

The Counseling Relationship

Counseling and the therapeutic encounter have long been a focus of dramatic representation and extended discussion. No longer viewed as the superfluous, whimsical, indulgence of the rich, counseling is often presented as a deeply mystifying and magical process. Those who espouse such a position often suggest that counseling is an art, not a science, a special talent rather than a set of learnable skills—a process which is beyond the comprehension of most uninitiated individuals. While I would certainly agree that the intensity of the human relationship found within an effective counseling session, along with the richness and value of each human as revealed through such an interaction, is both “magical” and “mystical,” the process of counseling is neither mystifying nor incomprehensible.

Leona Tyler defined counseling as a “helping process the aim of which is not to change the person but to enable him to utilize the resources he now has for coping with life. The outcome we would then expect from counseling is that the client do something, take some constructive action on his own behalf” (1961, p. 2). When placed within the specific parameters of pastoral counseling this process not only attempts to help persons to help themselves through a growing understanding of their inner conflicts (Hiltner, 1981) but does so with an openness to the role God plays within their life and a receptiveness to the role that grace can play within this relationship.

Albeit a very special type of relationship, pastoral counseling is *first and foremost* exactly that—a relationship. This point needs to be highlighted, since many neophyte pastoral counselors rush into “doing” and “problem solving” with their clients without fully appreciating the essentialness of the relationship to the “helping process.” Therapy is realized in the counseling relationship and would not systematically occur outside of that context (Thurer and Hursh, 1981, p. 62). The quality of the counseling relationship is, therefore, the keystone to the helping process and thus needs to be of primary concern to all pastoral counselors.

As with any relationship, the nature and character of the counseling

relationship will be dependent upon the unique personal characteristics of those involved, (i.e., the counselor and the client), the motive(s) for being involved (i.e., the specific problem under discussion), and their shared history (i.e., level or stage of counseling). Therefore, no two counseling relationships will be exactly alike, just as no two individuals are exactly alike. The counseling process defies definitive characterization or cookbook formula presentation. This does not mean, however, that effective counseling relationships do not share certain common, "core" ingredients. Researchers from varied theoretical and philosophical backgrounds have attempted to define the specific component parts and phases of a *quality counseling relationship* (e.g., Aronoff and Lesse, 1976; Frank, 1961; Nicholi, 1978; Strupp, 1978). These efforts have failed to provide general agreement regarding the "specific" ingredients of an effective relationship but have consistently supported the value of *the relationship* to the eventual therapeutic outcome, regardless of therapeutic modality or orientation.

Opponents of Behavioral Therapy, for example, have long argued against the impersonal nature of this mechanistic approach to counseling (Wilson and Evans, 1970). Contrary to this stereotype, behaviorists have long recognized the value of a good therapeutic relationship (Wolpe, 1958) and have even begun to identify the essential elements of such an effective relationship (Gelder, Marks and Wolff, 1966; Goldstein, 1973; Gurman, 1970; Prochaska, 1979). While no one behavioral perspective has emerged in regard to the defining qualities of effective counseling, the importance of the interpersonal relationship has been consistently supported.

From the behavioral perspective, a good counseling relationship is a *pre-condition* to therapeutic movement. This point is contrasted with the Psychodynamic orientation (Freud, 1935) and the Client-Centered Perspective (Rogers, 1957) which view the relationship as the *sine qua non* of therapy (Thurer and Hursh, 1981). The psychodynamic point of view emphasizes the anonymous, non-committal, non-judgmental nature of the therapist (Blanck, 1976). While stressing the importance of ambiguity and neutrality in the relationship, the psychodynamic perspective similarly recognizes the importance of empathy and warmth to the establishment of a therapeutic alliance. In contrast with this "neutrality" position, the Client-Centered orientation argues for the sufficiency of the interpersonal qualities of warmth, genuineness and empathy for therapeutic movement (Rogers, 1957; Carkhuff and Berenson, 1977; Truax and Carkhuff, 1965).

Thus, while disagreement and divergency abound, certain generalizations regarding the nature of the counseling relationship can be extracted from the previous efforts and are presented here in terms of three dynamic stages: (1) *Coming Together* (the Therapeutic Alliance), (2) *Ex-*

ploring Together (Reconnaissance), and (3) Working Together (Intervention).

It must be noted that presenting the counseling relationship in terms of clearly delineated stages and "ingredients," while proving efficient in terms of this discussion, does injustice to the "dynamic" nature of the counseling relationship and may mislead some readers to assume that counseling proceeds in rigid, stereotypical and somewhat static steps. This is not the case! Pastoral counseling is an active, viable, human encounter which will proceed back and forth across each of the stages as dictated by the special needs of the counselor and client.

