

**Compare and contrast two models of  
counselling and assess their relevance to  
a particular setting.**

Essay 2

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**Compare and contrast two models of counselling and assess their relevance to a particular setting.**

For the purpose of this essay I have chosen to explore Cognitive Behavioural Therapy (CBT) and Existential counselling. It is my intention to make reference to work with two particular clients, each looking for something different from counselling and out of respect for these clients; I have altered their names to prevent identification.

**Introduction**

My favoured orientation is Person Centred however, I have learnt to be adaptable, and creative in working with young people, which has led me to appreciate what different orientations can offer to the counselling process. To me being Person Centred means being open to where the client takes me. This does not mean, ruling out an approach if Rogers or Maslow do not underpin it. To do so, would in my opinion be fitting the client to my way of working and beliefs and this would be disrespectful of whom they are and the Person Centred approach. My practice is based on a sound theoretical and ethical framework and I would only rule out an approach or intervention, if I thought there were strong contraindicative reasons for doing so. In support of this Corey writes *“it is essential to respect the purpose that clients have in mind when they initiate therapy. If we pay careful attention to what our clients tell us about then we can operate within an appropriate framework”* (Corey 1997: p 190)

I have found CBT and Existentialism to be most helpful with young people and within this essay; I intend to explore my understanding of each, before going on to look at their use with two clients.

In my experience the short-term solution focused, problem solving approach of CBT, which is based on specific interventions, meets not only the young persons need for visible results to their problems in the here and now, but often the parents and or schools needs too. The approach employs a homework approach to completing certain tasks and in so doing, gives a means of measuring outcomes and in this sense, whilst it has been adapted from work with adults, it clearly meets the needs of young people and those around them. *Evidence based practice in child mental health has seen the need to justify the methods of intervention used with young people” and Wallace et al. 1996 refers to CBT as having a place based on evidence (albeit nearly always incomplete) in the treatment of most psychological conditions suffered by children and adolescents. (Graham: 1998, P xv) Indeed Target and Fonagy (1996) conclude that, “Though the findings may be open to challenge, at a general level behavioural treatments are more effective than non behavioural or family treatments”. (Graham: 1998, P xv)*

CBT was adapted in my opinion because young people are not born with the ability to think, analyse, and understand like adults. It is, as if they need to grow into their mind. From a Cognitive Behavioural perspective this occurs in part through the social learning theory and the application of social learning theory to adolescence, has been greatly influenced by the work of Albert Bandura, who in turn was influenced by Ellis and Beck. Bandura appears to have integrated the findings of these two who had

identified the role of irrational beliefs as contributing to psychological disorders, with his own and this seems to have seen the birth of CBT.

CBT aims to help young people develop a set of tools that will facilitate adaptation to stressful situations whilst fostering their sense of self-adequacy and efficacy. CBT therapists consider the uniqueness of each individual; their view and fit with their world, relevant to how they learn, interpret and are influenced by social and environmental factors. Therefore how my clients interpret what is going on around them and how this affects them, develops out of how they construct their reality and what they perceive, learn and feel arises from how they filter and store the information. In my work with clients I will often explain this visually to them e.g. “comments from others do they stick to you as if your covered in Velcro or do they run off and not affect you because it’s as if you are covered in oil”. I have found that this often helps us to open up and explore the storing and filtering processes they use.

By comparison Existential counselling does not rely on pathologising, it does not seek to identify thoughts or actions as maladaptive, and is not evidence based. The therapist does not take on an informed professional status within the session. Instead the practice is based on the writings of many European Existential philosophers and their diverse thinking and this is supported by Cooper who writes “ *existentialism is best understood as a rich tapestry of intersecting therapeutic practices, all of which orientate themselves around a shared concern: human lived experience*” (Cooper: 2003, .pg 1). In comparison to CBT it does not seek to solve problems, its aim through a philosophical investigation of ones life, is to further ones understanding into the many paradoxes that are unavoidable as a result of living.

