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This book is dedicated to our students and our clients ...

## Contents

List of figures and tables ..... ixAbout the authorsxiii
Introduction1
Part I: Counselling Skills11
1 Using counselling skills ethically and safely ..... 13
2 Establishing a helping relationship ..... 21
3 Working empathically as a helper ..... 32
4 Focusing on the helpee's needs and concerns ..... 43
5 Using self-awareness in helping work ..... 59
6 Using counselling skills ..... 73
7 Using reflection and feedback to enhance counselling skills ..... 102
Part II: Counselling Studies ..... 113
8 Preparing to work within an ethical and legal framework as a counsellor ..... 115
9 Understanding the counselling relationship ..... 138
10 Understanding difference and diversity to develop empathic understanding ..... 156
11 Working within a user-centred approach to counselling ..... 172
12 Using theory and insight to increase self-awareness ..... 183
13 Understanding theories of counselling in practice ..... 206
14 Using supervision to support counselling ..... 240
Part III: Counselling Study Skills ..... 255
15 Motivation and blocks to learning ..... 257
16 Essay writing skills ..... 269
17 Journal writing skills ..... 277
18 Self-care ..... 287
19 Critical thinking ..... 301
20 Experiential learning ..... 309
21 Research in counselling and helping work ..... 319
References ..... 334
Index ..... 338

## List of Figures and Tables

## FIGURES

0.1 The seven processes ..... 3
0.2 The juggler ..... 4
0.3 The three service levels of client change ..... 5
0.4 The three dimensions of change ..... 7
1.1 BACP Ethical Framework - personal moral qualities ..... 19
4.1 Maslow's hierarchy of needs ..... 45
5.1 Karpman's drama triangle ..... 68
5.2 The Johari window ..... 70
7.1 The Johari window ..... 105
7.2 Feedback sandwich ..... 108
7.3 Spidergram ..... 109
12.1 The iceberg metaphor of the mind ..... 187
12.2 The ABC model ..... 203
13.1 Time line of key theorists ..... 235
16.1 Spidergram example ..... 273
17.1 Gibbs' model of reflection ..... 280
18.1 Sources of support ..... 293
18.2 Work-life balance ..... 294
18.3 Wheel of Life ..... 295
18.4 Continuum of wellness ..... 298
18.5 Protecting yourself ..... 300
20.1 Kolb's Learning Cycle ..... 316
21.1 Evidence-based practice ..... 323
21.2 Factors that contribute to the counselling experience ..... 329
TABLES
1.1 Differences between helper and counsellor ..... 17
3.1 Feeling understood ..... 34
4.1 Responses to helpee's feelings ..... 52
5.1 Blocks to listening ..... 65
5.2 Characteristics of self ..... 71
6.1 Myself as a listener ..... 75
6.2 Non-verbal communication ..... 78
6.3 Open and closed questions ..... 90
7.1 Self-reflection tool ..... 104
7.2 Examples of feedback ..... 108
8.1 Common mental health problems ..... 131
9.1 Counselling agencies and counsellor role ..... 139
9.2 Definitions of terms ..... 141
12.1 Freud's psychosexual stages of development ..... 192
13.1 Psychodynamic family of therapies ..... 215
13.2 Cognitive-behavioural family of therapies ..... 221
13.3 Humanistic family of therapies ..... 229
15.1 Mapping ambivalence ..... 260
15.2 Thoughts that wound ..... 265
16.1 Planning your essay ..... 271
18.1 Different kinds of support ..... 293
20.1 Reframing weaknesses as strengths ..... 312
21.1 Counselling variables ..... 329

## About the Authors

## FIONA BALLANTINE DYKES

Fiona is an experienced counsellor, supervisor and trainer and was Head of Qualifications at CPCAB for 13 years before moving to BACP to take up a series of roles as Head of Professional Standards, Chief Professional Standards Officer and Deputy CEO until 2023. She has always championed vocational training as an important route into the counselling profession and has a background in delivering counselling programmes in further education. Fiona is a contributory author to Understanding Counselling and Psychotherapy (Sage, 2010).

## ANTHONY CROUCH

Anthony is a counselling psychologist and the founder and CEO of CPCAB and the Counselling Channel. His passionate belief in high-quality counselling training led to the development of the CPCAB model in the early 1990s, which has been reviewed regularly over the past two decades to incorporate the latest research on effective counselling. Anthony is also the author of Inside Counselling (Sage, 1997).

