

Counselling

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Introduction

This chapter explores the relationship between social work and counselling, and the use of counselling theories, values and skills within social work practice. It covers the changing context of counselling within social work, the different theoretical underpinnings to counselling ideas and skills relevant to social work, counselling theory and skills within social work practice today and some current issues emerging from counselling and social work. The current context of this exploration is radically different from that which gave rise to the Barclay Report of the early 1980s. The report argued that it was:

essential that social workers continue to be able to provide counselling and we use the word to cover a range of activities in which an attempt is made to understand the meaning of some event or state of being to an individual, family or group and to plan, with the person or people concerned, how to manage the emotional and practical realities that face them. (Barclay Committee, 1982, p. 41)

Barclay, on the same page, argues that social workers have themselves seen counselling 'as the hallmark of their calling'. Brearley (1995) documents the social, political, legislative and policy changes that have impacted on social work since the mid-1970s that have altered social workers' relationship to counselling. It would today be more likely that social workers would see their hallmark as brokerage or care management rather than counselling. Social work students are often resistant to undertaking direct in-depth work with service users, seeing 'counselling' as something they feel they are neither prepared for nor trained to undertake.

Social work practice is (with a few exceptions) located within a legislative context. Where counselling is employed by its practitioners, it will be alongside other interventions and within a legislative, proce-

dural and organisational context, compromising it as a form of 'pure' counselling, it being instead one of several possible social work methods of intervention. Social work practitioners, in all their various manifestations, have traditionally had a complex relationship with counselling. Bringing together the separate enterprises of counselling and social work has posed theoretical, organisational, ethical, practical and practice dilemmas. They are two separate areas of helping interventions, governed by different professional bodies, underpinned by separate bodies of knowledge and offering different outcomes, while at the same time as sharing many of the same values, intentions, processes, ideas and methods. They are both interested and engaged in the processes of change, and they are both predominately preoccupied with the psychosocial. It might well be difficult to distinguish some social work interviews from a counselling session. Social work training has traditionally drawn heavily on counselling methods when teaching social work interviewing skills. However, it is often argued that, despite the very close relationship between social work interviewing and counselling, they are separate activities, one being the practice of counselling and the other the utilisation of counselling skills. Feltham points to the different views of professional bodies in relation to this distinction, the British Association for Counselling (BAC) arguing that social workers are employing counselling skills rather than practising counselling, whereas the Group for the Advancement of Psychodynamics and Psychotherapy in Social Work have occasionally argued that casework can be not just counselling, but also indeed psychotherapy (Feltham, 1995, p. 72). Historically social casework, as practised by psychodynamically oriented social workers, would hardly have been discernible from counselling. Today, within some social work settings, it is difficult to make a distinction; for example, in-depth work being undertaken by a social worker within a child psychiatric department in a hospital setting with an anorexic young woman may be difficult to distinguish from a counselling session undertaken by a counsellor with a similar young person.

Social work students and practitioners now occupy a post-Thatcher era and are engaged in discourses different from those of the Barclay Report. One change has been the gradual de-emphasis on the 'collective' and the re-emphasis on the 'individual' and the individual's responsibility to facilitate change, whether that be social, economic or personal. The past 20 years have seen the corresponding mushrooming of personal therapies, the increased professionalisation of counselling, the growth in numbers of private counsellors and psychotherapists, and the explosion of related trainings. The same period has seen counselling being relocated within the social work context, into the 'provider sector', and a growing reluctance on the behalf of social workers to undertake counselling with service users,

seeing it as outside their remit, theoretical and skills base and outside the realm of the possible, because of time and resource constraints. A cynical observer might comment that one major development in the differentiation between counselling and social work has been that the former is now rarely other than for the benefit of the bourgeoisie and the latter for the working class.

Social work practice today, in its many different forms and contexts, still needs to employ counselling as a possible method of intervention in specific and appropriate contexts, at the same time drawing on counselling theory and skills to inform its knowledge and skills repertoire more generally. Social workers still have to 'do the work' with service users, whether it be in-depth, long-term work or as part of an assessment in order to devise a care plan. Without counselling theory and counselling skills, social work practice is likely to be ineffectual and inefficient.

