuing education, presentations, publications, and professional service.
 - Presentation portfolio – materials needed for a particular project, such as becoming an expert witness in a court of law.
 - Health Insurance Portability and Accountability Act (HIPAA)
 - HIPAA refers to federal legislation passed in 1996. The act was intended to improve healthcare delivery and protect confidentiality and security of health information (<http://www.hhs.gov/ocr/hipaa/>).
 - HIPAA called on the Department of Health and Human Services to publish new rules to ensure standardization of electronic data, provide unique health identifiers, and provide security standards to protect confidentiality and integrity of health information (HIPAA Advisory; <http://www.hipaadvisory.com/REGS/HIPAAprimer.htm>).
 - Providers of health services, including counselors, must comply with requirements and regulations regarding transmitting any health care information in an electronic form. Noncompliance includes fines and imprisonment.
 - Compliance requirements for large organizations include:
 - Building awareness of HIPAA
 - Assessment of the organization’s privacy practices, information security systems and procedures, and use of electronic transactions
 - Developing an action plan for compliance with each rule

- Developing technical and management infrastructure to implement the plans
- Implementing a comprehensive implementation action plan.

(HIPPAAdvisory;

<http://www.hipaadvisory.com/REGS/HIPAAprimer.htm>).

CHAPTER 2 - MULTIPLE CHOICE TEST QUESTIONS

1. Dysfunctional motivators to becoming a counselor include EXCEPT _____.
 - A. emotional distress
 - B. vicarious coping or rebellion
 - C. curiosity
 - D. loneliness and isolation
2. A professional helper who is able to overcome his or her own emotional distress and learn from it is known as _____.
 - A. a wounded healer
 - B. a wounded helper
 - C. an effective counselor
 - D. a mental health counselor
3. Effective counselors have certain qualities including _____.
 - A. energy
 - B. self-awareness
 - C. intellectual competence
 - D. all of the above
4. Suggested ways to avoid “burnout” include all but EXCEPT _____.
 - A. associating with healthy individuals
 - B. concentrating all your energies on counseling
 - C. obtaining personal therapy
 - D. retain an attitude of hope
5. A(n) _____ is a nonprofessional helper, whereas a _____ is a professional helper.
 - A. friend; psychiatrist
 - B. social worker; mental health technician
 - C. untrained volunteer; probation officer
 - D. child care worker; psychologist
6. Psychologists may earn all but one of the following advanced degrees in psychology in order to be eligible for licensure:
 - A. a doctor of philosophy (Ph.D.)
 - B. a doctor of education (Ed. D.)
 - C. a doctor of psychology (Psy.D.)
 - D. a medical degree (M. D.)
7. Graduates of CACREP accredited programs have advantages over graduates from nonaccredited programs EXCEPT in:
 - A. obtaining admission to accredited counselor education doctoral programs
 - B. meeting the educational requirements for counselor licensure and certification
 - C. learning more about counseling theories
 - D. obtaining employment as a counselor
8. An accredited counselor education master’s program according to CACREP standards must have all of the following EXCEPT _____.

- A. have three full-time faculty members assigned to the academic unit in counselor education
- B. be a minimum of 2 full academic years in length with a minimum of 48 semester hours required of all students
- C. provide instruction in each of eight common core areas
- D. require students to complete 2,000 hours of supervised internships beginning with the practicum

9. The lowest of the four types of professional credentials counselors may obtain is _____.

- A. certification
- B. licensure
- C. inspection
- D. registration

10. Of the four main attribution models that counselors use on either a conscious or unconscious basis, the one where clients are held “responsible only for solving their problems but not for causing them” is the _____ model.

- A. medical
- B. moral model
- C. compensatory
- D. enlightenment

11. An example of a counseling based on developmental/wellness approach is _____.

- A. prevention
- B. stages of human growth
- C. stress inoculation training
- D. modification of chronic pain

12. In the acronym STIPS, which is sometimes used to help counselor trainees increase their case note conceptual skills, the letter “I” stands for _____.

- A. interventions
- B. intuition
- C. investigations
- D. imagination

13. For counselors, advocacy means _____.

- A. networking and education
- B. promoting ideas or causes through public relations
- C. supporting or challenging legislation through the political process
- D. all of the above

14. A counselor portfolio that contains a continuous collection of unabridged artifacts counselors can use as evidence of professional competence is called a _____ portfolio.

- A. presentation
- B. working
- C. professional
- D. continuous

ESSAY TEST QUESTIONS

1. Experts in counseling have described a number of qualities that counselors should possess. Pick what you consider to be the five most important qualities and explain your rationale for picking them. In addition, discuss what a counselor can do to improve himself or herself professionally throughout his or her career.
2. How would a counselor adhering to the development/wellness approach view the client? What about a counselor adhering to the medical/pathology model? Compare and contrast these two main systems of counseling.

CLASSROOM ACTIVITIES

1. Research indicates that some personality types are more suited to be counselors than others are. Suppose you do not possess the ideal personality for this profession (i.e., social, artistic, and enterprising). What are some ways in which you could compensate? In groups of three, discuss your reaction to the qualities of personality associated with effective counseling.
2. Review the personal, theoretical, and educational qualities that ideal counselors possess. Discuss how you think these qualities might differ if you were counseling outside the United States—for example, in India, Sweden, Israel, Australia, or Argentina. Share your opinions with the class.
3. Discuss with another classmate how you might help each other grow professionally if you were unequal in ability as counselors. After you have made your list, share it with another group of two and then with the class as a whole. As a class, discuss how the strategies you have formulated might be helpful in your lifetime development as counselors.
4. With another classmate, discuss how you would approach clients differently and similarly if you were coming from a developmental/wellness perspective as opposed to a medical/pathological model. Report your results to the class.
5. Investigate how counseling associations or counselors have advocated for their clients' needs and for the profession of counseling itself. A good place to begin is to consult the Public Policy section of the American Counseling Association homepage.

ADDITIONAL RESOURCES

American Counseling Association. (1996). *The wounded healer* [Film]. (Available from American Counseling Association, 5999 Stevenson Avenue, Alexandria, VA 22304)

In this video, Rollo May discusses the links between pain and creativity. He highlights some well-known professionals and their journeys to becoming healers. 1-800-422-2648

Borders, L. D., & Benshoff, J. M. (2000). *Learning to think like a supervisor* [Video]. (Available from the American Counseling Association, 5999 Stevenson Avenue, Alexandria, VA 22304)

This videotape teaches the fundamental concepts and goals of clinical supervision using the Discrimination Model developed by Janine M. Bernard. 1-800-422-2648

Rosenthal, H. (1993). *Review questions: For NBCC and State Counselor Examination, 2nd ed.* [Audio Tapes]. (Available from Taylor & Francis Group, 47 Runway Road, Levittown, PA, 19057)

These 5 tapes help fight pre-exam anxiety with the 275 question review and information on the National Counselor Examination. Each set comes with a 16-page booklet. 1-800-821-8312.