## BARRY KOPP

Barry very sadly passed away shortly after completion of this third edition. Barry was an experienced therapist within the person-centred family of psychotherapy and counselling and a long-standing, cherished and dedicated staff member of CPCAB, where they worked most recently as EDI Professional Lead and Counselling Qualifications Professional for Tailor-Made Qualifications. They were a passionate individual who brought their creativity, charisma and humour to their work within CPCAB, and with its centres, tutors and students.

## TRACI POSTINGS

Traci is an experienced counsellor and supervisor and has taught extensively in adult education. She has been a training consultant in the homelessness and addiction sectors, and compiled a training manual highlighting the value of counselling skills in health and social care settings. More recently, Traci has been involved in qualification and competence development, being committed to promoting and achieving high standards in the counselling professions.

## Introduction

## WHO IS THIS BOOK FOR?

This is a very practical book for people wanting to learn about using counselling skills in helping work and for people starting training in counselling. Helping and counselling is all about a special kind of conversation and the book aims to reflect this by being written in a similar conversational style throughout. It is structured as follows:

Part I - Counselling skills for helping work (organised into seven helping work processes)

Part II - Counselling studies for counsellors (organised into seven counselling processes)

## Part III - Study skills.

The questioning style is intended to reflect the natural curiosity of a new learner in friendly and accessible language, supported by lots of practical help and examples based on the writers' many years of experience both as counselling practitioners and as counselling tutors.

The terminology used in the book has been chosen to clearly articulate the distinction between those who use counselling skills to enhance existing helping roles and those who are preparing to work as counsellors in a formally contracted counselling relationship. Consequently, throughout Part I we have used the terms helper, helpee and helping work - terms which are commonly used to identify those who use counselling skills but are not counsellors - whereas in Part II we have used the terms counsellor and client to signal the shift to formally contracted counselling. Much of Part I, however, is both relevant and necessary for people who are beginning to train as counsellors. Part II takes learners further and deeper - as they begin their journey towards providing formally contracted counselling work.

The seven processes which are reflected in the structure of the first two parts of the book are based on a research-informed model developed by Anthony Crouch at the Counselling and Psychotherapy Central Awarding Body. ${ }^{1}$ The contents of this book are, however, applicable to anyone wanting to learn counselling skills or embarking on the first stage of their training to be a counsellor.

A brief description of this model is offered below for those interested in understanding more about these seven processes, together with other aspects of the CPCAB model of helping and counselling. A more in-depth explanation, together with more detailed examples, can be found on the above CPCAB website link.

## THE UNDERPINNING MODEL²

The CPCAB model - on which the structure of this book is based - emerged from a research project in the early 1990s which identified the core elements of counsellor competence and their development in counselling training. Since then the model has been updated to reflect the latest research findings on, for example, the various factors that contribute to therapeutic change.

## Background

For many years, researchers tried to understand what made counselling effective by comparing different 'treatments' specific to the various counselling and psychotherapy approaches. In other words, there was an unquestioned assumption, based on the medical model, that it was the treatment that was the sole 'active ingredient' that 'caused' clients to change. This research assumption was always problematic for counselling because counselling itself is a huge challenge to the medical model. Carl Rogers founded counselling in the 1940s by turning the medical model on its head - making the client, not the treatment, the active ingredient and questioning the whole idea of there being a treatment at all (Rogers, 1942, 1951, 1961). In other words, clients, rather than experts-with-their-treatments, were suddenly placed at the centre of things. Rogers changed the profession with this revolutionary approach and, since then, researchers have struggled to catch up with this new paradigm.

Contemporary research has, however, confirmed that it is not so much the specific treatment but certain shared elements - common to all the approaches -

[^0]that make the primary contribution to effective counselling. These shared elements are known as the 'common factors' and they consist of:

- relationship factors - the quality and effectiveness of the therapeutic relationship;
- client factors - divided into those that can be observed (the difference and diversity of each client) and those that can only be inferred (the client's own individual characteristics and preferences, e.g. motivation, hope);
- therapist/counsellor factors - the qualities and effectiveness of the particular counsellor, together with their ability to use self-awareness in the therapeutic process.