Stage I: Coming Together —Therapeutic Alliance

Counseling places the client in a new, somewhat unique social encounter. As with all social relationships, individuals entering counseling do so with a degree of anxiety surrounding (1) the level and types of demands they may experience, (2) the expectations they have for the counselor or the counselor may have for them, and, finally, (3) the set of rules to be used as guides for defining appropriate and inappropriate ways to behave within the relationship (i.e., norms).

As pastoral counselors eager to assist another individual with their current problem, we are often tempted to rush into a relationship with ready solutions. During the initial time of Coming Together, the primary job of the counselor is to facilitate the development of a "working," "caring" relationship. As such, the counselor needs to attend to the above concerns and help the client to reduce any anxieties about *this* relationship and begin to establish those conditions which will nurture the development of a Therapeutic Alliance.

Reducing Needless Anxiety. Quite often clients enter the counseling setting feeling as if they *should not* be there or that they *should be* ashamed of needing some assistance. As Sullivan originally noted: ". . . all people are taught that they ought not to need help, so that they are ashamed of needing it, or feel that they are foolish to seek it or expect it (Sullivan, 1954, p. 37).

The greeting and initial "hello" may often seem to be a trivial concern to those interested in the very serious and important business of "helping" but it is an important procedure and may in fact be the foundation upon which the relationship will develop. The impressions formed during these

early stages can prove significant in establishing the expectations that this relationship is to be a positive, growth-producing experience. It is these positive expectations which will not only provide the client with a sense of hope and desire for continuation, but in fact may play the essential role to the therapeutic movement. The arousal of just "hope" and positive expectations may be at the core of therapeutic change (Frank, Hoehn-Saric, Imber, Liberman, and Stone, 1978) and has been termed by Arnold Lazarus (1976) as the "essential aspect of the artistry of effective . . . counseling" (p. 47). Thus the initial greeting and warm, friendly, hello are far from trivial concerns.

The effective pastoral counselor can assist the client over the initial concerns about this new and perhaps scary encounter, by greeting him or her warmly, in conversational tone and proceeding with social conversation around appropriate non-threatening information (i.e., the weather, the directions, etc.). Following this initial icebreaker, the counselor needs to provide the client with some clear guidelines as to what to expect within the counseling. The client needs to be informed about such matters as length of time for each session, frequency of contact, confidentiality, fees, and types of issues to be discussed. This latter point often has special significance within the pastoral counseling relationship since the client may assume that a number of topics such as homosexuality, suicide, alcoholism, incest, etc. are taboo and should not be discussed with a *pastoral* counselor.

In addition to these practical matters the counselor may also have to correct the client's misinformation regarding the counseling process or the counselor's abilities (e.g., "Can counselors read minds?" "Put me in a spell?" etc.). Such detailing will not only reduce some of the client's anxieties which emerge from misinformation (e.g., "He'll know all of my inner secrets," "Maybe she'll make me do and say things I don't want to," and "How do I know he won't tell my spouse/boss/pastor?" etc.) but will also provide the client with a sense of direction and structure.

Once the stage has been defined and the basic "conditions" of counseling have been outlined, the counselor needs to provide the client with the sense that a meaningful, working relationship is possible in this particular situation. The counselor can foster this attitude within the client by exhibiting those interpersonal traits and characteristics which demonstrate that they reflect a warm, accepting, understanding individual who has both the desire and competence to assist the client in the development or rediscovery of their problem solving skills.

✧ ✧ *Facilitating an Alliance.* An effective therapeutic alliance between the pastoral counselor and the client requires that the client feel that he or

she is sincerely accepted and accurately understood (Wicks and Parsons, 1984). Aronoff and Lesse (1976) found that successful counselors, regardless of their therapeutic orientation, exhibited similar interpersonal traits. According to Aronoff and Lesse (1976) such success requires that the counselor (1) provide a relaxed sanctuary, (2) engender in the client or patient a trust and confidence in the therapist's competence, and (3) demonstrate interest and understanding of the client and his or her concerns.

A number of practitioners and researchers have attempted to identify those counselor qualities or behaviors which provide for the creation of such facilitative conditions. As early as 1951, Fiedler noted that the most successful therapist demonstrates:

- ✓ 1. greater ability to understand the feeling(s) of the patient; ✕
- ✓ 2. greater security in the therapeutic situation; ✕
- ✕ 3. greater capacity to show warmth without being overly involved with the patient.