Theoretical groupings within counselling

Before looking at some of the broad theoretical groupings of ideas underpinning different 'schools' of counselling, it may be important to say something about what counselling is. The word 'counselling' is often used interchangeably with the word 'advice'. For example, it might be more accurate to refer to careers 'advice' given in schools rather than careers 'counselling'. Dryden *et al.*, emphasising the distinction between the spontaneous giving of help and professional intervention, write, 'counselling is a more deliberate activity and in its definition of the term the British Association for Counselling spells out the distinction between a planned and a spontaneous event. "People become engaged in counselling when a person, occupying regularly or temporarily the role of counsellor, offers or agrees explicitly to offer time, attention and respect to another person or persons temporarily in the role of client (BAC, 1985, p. 1)"' (Dryden *et al.*, 1989, p. 4). One of the most comprehensive definitions of counselling is offered by Feltham and Dryden (1993, p. 40), who describe it thus:

a principled relationship characterised by the application of one or more psychological theories and a recognised set of communication skills, modified by experience, intuition and other interpersonal factors, to clients' intimate concerns, problems or aspirations. Its predominant ethos is one of facilitation rather than of advice-giving or coercion. It may be of very brief or long duration, take place in an organisational or private practice setting and may or may not overlap with practical, medical and other matters of personal welfare.

This definition illustrates why there may be some confusion over what it is, precisely, that makes counselling and social work perceived as being so different, as well as offering some insight into why BAC might need six separate divisions within it adequately to reflect all its constituent parts.

What are the 'psychological theories' that are referred to within this definition? As it pertains to social work practice, counselling has two areas related to it that have been of significance to its practice and knowledge base: the theoretical underpinning of different 'schools' of counselling and their related skills application. There are very many different counselling approaches built on a number of diverse theoretical perspectives. Only some of these have been influential upon social work and they may be grouped under four general headings: psychodynamic, cognitive-behavioural, humanistic person-centred and eclectic and integrative. These headings represent whole sets of ideas separate from counselling, which can be traced in relation to their influence on social work practice, and the ideas related to each heading can be shown to have been influential upon both social work and counselling at similar historical moments. For example, the interrelationships between psychodynamic ideas and social work and psychodynamic ideas and counselling, seen earlier this century, are similar for both social work and counselling (Yelloly, 1980; Jacobs, 1988; Pearson *et al.*, 1988; Payne, 1992; McLeod, 1993, p. 23; Brown, H. C., 1996). Theoretical developments are part of an economic, social, geographical, historical, racial and gendered context; both social work and counselling have been subject to similar influences in their different processes of professionalisation since the beginning of the nineteenth century. Both professions developed in an often defensive relationship to their more orthodox and (often perceived as) intellectually superior relatives psycho-analysis and psychotherapy. Both social work and counselling have suffered from developing in their shadows, despite their undoubted enrichment as a result of their close liaisons. There is no clear, singular, linear relationship between psycho-analysis, psychotherapy, counselling and social work, neither in their historical development nor in their theoretical underpinning. However, the myth and to some extent the reality of their interdependency has had a powerful influence.

Psychodynamic ideas

Jacobs (1988) offers what is still a very useful account of the interrelationship between psychodynamic ideas and counselling. This is one of the most complex theoretical areas drawn on in counselling, utilising a whole range of evolving ideas developed by many different individ-

uals (Freud, Jung, Klien, Bion, Fairbairn, Winnicott and Bowlby to name just a few of the originators) over a considerable period of time. Key psychodynamic concepts relevant to counselling would include the unconscious, the structures of the mind (the id, the ego and the super-ego), the past being relevant and impacting on the present, psychosexual development (oral, anal, phallic (oedipal), latency, adult sexuality), defence mechanisms, envy, depression, transference and countertransference, projective identification, ambivalence, attachment, separation, loss and crisis. It is beyond the scope of this chapter to detail the meaning and different interpretations of these concepts. McLeod offers a useful precis of their development and their application to counselling. Psychodynamic and psycho-analytical ideas have had a profound impact on the way in which we view human development and have been integrated into our cultural heritages in ways that subtly influence our understandings about ourselves and others. These influences have also impacted on counsellors. 'All counsellors and therapists, even those who espouse different theoretical models, have been influenced by psychodynamic thinking and have had to make up their minds whether to accept or reject the Freudian image of the person' (McLeod, 1993, p. 43).

Psychodynamic counselling has attracted much criticism, including its normative and potentially pathologising tendencies and the question of its efficacy. Questioning the outcomes of psychodynamic interventions has been raised alongside the problem of resourcing what was often long-term intervention that had no measurable outcome. The development of 'brief-therapy', associated with such people as Mann, Sifneos, Malan and Davanloo, has been significant in relation to this (McLeod, 1993, p. 38). The development of brief-therapy has been highly significant to counselling, as by its nature it is about facilitating the mobilisation of the client's inner and outer resources to manage a particular life event or set of circumstances, circumstances where limited interventions are often appropriate, as opposed to, in the case of psychotherapy, often long-term intervention focused on personality change. This development has not just affected psychodynamic counselling, but has also had a general impact on counselling (Dryden and Feltham, 1992).