Evidence for the importance of these common factors comes, for example, from an American Psychological Association Research Task Force (Norcross, 2011), which encompassed 100,000 clients across more than 400 quantitative research studies and concluded that the common factors make the greatest contribution to client change, with the client factors being the most important of all.


FIGURE 0.1 The seven processes

## The seven processes

The seven processes, which represent the first part of the model on which this book is based, are derived from combining both the common and the treatment factors. These factors are then sandwiched between two other key elements of helping and counselling practice - working ethically and safely and developing the skills of reflective practice (professional factors). This is where the CPCAB model of seven helping and counselling processes comes from.

1. Working ethically and safely (professional factors)
2. Working with the relationship (relationship factors)
3. Working with difference and diversity (observed client factors)
4. Working with a focus on the helpee/client (inferred client factors)
5. Working with self-awareness (counsellor factors)
6. Working within a coherent framework of skills, theory and techniques (treatment factors)
7. Working self-reflectively (professional factors)

At each level of training, the seven processes reflect the depth and focus of that level of training and articulate the associated increase in the learner's skills, competence and autonomy.

These seven processes do not exist in isolation from each other but rather interact with one another. They are, therefore, a little bit like seven 'balls' which the


FIGURE 0.2 The juggler


FIGURE 0.3 The three service levels of client change
helper or counsellor 'juggles' when supporting helpees and clients to make changes in their lives and in themselves.

The seven chapters in Part I of this book explore these seven processes in relation to the use of counselling skills in helping work. Helpers can work with these seven processes to enable a person to reflect on themselves and their life, get clearer about their problems and identify better ways of coping. Additionally, when a helper uses these seven processes to help someone explore their problems, they are working in a way that is supported by the latest research on what's actually effective. The seven chapters in Part II of this book explore these same seven processes in terms of preparation for counselling work.

There are two other key elements of the CPCAB model, both of which concern working as a counsellor rather than a helper:
three different levels of client change/problems which require different levels of counsellor competence

- three dimensions of client problems and associated therapeutic change.


## Three levels of client change/problems

All clients come to counselling because they want to change something. Recent research has demonstrated that counselling works when the client instigates change supported by a particular kind of therapeutic environment in which the counsellor utilises not just their theoretical understandings and skills, but also themselves and the counselling relationship, together with an ethical and reflective approach to their work. The first part of the CPCAB model integrates these
research conclusions within the seven processes. The second part of the model proposes that the counsellor can provide these seven processes in relation to three different levels of client change/problems:

1. Service level $\mathbf{A}$ - change in the way clients cope with their everyday life problems
2. Service level $\mathbf{B}$ - change in clients themselves (both explicit and implicit) who are struggling with common mental health problems and other psychological problems
3. Service level C - change in the foundations of clients themselves who are struggling with severe and complex mental health problems.

## Service level A: Supporting clients to change their ways of coping with everyday life problems

We all have good times and bad times in life. Sometimes, in the bad times, we can get overwhelmed by our problems and need help to cope with them. Informal helping work provides support by enabling a person to reflect on themselves and their life, get clearer about their problems and identify better ways of coping. This is important and useful but where problems are more acute a person might seek to change things for the better by seeing a counsellor.

The CPCAB model proposes that - at this level of work - a counsellor can support clients to cope better through a more in-depth exploration of the client's life problems. The model also proposes that problems of living can often be understood as having three 'dimensions': (1) the individual person, (2) in their relationships, (3) at a particular life stage. At this level of work, the counsellor/helper can draw, therefore, on their understanding of persons, relationships and the life course when supporting clients to cope better with their life problems.

## Service level B: Supporting clients to change when they are struggling with common mental health problems

Sometimes, however, the problem is not 'out there' in life but within ourselves. The medical model labels these types of problems as mental health disorders which are normally divided into common mental health problems (MHPs), such as anxiety and depression, and severe and complex MHPs, such as bipolar disorder and schizophrenia. But rather than focusing on disorders and their treatment, the CPCAB model focuses on the kind of change that is required - that is, change within the self. It proposes that changing the self can be at both an 'explicit' level (service level B1) and an 'implicit' level (service level B2). Importantly, at the explicit level it may be possible to work in a goaldirected way towards change but at the implicit level the client may need to change aspects of themselves that have been deeply hidden. This kind of change is often incremental rather than linear; it takes more time and requires a deeper level of trust.