Rogers expanded upon this earlier work and identified what he felt to be the *necessary conditions* of a facilitative relationship. Accordingly, Rogers suggested that a counselor must (1) be congruent or integrated in the relations (i.e., *genuine*), (2) experience an *empathic understanding* of the client, (3) be capable of *communicating this understanding* to the client, (4) experience a warm, positive *accepting attitude* toward the client, and (5) possess *unconditional positive regard* (i.e., non-judgmental) for the client (Rogers, 1951). Rogers' early presentations have been tested and refined by a number of authors, and one presentation concluded that the primary ingredients of therapeutic aura include offering understanding, respect, interest, encouragement, acceptance and forgiveness (Strupp, 1978). It may be suggested, therefore, that effective pastoral counselors will be those who give witness to the basic, intrinsic value of the person by way of their own manifestation of a warm, accepting, genuine, and respectful attitude for the client.

Researchers have been able to operationally define these core conditions and counselor qualities and have demonstrated that counselors can be trained to develop these attitudes and behaviors needed to facilitate the counseling relationship (e.g., Berenson and Carkhuff, 1967; Carkhuff and Berenson, 1977; Truax and Carkhuff, 1965). Because of these findings and the apparent importance of these *core conditions* or counselor qualities (i.e., acceptance, warmth and genuineness), they are discussed in some detail.

Acceptance. If counseling is to prove effective there must be a climate of mutual acceptance. Such acceptance requires that we refuse to exercise control over the client or even demand mentally that the client conform to

our expectations. Under such a condition of acceptance, the counselor will not attempt to impose roles or norms of behavior on the clients but will let the clients be who they are.

Counselors seeking to establish such acceptance must lay aside both formal status and informal social roles which may interfere with an open relationship between them and their clients. A facilitative counselor should be guided by the "here and now" of the interaction rather than being controlled by "a priori" role expectations. Roles such as that of male-female, young-old, and helper-helpee may set stringent demands on each participant and thus interfere with the honesty of the relationship. This may be especially important within pastoral counseling wherein roles such as pastor, lector, confessor, and spiritual director may interfere with the desired role of pastoral counselor. A client "confessing" weaknesses to a confessor expects absolution—and thus may block or undermine attempts at therapeutic intervention. Similarly, the counselor operating as confessor may be more interested in providing absolution than insight.

Acceptance does not imply absolute, wholesale approval. Such wholesale acceptance or approval of another is often a way of expressing radical non-involvement or non-concern (Egan, 1977). If I really care for you, then I will extend myself in hopes of educating, motivating or encouraging you to grow. However, even when the counselor has intentions of changing the client, true acceptance demands that he or she must actively allow clients the freedom not to change, if that be their desire. Therefore, even when the counselor knows that the recommendations are excellent, he or she must avoid the temptation to demand or expect implementation.

In attempting to maintain such acceptance, I have found it helpful to remember that it is not from the pastoral counselor that such acceptance ultimately comes but from God. By the virtue of creation, the client is acceptable. Therefore, the acceptance of the person, as self, by God must inevitably assure the less consequential acceptance in the therapeutic process by the pastoral counselor (Natale, 1977).

Even when such acceptance is experienced by the counselor it does little to facilitate the therapeutic alliance if it is not conveyed to the client. Too often we as pastoral counselors assume that the clients *know* that we accept them. Such an assumption can interfere with the development of an accepting relationship. Therefore, rather than simply assume that such acceptance is understood, the counselor should manifest that acceptance by (1) actively encouraging the client to express the ways in which they are different both professionally, philosophically and personally, and (2) showing care, respect, and concern for the client and the client's problem.

Non-Possessive Warmth and Respect. In addition to feeling accepted, the client needs to feel "prized" and valued. To respect others requires that we truly appreciate them and value them, because they are human beings.

Unconditional, non-possessive warmth reflects the counselor's deep non-evaluative respect for the thoughts, feelings, wishes and potential of the client as a free and responsible individual. Such non-possessive warmth and respect for the client are not only important for successful counseling but lie as a cornerstone of Christian heritage. "Prizing" another is a reflection of our belief that the client is created in the image and likeness of God, endowed with natural gifts of intelligence and freedom, in varying degrees of development (Tyrell, 1982, p. 117).

To imply that one holds unconditional positive regard for another does not imply unconditional approval of all of that person's behavior, for just as Christ could love the sinner while hating the sin, we must learn to clearly distinguish our evaluation of a person's behavior from the existential love we hold for that person. This principle is essential to effective counseling. However, we must realize and accept the limitations of our own humanity, for unlike Christ many of us find it hard to keep an unconditional, non-possessive warmth for particular clients. While aspiring toward "prizing" all clients, it is helpful for each and every one of us to know our own limitations and call upon other professionals for our own support, both in the form of consultation and referral of our client and in professional development for ourselves.

Pastoral counselors can begin to monitor their own ability to communicate this unconditional, non-possessive warmth for a client by considering each of the following:

1. Was I "attending"? Is there evidence that I was actively and accurately listening?
2. Did I actively encourage the client to contribute? to provide his or her own unique insight?
3. Did I verbally state or behaviorally demonstrate the belief that the client is competent and can take care of himself or herself?
4. Did I appear to enter the relationship assuming the "good will" of the client?
5. Did I demonstrate appropriate warmth, closeness, feeling within the relationship?
6. Did I give evidence of spending time and energy to truly understand the client and his or her problem?