Both humanistic person-centred and cognitive-behavioural counselling developed partly, but not exclusively, in response to some of the perceived difficulties and limitations of the psychodynamic approach.

Humanistic person-centred ideas

The development of humanistic person-centred counselling has its roots located within the broad developments of both phenomenolog-

ical and existential influences within philosophy and psychology during the post-war period. Its inception is often associated with a talk given by Carl Rogers in 1940 (Rogers, 1942), in which he emphasised clients' potential to find their own solutions. 'The emphasis on the client as expert and the counsellor as source of reflection and encouragement was captured in the designation of the approach as 'non-directive' counselling' (McLeod, 1993, p. 63). Coulished (1991, p. 52) writes that the 'theory base and important concepts devolve from a philosophical background of the existential tradition which respects an individual's subjective experience and places emphasis on the vocabulary of freedom, choice, autonomy and meaning'. Although this approach can be associated with broad theoretical and philosophical developments outside psychology, it was also part of the so-called 'third force' (the first and second being associated with the work of Freud and Skinner) within psychology, person-centred counselling being one development within that 'force'.

As a set of theories and methods, the person-centred approach is associated with an optimistic view of human nature but tells us little about human development. Although Dryden *et al.* (1989) are right in seeing the necessity of contextualising these theories, with their emphasis on 'self-actualisation', within the Californian culture of the 1960s, they are still important in having established the central significance of empathy, warmth and genuineness as key to the effectiveness of counselling interventions. The emphasis here is on counselling intervention rather than explanation of human behaviour. This approach and its theoretical underpinnings have been highly influential in social work, particularly on ideas relating to social work interviewing skills. Egan (1990) is seen as a bridge between counselling and social work interviewing, and is still highly influential in social work training courses. He is also seen as a bridge between the humanistic person-centred and behavioural approaches (Dryden *et al.*, 1989).

Cognitive-behavioural ideas

Cognitive-behavioural ideas and their influence on counselling have been associated with developments within mainstream psychology, with its emphasis on scientific methods, and the growth of behavioural and cognitive psychology in the post-war period. These ideas built on work undertaken drawing on animal experiments earlier in the century, associated with such people as Pavlov, Watson and Thorndike. From the 1950s onwards, they were built on by Eysenck, Rachman, Skinner, Wolpe and others, who were chiefly interested in behaviour and learning, and with understanding how behaviours are

learnt and what interventions will enable behaviour to change. They were not interested in understanding the inner meanings of acts or causation other than how those acts were learnt.

Feltham (1995, p. 83) notes that 'behaviour therapy is based on what can be observed, studied, measured and reliably changed'. These are a different set of criteria from psychodynamic or humanistic person-centred preoccupations. Within this tradition, there are numerous types of behavioural and cognitive counselling interventions, drawing on specific theories including respondent conditioning, operant conditioning, observational learning and cognitive learning to name but a few. These interventions are interested not exclusively in behaviour, but also in thought and feelings, and how these then impact upon and affect behaviour.

There have been moments in the history of social work when it has been fashionable to be derisive about behavioural interventions, but their relevance to social work is important. They have been shown to be effective with specific conditions, for example enuresis, agoraphobia and anxiety. One strength is their capacity to be adopted and practised by ordinary practitioners, be they social workers or community psychiatric nurses, who have not had to receive such an extensive training as would be expected of a psychodynamic counsellor, for example to facilitate an effective outcome. Behavioural interventions are often seen as successful in the short term and focus on management, focused change, measurement and monitoring. In the current climate of social work, these methods might be seen as fairly closely matching the needs of the professional roles.

Social work has traditionally drawn on a wide range of counselling theories and methods, a combination of psychodynamic, person-centred and cognitive-behavioural approaches, often in a haphazard way rather than in a theoretically and therapeutically logical manner that considers efficacy and professional integrity.

Eclectic and integrative approaches

The eclectic approach, which is sometimes referred to as integrative, is where the theory and the corresponding method of intervention are chosen as the most relevant and appropriate to meet the needs presented by the client or service user's specific circumstances. It can be seen as a way of maximising the beneficial aspects of the three different schools. This leads to the potentiality of the practitioner having an underlying psychodynamic understanding, taking a person-centred approach to the counselling relationship, one that is characterised by warmth, respect and empathy, while having the capacity to, where relevant, employ behavioural techniques. This, to

many, smacks of heresy, but there is a growing literature looking at the validity of integration. McLeod notes the difference between an eclectic approach, which is a more accurate description of the above, and one that is integrative:

An eclectic approach to counselling is one in which the counsellor chooses the best or most appropriate ideas and techniques from a range of theories or models, in order to meet the needs of the client. Integration on the other hand, refers to a somewhat more ambitious enterprise in which the counsellor brings together elements from different theories and models into a new theory or model. (1993, p. 99)

For social workers, their approach is likely, more often than not, to fall within the eclectic category, one they are already overfamiliar with and one that is often used against them, reinforcing the perception that social work has a flimsy, incoherent theoretical base in practice, whereas, in fact, eclecticism can be a potential strength.