## Service level C: Supporting clients to change when they are struggling with severe and complex mental health problems

The CPCAB model takes account of the distinction between common mental health problems (service level B) and severe mental health problems (service level C). Clients categorised as having severe mental health problems often haven't had the opportunity to develop solid foundations within themselves and may require the counsellor to emotionally hold and support the client for a sufficient length of time for them to 'internalise' the experience. This is the kind of change needed at this level. It is also important, however, to recognise that many clients with severe mental health problems are not suitable for counselling and may need to be referred to secondary mental health services.

This service-level model is far from perfect and sometimes difficult to apply in the real world of clients, but it offers a useful framework for thinking about different levels of client need and associated therapeutic change. It is also helpful for trainee counsellors to reflect on the different service levels in relation to their limits of ability.


FIGURE 0.4 The three dimensions of change

## Three dimensions of client change/problems

This third element of the CPCAB model proposes that, as part of the process of changing themselves (service level B), it is helpful for clients to explore three dimensions of the 'self', and that counsellors can support clients to change:

1. the way they relate within themselves - internal dimension (the self)
2. the way they relate to others - relational dimension (patterns of relating)
3. the way they relate with their past and manage life-stage challenges - developmental dimension (personal history).

## 1. The internal dimension: Changing the way we relate within ourselves

Clients cannot change who they are, but they can often change things for the better by changing the ways that they relate within themselves. Different theories offer different ways of understanding this internal dimension of the self. The Freudian model of id, ego and super-ego is one theory of the way that we relate within ourselves, but there are many other theories. In Transactional Analysis, for example, the counsellor might help the client to uncover a conflict between an angry internal 'parent' and an anxious internal 'child' and then work to change this relationship for the better. As clients learn to relate differently within themselves, they develop a more resilient sense of self - enabling them to cope more effectively with their problems of living.

## 2. The relational dimension: Changing the way we relate to others

Clients cannot change other people but they can often change things for the better by changing their ways of relating to others - their habitual patterns of perceiving, communicating and behaving with their partner, parents, children, friends or colleagues. Initially, these changes often need to take place within the safety of the counselling relationship, where the client can test out new ways of relating. By changing their unhelpful patterns of relating, clients develop better ways of coping with difficulties in their relationships and are consequently able to develop more open, supportive and resilient relationships that directly contribute to their health and wellbeing.

## 3. The developmental dimension: Changing the way we relate with our personal history and managing life-stage challenges

Clients cannot change the past but they can often change things for the better by changing the ways that they relate with their past. They can, for example, change the stories that they tell themselves about their personal history or change their emotional response to past traumatic events. As clients change the ways that they relate with their personal history, they become more resilient within themselves, through, for instance, letting go of blaming themselves or feeling less overwhelmed in the present by painful memories of the past. They can also be supported to manage their life-stage challenges including, for example, starting at college, becoming a new parent or giving up work.

Throughout this book, you will see the elements of this underpinning CPCAB model in the organisational structure, in the language used and in the way in which topics are explored. Over the last three decades, over 260,000 students have trained within the framework of the CPCAB model and many have come to value it simply because, when they used it, it worked well for them. This does not mean, however, that this book is only relevant to learners on CPCAB courses. The strength of the model is that it draws on contemporary research and reflects best practice in both counselling skills and counselling training. The CPCAB model is a living model that is regularly revised to reflect the latest research findings on what makes counselling and helping work effective. Updated versions of the model are published on the CPCAB website.

## 5

## Using Self-awareness in Helping Work

In the preceding chapters, we looked at establishing a safe, empathic helping relationship that meets the helpee's needs. Throughout these chapters, we have referred to the helper's feelings, thoughts and behaviours. We have looked at the importance of the helper recognising and responding appropriately to prejudices and stereotypes based on their own beliefs and value systems. So we are beginning to get a very clear picture that although the helping work is focused on the helpee's problems, issues and agenda, the helper also needs to be self-aware in order to be able to provide this safe empathic relationship.