7. Did I employ descriptive language as opposed to judgmental, evaluative language?

8. Did I reflect the love and forgiveness God holds for each of us?

Genuineness. Often neophyte counselors, in their eagerness to "do it correctly," appear to "put on" care and concern, as one might put on a role in a play. All of the previous discussion of facilitative conditions is for naught if the counselor is not first and foremost authentic and genuine in the relationship. Berenson and Carkhuff (1967) have suggested that "the base for the entire helping process is the establishment of a genuine relationship between the helper and helpee" (Berenson and Carkhuff, 1967, p. 11).

Attaining and maintaining such genuineness is not an easy process. As social beings we have been trained to enter most formally defined relationships, such as counseling, from the perspective of acting according to prescribed or expected roles. Genuineness is role free and involves responding authentically to the client in both a negative and positive manner (Carkhuff, 1969). Authenticity or genuineness within counseling is achieved only when the counselor is free of roles and rigid formulas.

A counselor who is genuine, is open, as opposed to defensive, is real as opposed to phony. The counselor who is genuine acts in an integrated, authentic fashion. Further, the counselor must remain non-defensive while avoiding a retreat into the facade of a professional role. For the counselor seeking to be genuine, one of the main ingredients is to be congruent in words, expression, tone, actions and feelings. Expressing and admitting discomfort or even disappointment and discouragement when they are experienced would be more facilitative than attempting to always present a positive, encouraged, relaxed image when such is not the case. In order to avoid the entrapment of role playing and scripting (doing it the way the "book says"), pastoral counselors need to monitor their relationships and their own behavior exhibited within the relationship. Counselors need to look for evidence of genuineness in their own interactive style. Genuineness is manifested by the following (Egan, 1976):

1. *Role Freeness.* The counselor doesn't hide behind titles, labels, degrees, or roles, and resists using labels as justification or disguises for manipulating the client.

2. *Spontaneity.* While being tactful and considerate the counselor does not appear to be constantly weighing what he or she says, as if in a pre-planned, manipulative exchange. The counselor appears to be reactive to the moment rather than pre-planned and rigid in his or her response patterns. Although there may be instances when the

counselor chooses freely not to express feelings during the interaction; such a decision would be made in light of an active awareness of these feelings.

3. *Non-Defensiveness*. When questioned by the client, or criticized, the counselor demonstrates accurate empathic listening and a willingness to consider the client's point. The counselor does not retreat or counter-attack when challenged by the client.

4. *Congruency*. The counselor appears to be consistent in expressing his or her thoughts, feelings and behaviors. There do not appear to be discrepancies between what he or she thinks or feels and what he or she actually does or says.

5. *Openness*. The counselor demonstrates a capability of self-disclosure and mutual sharing within the context of the relationship.

Stage II: Exploring Together—Reconnaissance

Once the client's initial anxieties have been reduced and the counselor has given evidence of *genuine acceptance* of and *unconditional positive regard* for the client, the process of problem and resource identification needs to begin. While clients need to "know" they are valuable and valued, they often seek direction and guidance from the counselor in hopes of developing or rediscovering their own skills and abilities for coping with specific life problems and concerns. The second major stage in the counseling relationship is that of Exploring Together or Reconnaissance. During this stage the counselor needs to provide clients with the opportunity to talk, to ventilate and to begin to define their current concern as well as the resources available to them for problem resolution. The primary focus for the pastoral counselor throughout this stage is to listen and understand. All too often, however, pastoral counselors, in their eagerness and concern to "help the client," "jump into" problem resolving without properly understanding both the nature of the problem and the extent of resources available to the client. Pastoral counselors need to be first and foremost good, facilitative, and accurate message receivers.

This phase of the relationship is characterized by the counselor's and client's mutual exploration of the manifestations, circumstances and history of the current problem, and the counselor's surveying of the personal and extrapersonal resources available to the client for problem resolution. Throughout this phase the counselor needs to (1) be able to assist the client in his or her own ventilation and personal disclosure, (2) accurately understand the information presented, and (3) actively reflect that

understanding to the client in hopes of providing the client with increased clarity about the nature of the problem and the potential for its resolution.

Facilitating Disclosure. Many counselor-trainees perceive the counseling interview as an opportunity for friendly sharing and mere "chit-chat." Those of us involved in the counseling process can attest to the fact that it is far from idle conversation. Rather, counseling is a very intense and often exhausting series of purposeful communicational exchanges.