Counselling and social work

Social work, within the statutory sector, at the tail end of the twentieth century, comprises a set of activities and interventions that are primarily focused on assessment, administration, care management, risk analysis and monitoring. It can be argued that the focus social work did have, or was perceived as having, on the facilitation of change, whether it was at the level of the individual, household, group or community, has slowly been transferred out of the statutory sector and into the provider sector, one that is increasingly private and voluntary. Within the provider sector, social workers both practise counselling and employ counselling skills. Within the areas of drugs and alcohol, palliative care, mental health and family work, there are social workers employed who will be negotiating a counselling component to their overall work with a service user. This counselling work will rarely be 'pure' counselling, as by definition it will, as with social work practice more broadly, be located in the context of a wider intervention context.

It can be argued, and the author is amongst those who do, that counselling has to remain as an integral part of social work wherever its location or context. This is 'counselling' in its broadest sense, focusing primarily on the application of counselling skills and the deployment of specific or integrative theories of counselling. If we examine the processes of assessment, be they in relation to child protection (DoH, 1988), assessment and care management in commu-

nity care (DoH, 1991c) or the assessment undertaken by the key-worker under the Care Programme Approach in mental health (DoH, 1996), these processes necessitate the social worker having the competence to deploy counselling skills to undertake a full and comprehensive assessment. This link is made explicitly by Smale *et al.* when they consider the skills needed to enable competent work to be done when assessment work is undertaken (Smale *et al.*, 1993). Pearson (1990), from a counselling perspective, also explores what it has to offer to social support and care management. It is interesting to note that two recent publications that look explicitly at social work competence make very little direct reference to counselling (Thompson, 1996a; Vass, 1996).

Egan (1990), over a number of decades, has provided social work educators with a relevant and applicable model for the application of counselling skills to social work interviewing. Utilising both person-centred theory and behavioural ideas, he developed his model. Coulshed lists seven qualities that counsellors (here she is referring to the context of social work) should have, qualities that are often associated with person-centred counselling and ones that are central to Egan, these are empathy or understanding, respect, concreteness or being specific, self-knowledge and self-acceptance, genuineness, congruence and immediacy (Coulshed, 1991, p. 45). Egan's model can be summarised as having four components: exploration, understanding, action and evaluation. It is easy to see why Smale *et al.* have built on and adapted this model for application with assessment and care management in community care. It has real strengths, including its commitment to working with, and not for, the client. It is a model that fits well with ideas of, and emphasises the importance of, engagement, clarity, focusing, planning, prioritising, negotiating realisable and relevant goals, action and review, and evaluation, all aspects of competent social work practice whatever its context, congruent with a culture of increasing openness and practitioner accountability. While the Egan model has received much criticism for its focus, its foundations and its crises-free assumptions, it is a model that can be adapted and built on to enhance effective social work intervention, as demonstrated by Smale *et al.* (1993).

It has been argued that social workers are more likely in the current social work context to offer counselling only within the provider sector, which is increasingly made up of private and voluntary organisations. However, social workers within all contexts, to be effective, need to apply counselling skills and be informed by counselling ideas to be effective. This remains particularly pertinent within the statutory sector, where the majority of assessment work is still concentrated, the application of counselling skills being fundamental to the processes of assessment and care management.

Issues

Egan's model is one that draws on behavioural and person-centred ideas and methods. It largely ignores psychodynamic ideas, and that can mean that it has limited application. To focus on 'a problem', without an understanding of causation, may mean that the intervention has limited effectiveness. Also, to ignore the contribution of systemic ideas to social work could mean that 'the problem' is seen outside its context, again limiting the effectiveness of the intervention. For the model to be effective, it needs to be located within a familiarity with and understanding of both psychodynamic and systemic ideas.