Your visions will become clear only when you can look into your own heart. Who looks outside, dreams; who looks inside, awakes. (Jung, 1973: 574)

## ROLE OF SELF-AWARENESS

$\begin{array}{ll}2 \\ \\ & 1 \\ & 1 \\ & 1\end{array}$
So what is meant by the term 'self-awareness'?
Conscious knowledge of one's own character, feelings, motives, and desires. (Oxford English Dictionary)
So, self-awareness simply means knowing and understanding yourself. This sounds very simple but actually we often talk and behave in ways that we are not really conscious of much of the time. We do what we do without pausing to consider or reflect on why we do the things we do!

Are you saying that I don't really know what I'm doing? That's a bit worrying, really.

A
Not at all. Everyone has unknown parts of themselves. Freud's conception of the human psyche took the form of an iceberg. Only a small part of an iceberg can be seen above the water, which could be seen as the conscious mind. Much of the iceberg is below the water and could be seen as the unconscious mind. Raising self-awareness is a bit like working towards making more of the unconscious, conscious.

Ah, that makes sense. When I think of icebergs, I think of the Titanic and how it sank because it hit an iceberg that couldn't be seen because it was underwater.

Absolutely, and to learn from the Titanic we need to be careful of not banging into things we cannot see. Therefore, the more aware of ourselves twe are, the less likely we are to capsize!

Another way of thinking about this is to imagine yourself as a house with many different rooms. It may be that we only live in a couple of the rooms and only go in the others very occasionally. Some of the rooms might not be used at all. If we imagine that the rooms are in various states of tidiness or repair, we can see selfawareness work as an exploration - a clean-up of all the rooms and parts of the house. Some rooms may need refurbishing - they might have been furnished by our ancestors. We can think of these rooms as being like the values and beliefs that have been handed down from previous generations. They may not suit us any longer and we may need to clear out the old to make way for the new.

Some rooms may be very dimly lit.These may be the parts of our self that we know little about or are unable to see clearly. We may need to turn the light on and shine it into gloomy corners to learn more about these parts of ourselves. Only when we see clearly can we see if any repairs are needed or if things need to be rearranged.

Some rooms may be locked tightly or boarded shut. There may even be rooms in the house that we don't know about - a cellar, a hidden loft or roof space, a secret passage. These could be the hurt, wounded or shameful parts of ourselves that might contain a lot of painful and difficult feelings. We may not want to revisit these feelings but deep inside we know that there is a great freedom in facing our fears and hurts, and part of self-awareness and personal development work is opening these rooms and allowing them to see the light of day and be tenderly cared for. By doing so, we are instigating and allowing our own healing.

The windows in the house may be dirty. Perhaps we are not looking at things too clearly and our perception may be clouded. By cleaning the windows in the house of our psyche, we are removing old blocks and shadows from our view of the world. We can look at all parts of the house as parts of ourselves and can explore the house and make the changes we desire to support ourselves in feeling 'right at home' within our self.

Helping and counselling can be hugely beneficial when we think of the psyche in these terms. It can be frightening exploring a house that we don't know very well - a house that might feel scary and intimidating. We may be frightened of
opening some doors and worried about what we will find behind them. A helper or counsellor can help us explore the house of ourselves in a safe, intimate relationship. We don't have to do the work all alone.

## BECOMING MORE SELF-AWARE

0
So, how can I become more self-aware? I like to think that as a helper, and one day as a counsellor, I could form the type of relationship that would help someone else to explore their 'house of the self', as you put it, in 'a safe, intimate relationship'.

So, what do you think of when you reflect on the term 'safe, intimate relationship'?

I think of a close relationship, with trust, respect and understanding.
'Intimacy' is an interesting word and one that can really capture the nature of a helping/counselling relationship. The word actually comes from the Latin verb intimare (which means 'make known or announce') and the linked word intimus (which means 'inmost'). But here is another way of breaking this word down:

## INTIMACY $=$ 'INTO ME SEE'

Therefore, intimacy is about facilitating a space that is safe enough for someone to allow us to see who they really are. Part of being able to do this is about forming an intimate relationship with ourselves. We have to be willing to look within and learn about all the different parts and aspects of ourselves: the good, the bad and the downright ugly! Try the following activity to encourage your own self-awareness.