In my opinion Existential therapy works best with enquiring individuals, clients who are working through developmental or situational crisis or people who are considering their life whilst on the edge of their death. Subsequently I believe it is a particularly useful framework for working with adolescents who are facing identity problems and major transitions. An example of this being Tony whom I will refer to later, but whom is struggling with many transitions and not least the question of value attached to their. In these types of situations Cooper writes, *“It (existentialism) is particularly suited to individuals who are experiencing a lack of a sense of identity. It offers promise for individuals who are struggling to find meaning or who complain of feeling empty”*(Corey 1977: p 188) and Van Deurzen-Smith argues *“existential therapy is especially useful when working with individuals who perceive themselves as alienated from majority norms* (Palmer & Launrani 1999: p 17 in my work with this client the sharing and validating of their innermost thoughts appeared to be reducing the emptiness they were experiencing and in turn, they appeared to be learning to accept that who they are and what they do with their life is within their control. This is supported by Palmer who notes *“Clients are encouraged to explore their most intimately held opinions and values, in order to discover for themselves, what it is that really matters to them- what is worth living for or what would be worth dying for”*(Palmer, 1996: p 31).

An Existential therapist would be willing to explore and visit with the client those aspects of their world that are causing them distress in the here and now of their life-death, meaning, isolation, freedom and responsibility. *“(Mabey & Sorenson 1999)* My experience of working with this client leads me to support the claims *“These*

*ultimate concerns are then believed to be at the root of human anxiety, which in turn is seen as an awareness of the reality of existence. That is existence with all its uncertainty, pain, freedom and meaninglessness. (Cooper 2003: p 67)* In comparison to the CBT approach the aim would not be to cure Tony of these problems, instead it would be to assist them in coming to terms with what some might see as the harsh realities of human existence; In Tony's case, the reality of living in the now as apposed to the childhood stories they had been sold.

*“A strength of the approach, is its ability to focus on choices and pathways towards personal growth, with its emphasis being on freedom, responsibility and the persons capacity to redesign his or her life by choosing with awareness”(Corey 1977: p 187).* In this respect I would argue that it is both similar to and different from CBT as they both in essence are striving to increase the potential choices one has within their grasp, but the route to this outcome differs in approach. However unlike CBT, Existentialism invites criticism because it does not stand up to scrutiny which is unsurprising, given the diversity of thinking and differences in shared practices which may also explain why some *“Accuse existentialism of mystical language and concepts and some object to it as a fad based on a reaction against the scientific approach”(Corey 1977:p 191).*

### **The Setting And Its Influence On The Counselling Approach**

Employed by a local Social Work Department as a counsellor, half my time is attached to a local High School and half to the social work office. I work with young people up to 18 years and the remit allows for clients referred via the school route to

receive six sessions and those via social work up to six months though some flexibility is given with these clients in recognition of the fact their issues may be more complex and entrenched.

### **Abbey**

Abbey aged fourteen self-referred to the school service due to experiencing flashbacks linked to recent sexual abuse. She believed everyone knew she had been abused and that they were talking about and watching her because she was to blame. Whilst she wanted to come to school she was struggling with her situation and had recognised help was needed if her attendance was to continue.

Because of Abbey's need for immediate and concrete solutions to her problems I believed CBT would be an appropriate framework of intervention. The methods of intervention are well suited to the school environment and Abbey's needs, because the approach is solution focussed and makes use of different strategies and interventions to promote behavioural and cognitive changes. To test her acceptance of this approach we undertook an exercise that explored, the links between thoughts, feelings, actions, and we use this as a stepping-stone to move on to her problems. In Abbey's case we explored what evidence she had to support her beliefs, how it made her feel and her response to this which led us to setting tasks that would provide her with evidence to support or challenge her beliefs. This supports (Nelson-Jones 1997). Who states, *"The aim is to attempt to unravel clients distortions and help them to learn different and more realistic ways of processing information"* (Nelson-Jones 1997 p 294). In comparison to Existentialism, my role whilst working from this framework would be more analytical, educative and at times a little directive.