Since the focus at this stage of the relationship is on reconnaissance of both the problem and the potential resources available for its resolution, the counselor needs to encourage the client to "open up" and "disclose" relevant personal information. One way in which the counselor can encourage and facilitate such disclosure is through his or her employment of proper *attending and questioning skills*.

Attending. Attending, or "being with" another, requires both a physical stance or position and a psychological orientation. Gerard Egan (1977) discussed the importance of body orientation in setting the physical stage for attending. He suggests that proper attending behavior may be characterized as being face-to-face, straight body orientation, openness in body posture, a comfortable, slight forward lean to the body, and maintenance of eye contact. Support for the effectiveness of Egan's SOLER (straight, open, lean, eye contact, relaxed) attending posture is abundant. Many authors (e.g., Argyle, 1967; Mehrabian, 1967; Reece and Whitman, 1962; Steinzor, 1950) have demonstrated the increased potential for communicating and the perception of increased warmth when the communicator uses this posture.

It is essential, however, to note that the purpose of the SOLER position is twofold. First, this posture places the counselor in a body orientation which facilitates reception by "opening" the counselor to a number of channels for information reception and narrowing the band of potential noise and interference. Second, SOLER allows the counselor to convey (via body language) that he or she is attending to the client and thus encourages the client to disclose relevant information. In order to attain such a positive effect, the position assumed and the degree to which each component of the SOLER orientation is utilized must be dictated by the personal style of the counselor. That is, while it is effective to have spontaneous, relaxed and frequent eye contact, staring may not only be perceived as threatening but also act as a major source of distraction to the client (Parsons and Meyers, 1984).

In addition to using body position as a form of attending, the counselor needs to use psychological attending skills. The counselor must be

efficient in placing himself or herself in a position of psychological readiness to receive information accurately and be able to communicate this state of readiness to the client.

Many of us, as children, were schooled in the notion that when others speak we should be polite "good" listeners who are quiet, non-interruptive and docile. As such we learn to "listen" with half an ear. During most day-to-day conversations, we may find ourselves daydreaming, or drifting from the conversation. Further, during such interchanges we may find that we are spending more time evaluating the person's statements or jumping to conclusions about where he or she is going with a point rather than staying actively engaged in receiving the information and understanding it as it is intended.

Effective listening is not a passive process. One cannot simply sit back and passively record the messages sent. Effective reception requires the counselor to psychologically reach out, beyond personal distraction, boredom, pre-occupation and bias and enter into the clients' phenomenal field in order to experience their world as they do and their messages as they are fully intended. Such reception is far from a passive process and requires the skills of active empathic listening.

One technique which will not only assist counselors to assume such an active posture, and thus increase the accuracy of their reception, but will also encourage client disclosure, is the use of minimal encouragers (Ivey, 1971). Minimal encouragers are brief utterances or expressions (verbal and non-verbal) which indicate continuing interest in the client's statement. The use of an appropriate "Oh?", "So?", "Then?", "And . . .", "Uhm" or "Uh-huh" along with the repetition of one or two of the client's key words and a nod of the head will often help to convey the fact that the counselor is actively engaged in this exchange and is "with" the client.

Questioning. Often the counselor desires not only to convey "with-it-ness" to the client but also to help the client clarify the current situation. The appropriate use of *open questions* will be effective in accomplishing these goals. Special emphasis is given to the *appropriate use* of questions because the unskillful use of questions places the client in a position of feeling interrogated or challenged and in turn may result in justifying, explaining and excusing or some other form of defending by the client.

Questions asked in a manner that invites the client to expand and elaborate will prove extremely useful in clarifying one's understanding of the client. Open questions encourage the client to expand on the "how" or "what" of issues as opposed to closed questions which can be answered with a simple yes or no, or factual response. Open questions not only allow the client to give direction to the session (e.g., "What would you like to

discuss today?" but also prove facilitative in having the client focus or expand on an issue as in "How does that make you feel?" (focusing on feeling) or "Would you tell me a little more about this?" (focus on content). While providing for increased depth or expanse on a topic, open questions do so without increasing the client's anxieties or feelings of being interrogated.

Facilitating Understanding. In addition to expressing a fundamental acceptance and prizing of the client, the pastoral counselor must be able to be sensitive to the subtle feelings being expressed and be able to communicate that understanding to the client. In order to fully understand the client's experiences, feelings and concerns, counselors must be able to step from behind their own frame of reference and enter the client's world and perspective through their use of *empathic, active, listening*. Interestingly, such understanding and ability to place oneself in the "other's" shoes has been exemplified by Christ himself. As Paul noted in Philippians (2:6-7): "Though he was in the form of God, he did not deem equality with God something to be grasped at. Rather, he emptied himself and took the form of a slave, being born in the likeness of man." Entering the world and sharing the debasement of the human experience provided Christ-the-man with the perspective to fully understand and communicate that understanding of the human condition. It is in one's own emptying of self that the counselor may begin to understand the world and dilemma of the client.