## ACTIVITY

Reflect on the following statements in relation to yourself. Rather than just answering 'yes' or 'no', take some time to really reflect on the answer you give and what that means to you. As you respond, ask yourself why you respond that way. Are you comfortable with your responses or would you rather respond differently in some situations? If you would rather respond differently, why don't you? Be aware of your sensations and feelings as you ponder and explore these statements. It might also be useful to ask other people to consider the statements in relation to you. Do the responses match? Do other people view you as you view yourself?
(Continued)


Some of those questions are really thought-provoking. I don't think I've ever really questioned why I do certain things. I know I find it hard to say 'no' to people but I had never stopped to think why I find that so hard.

You are beginning to see that simply reflecting on your own personality increases your self-awareness.


#### Abstract

JEANIE Jeanie wrote the following entry in her reflective journal after completing the selfawareness exercise at college:

It feels a bit like a light switch has turned on. I am thinking about things differently and wondering why I do and say the things I do to certain people and in some situations. Like I said, I knew that I found it difficult to say 'no' but I never really questioned it. I just knew I often said 'yes' to things I didn't want to and then felt resentful. I think this goes a long way back for me. I grew up in quite an angry family and for most of my childhood I was never really given a choice. I just had to do what I was told, or else. I remember when I was about eight my mum asked me to take the rubbish out and I said I didn't want to. She got really, really angry with me and shouted and threatened to hit me. This didn't really bother me as I was used to her shouting and bawling. When she'd finished shouting though, she sat in the chair and cried and cried and said she couldn't cope any more and wished she could just leave and not have to look after me all the time. I remember how awful I felt and also how frightened, but most of all I felt guilty for being a burden and a nuisance. I am beginning to think that might have something to do with why I find it so hard to say 'no' now, because whenever I try and say 'no', I feel awful, just like back then - awful, frightened and guilty.


You can see that Jeanie made a very important link between her past and present by reflecting on her personal history and this in turn increased her self-awareness. She stated that she felt she had to say 'yes' to people when really she wanted to say 'no', but her feelings prevented her from being true to herself at that moment. She then realised that this made her feel 'resentful'. 'Resentment' is an interesting word. It can be said that resentment is like drinking poison and waiting for the other person to die. Let's look at the origins of this word, which comes from the French ressentiment (16th century), which in turn comes from ressentir (to re-send). Once again, when we break it down we find this meaning:
RESENTMENT = ‘RE-SENT’

If something is 're-sent', it suggests it has been sent before. If we apply that to everyday life, perhaps we can understand resentment as something which reminds us of something difficult and challenging from the past that we were unable to resolve. It has been re-sent.

Q
This is quite challenging ground for me. I am beginning to think there is a lot more to being a good helper than I imagined. I did not realise that so much of it would be about looking at myself - I thought it was about helping others to feel better.


I wonder if you are also saying that there is a lot more to you than you had imagined. Also, you are challenging your old beliefs around what you thought helping and counselling was about. It might be useful to stop and reflect on why you are actually interested in being a helper, on what has drawn you to this line of work.

## REFLECTION

Take a little while to reflect on what has brought you here now and think about the following questions:

What decisions have you made that steered your ambition in this direction?
Why are you interested in helping others?
What role do you generally take in your personal relationships?
Why do you want to become a helper/counsellor?
What skills and qualities do you bring to the role?
What part of the work might you find challenging and/or difficult?
How do you feel about seeing a counsellor?
Where do you go for help and support?

It can be quite common for people in the helping/counselling field to put other people before themselves. Actually, to be a good counsellor it is essential to be able to look after yourself and meet your own needs. It is impossible to give from an empty vessel. An integral part of the work is around self-care. How do you care for yourself?

## PAULA

Paula reflects in her journal on why she is drawn to this kind of work:
I have realised I have many reasons for wanting to help others. Initially, it was just because I thought that helping someone else was a good thing to do. Also, other


#### Abstract

people had said I give good advice, but actually I have now learned that this work is not about giving advice. I do still want to help others but if l'm really honest there are other reasons too. There is a pay-off for me. When I help others, I feel good about myself. I feel a bit ashamed writing this but it's the truth, and also it feels good to be needed and appreciated. By discovering those things about me and other things about my patterns of relating, I have realised I need to do work on myself too and actually I feel quite excited by that. It reminds me of that saying in the Star Trek programme: 'To boldly go where no man [or woman] has gone before'. Oh, I just remembered another reason that supports my ambition to do this type of work: l'm a good listener and can listen for hours if someone has a problem.