*“Research undertaken thus far in this field, shows cognitive distortions of adolescents who seek therapy, tend to revolve around concerns about physical appearance and physical changes accompanying the onset of puberty; sexual identity and sexuality; competency in school, peer relationships, athletics, and concerns about autonomy and control, in relationships with parents and school authorities” (Zarb 1992: p 17).* Given these facts, the CBT approach appears to fit well with the developmental issues encountered by the young people and subsequently the school. Due to this I believe existential therapists might find themselves struggling to find work in school settings because their approach is not as cost effective because it can not compete with the short term, evidenced based approach of CBT and it does fit as well with the schools approach to teaching or their need to quickly resolve/ manage difficult behaviour. *“Cognitive behavioural approaches have been found to be effective in treating a variety of adolescent disorders, including depression, anxiety disorders, eating disorders conduct disorders and disorders of impulse control” (Zarb, 1992:p 6.)*

However I would agree with those Existential therapists *“Who tend to dislike the idea that therapy is about producing results- and for existentialists like Van Deurzen 9222a), there are no easy ‘results’ to come by. As she frequently states, ‘there is no cure for life’ and clients cannot be expected to achieve peace and happiness in a short number of weeks- if at all. (Cooper 2003:p 147)* Furthermore, in my opinion schools in an attempt to meet their own needs may opt for the speedy results of CBT to the detriment of the individual. Sometimes not allowing the

individual to work through their problems with out interventions, is what is needed and this can avoid situations where labels can be attached again to the detriment of the individual.

### **Tony**

In comparison to Abbey, Tony aged 16, had been abused over many years and as a result the biggest problem was trying to make sense of life and the value that could personally be attributed to it. Although very bright and articulate, Tony was distrustful of adults and reluctant to build relationships. Historically relationships had always led to a perceived feeling of let down. I stuck very much with these issues, being open and transparent about what could be expect from the counselling relationship and me, a human being. I believed this was fundamental to establishing a rapport and ultimately a relationship that would allow for exploration of the problems experienced in the here and now.

At this stage in Tony's life, the uncertainties about what the future had to hold and who they were, were very alive, and normal in terms of stages of development. Tony's life experiences had given added meaning to these identity dilemmas and on enquiring about what was the meaning of Tony's life; there was an avid response. Tony wanted to talk about the issue adult to adult, with a sharing of both of our deepest thoughts, beliefs and anxieties, and in giving this glimpse of who I was, trusting Tony with information, it made our encounter more real, providing Tony with a safe place to express, hear and begin to validate and respect what was held to be important. Such an encounter is compatible with the existential approach for as noted

*“Counsellor self disclosure is an important issue in existential counselling. The overriding goal is that of an authentic relationship in the clients best interests ”* (Nelson-Jones 1997 p 124). I favoured this approach over that of CBT, as the latter was more directive and educative and whilst it could equally have helped Tony to explore personal beliefs, pursuing a CBT approach would have been disrespectful of Tony wanting to explore from a more spiritual and philosophical position, who she was, what part she played in shaping her life, This is supported by (Corey 1977: p 190.). *“Existential counselling is about helping clients see that even though oppressive forces may be severely limiting the quality of their lives, they are not merely the victims of circumstance beyond their control. At the same time as finding ways to challenge their external environment they can discover and begin to recognise their own contribution to their plight”*. Furthermore CBT may have left Tony feeling unheard and pathologised, which could have led to a likening of our relationship to those with other untrustworthy adults in her life. Instead by going where Tony took me we entered into a deeper more spiritual exploration of the issues that were praying prominently on Tony’s mind and this is supported by (Nelson Jones 1995: p 130) *“Existential counsellors raise client awareness that there is no inherent meaning in life, but that which they give it by creating their own meaning. Making the existential position one of people are meaning giving- rather than meaning getting”*.