Active listening is a total listening. It is a reception of all of the cues (verbal and non-verbal) which are being sent from the client, from the environment, and from within oneself. These signals are then accurately identified in order to focus on the intended message. Active empathic listening demands that the counselor stop talking internally (i.e., psychologically) and quiet the voice inside which argues mentally, passes judgment and races to conclusions or points of rebuttal. It requires us to concentrate not only on what is being said but how it is said and to check our reception for its accuracy. Although it sounds simple, in practice it is quite difficult.

In addition to insuring the counselor's own understanding of the clients' disclosures, it is equally important that the clients themselves gain in clarity and insight about the problem under discussion and the resources available to them. Most people are not fully aware of how strongly or uniquely they feel about particular matters, even though they may express their opinions openly. The counselor thus seeks to increase the clients' awareness of their own personal attitudes and their potential impact on their behavior. Through the counselor's accurate reflection of his or her own understanding of the clients' condition back to the clients, they

themselves begin to better understand their own feelings about certain things.

Accurate Empathy. Increasing the client's own personal insight and clarity regarding the current situation may be facilitated by the counselor's appropriate use of advanced accurate empathy. According to Carkhuff (1969) there are two levels of accurate empathy. The first, primary level accurate empathy, requires that the counselor reflect what is *explicitly* presented by the client. That is, rather than attempting to dig down and interrupt or draw conclusions based on implication or supposition, the counselor assimilates the information being presented by the client and reflects that understanding. For example:

Client: "Boy, when she does that it makes me furious. I hate being stood up."

Counselor: "Having someone stand you up appears to really make you angry."

Quite often, clients find that "hearing" and "seeing" what they say or do as reflected from the counselor provides them with a more objective perspective and increased clarity about their current state.

Advanced accurate empathy is the second level of accurate empathy. Advanced accurate empathy attempts to get at not only what is *explicitly* expressed, but also what is *implied*. The counselor in an attempt to "completely" understand that which is being presented will assimilate all of the information about the client and reflect the entirety of this information to the client. Thus, the counselor will reflect what is being presented by the client in light of *how* it is said (using tone of voice, body language as cues) and *what else* has been said (developmental and historical context). We may then see the previous client's statement reflected somewhat differently:

Client: "Boy, when she does that it makes me furious (client frowning). I hate being stood up (voice tapering off)."

Counselor: "I know you said it makes you furious to be stood up, but your frown and softened voice almost suggest that it is hurt and sadness you feel more than anger."

It must be highlighted that such advanced empathy is not a matter of mind-reading or blind guess, but rather comes as a natural outgrowth of "truly being with the client" and seeing the world through his or her eyes. Needless to say if such a technique is used too early in the relationship it

may elevate the client's initial anxieties about the counselor's ability to read minds. However, when used appropriately such advanced empathy not only provides clients with a sense that the counselor is really with them but often provides them with an insight and clarity about their problems or their resources which they did not previously possess.

Stage III: Acting Together— Intervention

Once the counseling relationship has been established as being a warm, caring, supportive encounter and the specific client concerns and problems are clearly understood by both participants, the counseling moves into a stage of action or intervention. Regardless of whether we call this stage Acting Together, Intervention, Remediation, Education, or simply Problem Solving, it is the point in the relationship in which the counselor and the client need to begin to identify potential strategies for problem resolution and alternatives to coping and adjusting. Such strategies need to be feasible given the client's style and resources. It is this demand of feasibility that requires that all such strategies develop from a *mutual* exchange and sense of Acting Together.

The somewhat narrow focus of the current chapter prevents an elaborate discussion of the varied "problem solving" techniques employed in counseling. The interested reader is encouraged to pursue in-depth study of intervention techniques discussed throughout the remainder of the book. The focus within the current chapter is on the *process* of such "problem solving" rather than the specific content. Therefore, it is sufficient for the purpose of this chapter to note that the process of "Acting Together" requires that the relationship move through the *planning, implementing, and evaluating* of an intervention. Further, it needs to be emphasized that throughout each of these stages, the focus needs to be on mutual involvement. The hope of the counselor is to not only assist clients with this or that specific problem but to aid clients in developing a more efficient coping style and to sharpen their own problem solving and life adjustment mechanisms so that potential future problems can be avoided. As such, concerns for making the planning, implementing and evaluating a *joint* effort of both the client and counselor are of prime importance.

Planning. Engaging in this "helping" intervention process is quite often the major "pay off" for the pastoral counselor. We must remind ourselves, however, that the purpose of our counseling is to assist clients with their needs and not simply to satisfy our own need to be a "helper." Quite

often the "most appropriate" intervention plan is to seek professional assistance through referral.