There has been much written recently about the reflective practitioner (see Chapter 10; Schön, 1987; Yelloly and Henkel, 1995; Thompson, 1996a). Thompson writes that the reflective practitioner is 'a worker who is able to use experience, knowledge and theoretical perspectives to guide and inform practice... Reflective practice involves cutting the cloth to suit the specific circumstances, rather than looking for ready-made solutions' (Thompson, 1996a, p. 222). Reflective practice also needs the practitioner to have, what was earlier referred to as self-knowledge. It requires the practitioner to be able, and be committed, to reflecting upon their own perceptions, responses and feelings in any given situation, requiring an understanding of counter-transference. Counter-transference is a complex and fraught area of both psycho-analytic and psychodynamic theories. 'Social work accessible' explanations of these ideas are available (Salzberger-Wittenberg, 1970; Jacobs, 1988, Pearson *et al.*, 1988; d'Ardenne and Mahtani, 1989). Without this theoretical base underpinning the application of counselling skills, we will not achieve reflective practice.

As ideas in counselling and social work have developed, so has there been a growing acceptance by both professions of their limitations in offering an appropriate service to a cross-section of all our communities. Not only have these two professional groups been unable to reach all communities, but they might also have been both overtly and covertly, deliberately and by default, discriminatory and oppressive to both individuals and specific communities. Anti-oppressive practice has become an accepted part of the discourse of social work. Within counselling, as well, there is a developing substantial literature, demonstrating a general acceptance that both, ideas and models may need to be adapted to integrate anti-oppressive practice (Noonan, 1983; d'Ardenne and Mahtani, 1989; Scrutton, 1989; Crompton, 1992; Atkinson and Hackett, 1995; Davies and Neal, 1996). When social work deploys counselling skills and ideas, it needs to take cognisance of the developing literature of counselling and anti-oppressive practice.

Conclusion

A key issue for counselling and social work is social worker's gradual defensive rejection of and timidity towards its use of counselling and counselling skills. It has been argued that both are still and will remain central to the roles and tasks of social work. Counselling skills are integral to the processes of assessment and care management, and there will remain a need for counselling within the social work context, certainly within the provider sector. If we are going to achieve the goal of a profession that is made up of competent and reflective practitioners, we will need to draw on counselling skills and models that enhance effectiveness and make use of counselling theories that inform practice. This could enable professional reflection to take place when working with the needs of specific, unique individuals within their own context and lead to the deployment of sensitive, relevant and effective interventions that facilitate negotiated change.

Further reading

- Atkinson, D. R. and Hackett, G. (1995) *Counseling Diverse Populations* (Madison, Brown & Benchmark).
Offers a general coverage of anti-discriminatory practice issues in counselling.
- Brearley, J. (1995) *Counselling and Social Work* (Buckingham, Open University Press).
This book covers areas directly pertinent to the content of this chapter.
- Dryden, W., Charles-Edwards, D. and Woolfe, R. (eds) (1989) *Handbook of Counselling in Great Britain* (London, Sage).
An excellent general introduction to counselling.
- Feltham, C. (1995) *What is Counselling?* (London, Sage).
An accessible introduction to counselling.
- McLeod, J. (1993) *An Introduction to Counselling* (Buckingham, Open University Press).
A helpful introduction to counselling theory and practice.

Groupwork

DAVE WARD

Where has all the groupwork gone?

How things have changed! My immediate reaction on being invited to contribute this chapter on groupwork was a mild panic. Although I see groups and groupwork as central to much that we do, in both our private and professional lives, 'groupwork' seems, almost without being noticed, to have faded from view. This invitation brought it back to my attention with a start: where has groupwork gone?; why?; what might be its future?

The 1970s were a golden age for groupwork. Students on social work courses would actively seek, and talk proudly about having done, 'groupwork' on placement. Groupwork had a secure place on the curricula of social work training courses within which the four 'methods' – casework, family work, *groupwork* and community work – dominated. These provided a framework for organising a potentially overwhelming mass of material and hinted at an exclusive knowledge and skill base which was seen then as necessary for an aspiring profession.

The late 1970s and 1980s saw an outpouring of British texts focusing on the generic basics of groupwork (for example, Davies, 1975; Douglas, 1978, 1983; Brown, 1979, 1986; Houston, 1984; Heap, 1985; Whitaker, 1985; Preston-Shoot, 1987) and, in 1988 *Groupwork*, the first British journal devoted to the method, was launched. However, this output was failing to keep up with deeper changes that were taking place in society at large.

Little of this vibrancy and expansiveness is visible today. One or two of the established authorities have continued to pursue the method (Brown, 1992; Douglas, 1993), joined by a few others (Adams and O'Sullivan, 1994; Vernelle, 1994), but I see little evidence of its take-up in field practice. *Groupwork* continues as a thrice-yearly publication. However, a scan of its contents since 1990 reveals that, of the more than 100 papers published, over one-third were by foreign