Because Tony had come via a social work referral we had the flexibility of time to pursue her concerns from within the Existential framework. In contrast to CBT, Existentialism is not as structured and given social work intervention can often be

perceived as long term, it could account for the fit with organisations approach to working with people.

In my opinion having the time to work with Tony over a number of months was going to be fundamental to building a trusting and accepting relationship, where there was no repeat of an adult misusing their power. Allowing Tony to take control of the time spent in therapy was a step towards this aim for as noted ***“Existential counselling enables the young person to experience choice within the confines of a safe place and within the confines of existing at that given time” (Nelson- Jones 1997; p 113).***

My knowledge of sexual abuse leads me to believe building and sustaining an intimate relationship with Tony was essential to personal growth and development and although the client counsellor relationship is temporary, my work has taught me, that the intimacy that develops from really getting to know someone, can be permanent and this is supported in the following ***“The Existential relationship can be powerfully affirming for clients because someone whom they respect and who really knows them fully, accepts them. Counsellors who have really deep relationships with clients can help them face their existential isolation and also help them realise, that they alone, are responsible for their lives. (Cooper 2003 p 142)***

Within the school context, I believe such intimacy would have been frowned upon and for this reason the development of such a relationship was only possible because she was a Social Work referral. If she had been a School referral I would have had to explore alternative options because the time factor and the more professional technical approach of CBT would not have facilitated the encounter developed above and noted by Buber when he refers to the I-Thou relationship.

**CBT, Existentialism And Adolescent development.**

Theories on growth and development aid our understanding of young people and influence how we might engage with them, in a way that is appropriate to their functioning. *“It is important to remember that every child is an individual with his/her own needs and that during the process of development these needs will change (Sheridan2002: p.44)*

CBT is dependent upon cognitive mechanism’s, restructuring and behavioural coping skills interventions and as noted by Piaget, with the onset of adolescence, both Abbeyes and Tony’s *“Cognitive development will generally have progressed to a stage that gradually allows for deeper levels of analytical and abstract thinking” (Zarb, 1992:p 5)* This is evidenced in how they challenge the explanations of adults (which have previously been accepted) and have begun to generate alternative interpretations and solutions to their problems. Of equal value existential counselling also allows for the challenging of the norm, values, beliefs and rules they have lived by and subsequently this approach is inappropriate for individuals who are unable to think more abstractly and out with the constraints of the socialising process. However for this very reason this means existentialism does not have the diversity of CBT, which can be modified for work with younger children.

Adolescence can be a difficult and demanding time for most young people but for those who have developed flexible coping strategies, less strain is placed on their internal resources. In the case of both Abbey and Tony, their resilience and ability to cope had been compromised. In support of this, research has shown ***“Children and adolescents who have been exposed to extreme stressors manifest a range of short term and long-term reactions, including anxiety, fears and depression as well as posttraumatic stress disorder”***(Graham 1998:P 127)

In comparison to Tony’s situation, Abbey’s circumstances show how CBT can be effective. Abbey’s experiences impacted on her ability to filter reality, resulting in paranoia and anxiety. Feeling psychologically vulnerable at school, her objectivity appeared impaired leaving her in a state of perceived threat. Beck’s supports this ***“Clients accepted their dysfunctional beliefs so readily during anxiety and depression that they temporarily lost their ability to reality test their interpretations”***(Nelson-Jones 1995: p 305) Abbey’s presentation could be likened to post traumatic stress disorder as defined by Graham 1998 and whilst there is a specific model for working through this, my time with Abbey was short and valuable. We could have been referred to the child and adolescent mental health team but this would have led to her waiting several months before being seen.