## BLOCKS TO LISTENING

Listening is without a doubt the most important skill in helping and counselling work, and self-awareness has an important role in our ability to listen effectively. To truly listen to someone else, we need to put our own thoughts and feelings to one side and this is very difficult. Also, we all have different blocks to our listening ability. Once we are aware of what our listening blocks are, we can work hard to overcome them.



Q
I think my biggest blocks are my own thoughts and feelings. Also, I am often thinking about what to say next to the person, trying to think up something interesting, amusing or clever to say or something to make them feel better. I'm not sure what some of the blocks are. For example, what do 'rescuing' and 'caretaking' mean?

It means to do something for someone that they need to do for themselves. It means being overly responsible or taking responsibility for other people inappropriately. It means trying to make someone feel better when actually they have a right to feel exactly how they feel, no matter how sad or painful that might be. It means being unable to sit with someone's feelings and rushing to try to 'fix' the situation to ease your own discomfort. It means feeling inadequate just being with someone and not knowing, and so trying to force a solution or outcome.

There is a big difference between caretaking and care-giving. As helpers and counsellors, our aim is to be care-givers - NOT caretakers and rescuers.

Is there something wrong in trying to make someone feel better?
It's not really about that. It's more about exploring why we respond the way we do. For example, let's imagine someone is feeling devastated after a bereavement, betrayal or separation. How could we make that person feel better? We simply do not have the power to reverse the abandonment, bereavement or betrayal. We do not have the power to make things right. What we can do is be with someone and be by their side as they walk through their pain and grief and confusion. We can
walk at their pace, neither rushing ahead nor holding back. So, why do we try to make someone feel better? Often, when we listen to someone who is in great distress, we feel uncomfortable; we may be reminded of and in touch with our own hurts, or our own feelings of fear and inadequacy might be triggered, and we react by 'rescuing' the person we're listening to.

Oh, so really we are being quite selfish doing that and really we are trying to make ourselves feel better.


So you can see that it is very easy to make a whole number of statements that actually mean very little. They may fix the situation for a second but that is all.

Sometimes grieving and hurting are like big gaping wounds. By 'rescuing', we are slapping plasters over the wounds, plasters of false promises and hope, plasters of platitudes, plasters of unasked-for advice, plasters of cups of tea, cake and alcohol, plasters of all sorts of things. The plasters cover up the wound but unless it is allowed to breathe and heal it becomes infected and throbs and hurts beneath all the plasters and so we pile more and more plasters on and the infection spreads. Helping and counselling work is not about covering up the wound and pretending it is not there. It is about protecting the wound and very slowly and carefully removing the plasters, some of which could be years and years old. Once the plasters are removed, the wound is very gently cleaned and the hurts and fears are processed and understood and released. The wound is exposed and this is very frightening, but once it is cleaned it will heal naturally. There may always be a scar and this scar is a reminder to be careful around that area - but the gaping, open wound is gone.

FIGURE 5.1 Karpman's drama triangle


I like that analogy. I also understand that when I 'rescue' or try to 'fix' a situation I am actually attending to my own feelings ahead of the other person's. This is fine, I think, and a natural part of everyday friendships and relationships, but helping and counselling work is about focusing on the other person's feelings first.

E15
So you can see how self-awareness informs our helping work on many levels. There is a very useful model (in Figure 5.1) which links in with three roles we often adopt in our relationships and interactions with each other. It is commonly known as the drama triangle and was described by Stephen Karpman in 1968.

## DEFINITIONS OF THE ROLES IN THE DRAMA TRIANGLE

Rescuer:The message of the Rescuer could be 'I'm good'. Rescuers tend to do more than their fair share of the work and often offer help without being asked. They do what they think is needed, rather than asking what someone needs. The Rescuer can end up feeling hard done by and resentful. They may feel their help is not appreciated. The Rescuer is actually taking responsibility for others rather than themselves. A Rescuer may feel they are not worthy of being loved and so try to make themselves indispensable and therefore needed. As the Rescuer feels more and more resentful and hard done by, they can end up slipping into the Victim or Persecutor roles. The Rescuer will always end up feeling the Victim, but sometimes may be perceived by others, who are on the outside looking in, as being the Persecutor.