As counselors, we must be aware of our limited skills and expertise and learn to recognize those clients and client-problems for which we are ill-equipped to intervene. If special, professional aid appears necessary, the development of a plan for contracting with such assistance becomes the major focus for the client and the pastoral counselor during this phase of intervention.

Although I am suggesting that we always consider referral as an appropriate strategy, I am not implying that the pastoral counselor should always refer. The decision to refer a client to another professional is a difficult and complex one. The bonding which results from working with clients on their problem and resource identification often makes referral a difficult task. If, however, we are cognizant of our mission (i.e., to assist the client) then referral will not only be possible but also a desirable strategy for helping the client. Whom and when to refer are questions which demand a personal response. There are no simple formulas. As a general rule, however, I might suggest that referral is appropriate whenever the client's demands exceed your own personal-professional resources. Thus when the client's problem is extremely severe or long-standing, or when the intervention clearly demands specialized skills or extended, lengthy contact, then one might seek referral for professional assistance.

As with any "intervention plan," referral should be done in collaboration with the client. Thus not only must the pastoral counselor recognize when to seek professional assistance, but he or she must also be able to convey the value of such assistance to the client. A client hearing that referral is being considered may react with anxiety ("Oh no, now what?"); anger ("After all we've been through, you're going to dump me") or depression ("I'm hopeless—nobody can help"). Such negative reactions need to be addressed and confronted by the counselor. Such clients need (1) to be assured that they (or their condition) are not hopeless, but that this is the logical, efficient course of treatment, (2) to accept that we are not dumping them, but rather seeking assistance for our own efforts, and (3) to understand exactly what referral will involve so that their anxieties may be reduced.

The client needs to be provided with complete, detailed information about the type of professionals being considered, their speciality and the connection between this speciality and the client's problem. Providing such detailed information, requires that the counselor be familiar with the various types of professionals available in their area and the various "specialities" and treatment regimens employed. Further, the counselor needs a basic understanding of the value of each treatment modality or speciality

for each of the problems under consideration. The readings listed in the reference section of this chapter along with the information provided throughout this text should assist the pastoral counselor with the aforementioned concerns. In addition, it is suggested that the interested reader review *Counseling Strategies and Intervention Techniques for the Human Services* (Wicks and Parsons, 1984), *Clinical Practice of Psychology* (Walker, 1981) and *Clinical Information for Pastoral Counseling* (McLemore, 1978) for additional guidelines and contact the local Mental Health and Mental Retardation Association for a listing of services available in one's particular area.

Once the client understands and accepts the rationale and process of referral, the counselor can begin the process of contracting for professional assistance. During these early stages of the referral the pastoral counselor plays an essential role for both the client and the consultant. The client, still somewhat anxious about this new relationship, is in need of the counselor's support. Similarly, the professional to whom the referral is made can benefit from the insights and experiences of the counselor. Thus the counselor should have the client give permission to release information to the professional. This information, detailing the counselor's experience and observations with the client, will facilitate the professional's development of an intervention strategy for the client.

When referral is not deemed needed, then the process of intervention planning becomes the primary concern and responsibility of the pastoral counselor. The pastoral counselor who successfully reaches this stage in the relationship is often all too willing to *tell* the client what to do. If the goal of counseling is twofold—in that we are attempting to provide a problem solution while at the same time assisting clients to redevelop their problem solving capabilities—then we must refrain from offering “ready-made” solutions. The goals during this stage of counseling are (1) to help clients in their efforts to get in touch with their own problem solving resources, (2) to develop those skills and talents which may be essential to problem solving and which are not currently within the clients' repertoire, and (3) to move clients toward increased self-confidence and independence.

Often, in the later stages of the planning, the client may exhibit increased anxiety. It has been my experience that such anxiety stems from the client's concern over potential failure and the implications that such failure may have for the relationship. It is not unusual for clients who are anxious and concerned about attempting the plan to believe that, should the plan fail or their implementation be less than totally successful, then they may make the counselor angry. This anxiety about eliciting negative

feelings from the counselor may interfere with clients' ability and willingness to attempt the intervention strategy and may act as a self-fulfilling prophecy dictating the failure they had predicted. Under these conditions, the counselor should emphasize the tentative, provisional nature of the solution, and convey to the clients that while each of the strategies discussed may appear to be potentially successful, one will only know once they have been tried and evaluated.

Placing the initial attempts within an "experimental," "pilot testing" framework can reduce much of the anxiety surrounding the "do-or-die" nature of the implementation. I have found that emphasizing the "experimental," "educative nature" of these early attempts at intervention helps clients to become much less anxious about potential failure. These clients are also better able to both accept failure and analyze it in order to better understand what correction needs to take place.