My knowledge of CBT combined with Abbey’s need for concrete help now, led me to offer counselling during which we kept the sessions manageable, (we did not want Abbey to have time off school because the experience of counselling was interpreted by her as traumatic, further exacerbating her anxieties about school). Firstly we explored how she might ground or keep herself safe when faced with overwhelming

feelings/ flashbacks and then we explored the relationship between her thoughts feelings and behaviours and the evidence she had to support these. Initially she struggled to distinguish between fact and fiction and jumped to faulty conclusions. CBT argues clients *“Don’t sufficiently take into account any info that might negate or modify their thoughts and perceptions. Thus the information processing system becomes closed instead of remaining open to new data” Nelson-Jones 1977 p 305*). However, I worked with Abbey to help her detect her negative and distorted thought patterns and how she could challenge and replace these with more accurate and adaptive thoughts. We made use of homework tasks, helping her to identify negative thoughts and beliefs, self-talk and some to help her to distinguish between fact and fiction.

Abbey actively engaged in and committed herself to the sessions and homework however; I have encountered young people for whom the opposite could be said, particularly if they have been cajoled into therapy. In my experience I have also found some adolescents struggle to reflect on the chronic nature of their problems, believing instead that they will suddenly disappear with no effort on their behalf. They can fail to see that what is happening with them now, can affect them in the future. When they have problems they want them “fixed immediately” and when this appears to happen they can drop out of counselling prematurely and come back when the next crisis occurs. They can appear to have little concept of the longer-term picture *Zarb 1992*; given Existentialism does not work with homework tasks, problems around this intervention, do not exist.

**Limitations**

CBT works best with clients who can focus on their automatic thoughts and take some responsibility for self-help however it can be adapted for work with younger children. In comparison Existentialism relies on the individual reaching a higher level of abstract thinking that allows them to consider another's point of view and would not be appropriate for individuals who have not progressed beyond thinking in concrete terms.

Both approaches would be inappropriate for someone suffering from a brain injury that has left them with memory difficulties. In both cases I believe there are limitations with clients who have an impaired sense of reality e.g. those suffering from hallucinations and delusions, as these would impact on how they see themselves and others in the world.

In comparison to CBT, Existential therapy offers long term counselling based on the philosophical assumption of self-determination and meaning. They do not have a body of evidence supporting its success as does CBT and this could be attributed to the fact it is hard to put into concrete terms or demonstrate conclusively. Therapists operating solely from an Existential orientation may consequently experience problems competing for work in setting such as schools, where there may be an emphasis on speedy results and cost effectiveness. In comparison to CBT, which acknowledges the social influences on an individual with its aim being to equip them with skills to cope with challenges in different environments, the focus of existentialism is quite the opposite and this has led to disapproval of some who argue

*“A common criticism of the Existentialist is that they are excessively individualistic, seeming to suggest that all changes can be made inside” (Corey 1977 p 191)* and I can acknowledge this criticism, as there may well be challenges to face that even the most resilient would struggle with because the environmental factors may be such that they are out with their control.

### **Conclusion**

In our work with young people we have to take our lead from them and adapt to their needs. In some instances CBT will meet their speedy need for results and existentialism will meet the needs of an individual who is seeking a more spiritual understanding of their problems. Failing to recognise the needs of the client and making use of the wrong approach could lead to a less than positive experience of counselling.

In comparing CBT and Existentialism I would agree that each approach supports the following claim *“The way in which each a person perceives and interprets the world is entirely unique to that person” (Haugh 1994: p 51)*

Neither places an emphasis on the past instead they appear to equally confront at depth the ultimate concerns at that given time. Preferring to work within the here and now, and the future. In doing this both reflect an appreciation of the beliefs, rules, and automatic thoughts that underpin behaviour and how we see our selves in our world.

Both have limitations that need to be considered on an individual basis by the therapist and as I believe my essay has shown, both hold equal validity at the time of

adolescence. Similarly if I understand both correctly, they each aim to help the young person recognise the consequences and costs of their defences in life, by helping them to identify through different routes, how their thoughts can create their experience of the world in which they live and how these may contribute to, or further exacerbate what it is they are trying to defend against. They differ however in how they help the client reach this goal but none the less both could be considered **empowering** as *“They help clients to change their attitude to or reconstruct external circumstances that they can not alter” (Nelson-Jones 1995: P 128).*

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