Victim: The message of the Victim could be 'I am blameless and helpless'. The Victim feels unable to take responsibility for themselves and feels powerless and inadequate. They feel unable to cope or manage their life and look to apportion blame for their situation to others. They look for a Rescuer to help them. They might then feel let down or overwhelmed by the Rescuer and could move into the Persecutor role, but will still experience themselves internally as being the Victim.

Persecutor:The message of the Persecutor could be 'I am right' and this gives them a sense of power over others. Although the Persecutor can appear powerful, they are actually unaware of and unable to use their own personal power. Either way, the power used is negative and often destructive. They try to get their needs met by force and coercion.

To remedy this:

- The Rescuer needs to take responsibility for themselves, and acknowledge their own vulnerability and their own difficult and challenging feelings.
- The Victim needs to recognise their own power and ability and take responsibility for themselves rather than waiting for someone else to do it for them. The Persecutor needs to believe they can meet their needs without force and be able to own their power without abusing it.


## DRAMA TRIANGLE

- Identify a relationship where you find yourself slipping into the role of Victim, Rescuer or Persecutor.
- Describe the situation and who was involved.
- How could you manage this differently?
- What role do you tend to take on in your relationships?

I definitely take on the Rescuer role and then slip into others. I had a friend who used to ring me just about every day to talk about her problems. I listened and gave advice and was always available. I offered to look after her children and go along to appointments with her. I never said 'no' and then I started to feel resentful that she never asked about me. I didn't want to rescue her any more but I just couldn't say 'no'. I can see now that I had slipped into the Victim role. I really didn't like this person and would ask my partner to answer the phone and say I wasn't available. I actually felt persecuted by the person I started off trying to help.

It's interesting that you portrayed yourself differently to the friend you mentioned, to your partner and to yourself. We can learn a great deal about ourselves and the masks we wear by talking to others about how they perceive us. The activity below is helpful in doing this.

To participate in this activity, look at the list of 56 adjectives listed below and pick five or six that you feel describe your personality. Ask people you know from different areas of your life, such as friends, family and colleagues, to pick out words that describe you.
TABLE 5.2 Characteristics of self

| able | extroverted | mature | self-assertive |
| :--- | :--- | :--- | :--- |
| accepting | friendly | modest | self-conscious |
| adaptable | giving | nervous | sensible |
| bold | happy | observant | sentimental |
| brave | helpful | organised | shy |
| calm | idealistic | patient | silly |
| caring | independent | powerful | smart |
| cheerful | ingenious | proud | spontaneous |
| clever | intelligent | quiet | sympathetic |
| complex | introverted | reflective | tense |
| confident | knowledgeable | religious | trustworthy |
| dependable | logical | responsible | warm |
| dignified | loving | searching | wise |
| energetic |  |  | witty |

You then map these adjectives onto the Johari window:
Place the adjectives chosen by you and others in the open area.
Place the ones that only you picked in the hidden area.
Place the ones picked by others but not by you in the blind area.
All the other adjectives are placed in the unknown area. These represent our potential.
Reflect on the following questions:
Do the views of other people match your own?
Do you behave differently (wear a mask) with different groups of people such as friends, family and colleagues?
If you do act differently, why do you think this is?
Who can you be most yourself with?
What stops you being yourself?

A
Well, we have looked at how reflecting on our own personality, our relationships and our patterns of relating increase our self-awareness. We have also acknowledged how important self-awareness is in helping work. Self-awareness is an ongoing process. It is a journey and there are always unchartered places to find and explore. With selfawareness, the emphasis should be on the journey rather than the destination.

## CRITICAL THINKING

Consider the following quotations:

Once a thing is known it can never be unknown. (Brookner, 1983: 5)
Ignorance is bliss. (Gray, 1771: 12)
Only by much searching and mining are gold and diamonds obtained, and man can find every truth connected with his being if he will dig deep into the mine of his soul. (Allen, 2013: 7)

- Is it always a good thing to know more about yourself?
- What might be the risks of self-awareness?


## SUMMARY

- Self-awareness is essential in helping work.
- Lack of self-awareness blocks the ability to listen or put others' needs first.
- Specific tools like the Johari window can prompt greater self-awareness.
- Without self-awareness, there is danger of unconsciously acting out unhelpful patterns of behaviour.


[^0]:    ${ }^{1}$ www.cpcab.co.uk/public_docs/cpcab_model
    ${ }^{2}$ The description of the CPCAB model is reproduced by kind permission of CPCAB.