Implementing. Once a number of potential problem solving strategies have been outlined the client will be called to action. A number of caveats appear appropriate, however.

Typically, counselors and clients alike are eager to try their new skills and strategies and to begin to "resolve" problems. One's eagerness and excitement, while not being squelched, may need to be tempered. Clients should be encouraged to try and test new waters tentatively, knowing that they are *capable* of responding to roadblocks and problems they may find in the implementation of the plan.

Since it is rare that clients' initial efforts are perfectly satisfying, the counselor must be alert to support them throughout their attempts and help them maintain a realistic yet hopeful view.

One procedure I have found useful in assisting clients to maintain such a "hopeful" attitude is for the counselor to shape or design the implementation process into small units or steps. Introducing the strategy in small doses can insure the clients' successes which are needed as continual encouragement for their later attempts at "experimenting" with the intervention. Thus, for example, when working with clients who are interested in developing assertiveness skills, it will prove more productive to have them first employ such assertive skills within social settings which are supportive and non-threatening and only later, gradually, move to more resistant and aggressive encounters. Similarly, for depressive clients whose insecurity and poor self-esteem leads them to predict failure in all they will attempt, it will be more productive to have them begin with small challenges/tasks (e.g., dress up and go to the mall) as opposed to those requiring more exhaustive effort (e.g., planning a major vacation in Europe).

Evaluating. Once the plan has been implemented, clients are encouraged to assess both their own performance and the effectiveness of the intervention plan. Such reflection and assessment is viewed as an essential procedure for the (1) "fine tuning" of this particular strategy and (2) the development and maintenance of the clients' ongoing adaption and problem solving skills.

When it is clear that clients are well prepared to deal effectively with the original presenting complaint, the counselor needs to assist them in evaluating the counseling relationship and prepare for termination.

The thought of terminating the counseling relationship often evokes strong, ambivalent feelings within both the counselor and the client. Knowing that we have grown and benefited from the encounter is pleasing, and we are often eager to leave and test our new skills. But just as that newly hatched starling eagerly anticipates with perhaps excitement and some apprehension its first solo flight, clients are often unsure of their own ability to continue to cope successfully on their own and are tempted to seek continued comfort in the security of the counseling relationship. Terminating the relationship is essential if clients are ever to feel truly competent and independent.

Important as termination is, we must be sensitive to the clients' anxiety about such termination. Quite often clients will deny the inevitable termination, refusing to speak about it or consider it along with the counselor. Clients may become angry and resentful, feeling abandoned. Some clients may even become saddened as if falling into a state of mourning. To some extent these are all understandable and appropriate responses to the sense of loss being experienced by the clients. The counselor while being sensitive to these feelings needs to assist clients in freeing themselves from these negative concerns and move toward the enjoyment of the "growth" they have achieved and the independence which is now theirs.

In order to assist a client and facilitate the process of termination, the counselor should review with the client the history they have shared together. Discussing the presenting complaints, the procedures and processes used in counseling and the insights gained will help the client reach some sense of closure about what has preceded. In addition such a review will reinforce both the insights and skills learned, as well as the client's own sense of competence.

Following such a review and summarization clients are encouraged to discuss their own "felt need" for continued contact. If both the counselor and the client can mutually agree that additional counseling is not needed at this point, the counselor should explain to the client that he or she will be available should additional questions and concerns arise. After this

open invitation for renewal of professional contact, the counselor needs to conclude the contract with the appropriate farewells.

Concluding Thoughts

The counseling relationship and therapeutic process is first and foremost an interpersonal, dynamic process. The nature and direction of the process is clearly influenced by the training, skills, and attitude of the counselor. As such it is imperative that as counselors we do not blindly enter the relationship, simply "hoping" that our good intentions will suffice. In addition to good intention we need skill—skill to guide us with our listening, our questioning and most certainly our problem resolving. The intent of the current chapter was to provide the reader with an introduction to the type of factors operative within the counseling relationship, in the hope of stimulating the readers' interest in further reading and development of their own counseling skills.

While the hope was to demystify the counseling process, the intent was not to reduce the "wonder" of such a human encounter to statistics, procedures or stages. As pastoral counselors we must always be amazed by the beauty and magic of the helping relationship. The "science" of counseling has taken great pains to identify, describe and test the various essential and sufficient conditions of successful counseling. It is important that we become aware of, and trained in, these facilitative conditions and skills. It is also essential that we keep in mind the reality that "stages," "steps" and "processes" are man-made models and explanations. God does not always act according to our models and prediction. Thus while attempting to demystify the relationship, I must concur with Gerald May and suggest that the effective pastoral counselor will be one who not only is the master of the science of counseling but who also is willing "to be surprised by grace" (May 1982, p. 20).

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