

# Intentional Interviewing and Counseling

Facilitating Client Development  
in a Multicultural Society

Allen E. Ivey | Mary Bradford Ivey | Carlos P. Zalaquett



# Intentional Interviewing and Counseling

Facilitating Client Development  
in a Multicultural Society

Tenth Edition

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Australia • Brazil • Canada • Mexico • Singapore • United Kingdom • United States

***Intentional Interviewing and  
Counseling: Facilitating Client  
Development in a Multicultural Society,  
10th Edition***

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Love is listening.

*Paul Tillich, Ph.D., Licentiate of Theology  
University Professor, Harvard University  
Most influential theologian of the last century*

To the multicultural scholars who have changed the nature and practice of counseling and psychotherapy.

---



Courtesy of Patricia Arredondo

**Patricia Arredondo, Ed.D.**, NCC has dedicated her career to social justice advocacy. She is president of the Arredondo Advisory Group, designed to Accelerate Culture-Centered Knowledge and Practices. She is a past president of the American Counseling Association, National Latinxs Psychological Association, and Division 45 of the APA. She is a lead author for the ACA Multicultural Competencies and the APA Multicultural Guidelines.

*The multidimensionality of Latinxs and the complex context that surrounds individuals, families, ethnic-specific groups, and growing communities throughout the U.S. is an opportunity for counselors and therapists to become more knowledgeable about the diversity of intersecting identities and life experiences of Latinxs people. Over the decades, the resilience and optimism of immigrants and their families has led to many contributions to this country through a sense of collectivism.*



Courtesy of Joseph E. Trimble

**Joseph E. Trimble, Ph.D.**, has a life-long commitment to promote psychological and sociocultural research with Indigenous populations, especially American Indians and Alaska Natives. He is the recipient of the APA's Peace and Social Justice Award and also the APA's Gold Medal Award for Lifetime Achievement in Psychology in the Public Interest. Also, Visiting Professor at Harvard's Radcliffe Institute and Visiting Scholar in Psychology and Neuroscience at Scotland's University of St. Andrews. He is a consultant for many national and international government agencies.

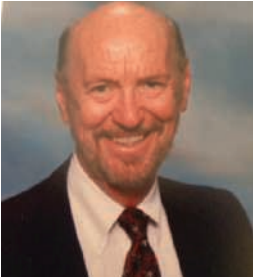
*Culture matters in the lives of all people, so much so they don't even think about it. We can come to appreciate these differences and learn from them. And maybe even embrace them.*



Courtesy of Thomas Parham

**Thomas Parham, Ph.D.**, President, California State University Dominguez Hills, is a past President and Distinguished Psychologist of the National Association of Black Psychologists (ABPsi), and has received the 100 Black Men-Wimberly Award.

*Are we a country of true diversity and inclusion? Only time will tell if we as a nation, have the temerity to push past this moment in history when sensibilities have been disrupted, and find new and enhanced measures of equality that more authentically represent a thrust towards becoming a more perfect union. Each of us, representing every domain of society, will need to stand up and ante up as well in this high-stakes game of political posturing. For a nation divided needs its scholars, academic disciplines, and institutions of higher learning to reframe the discourse on how best to affirm the dignity and humanity of all of this nation's citizens.*



Courtesy of Paul Pedersen

**Paul Pedersen, Ph.D.**, Professor emeritus at Syracuse University, was the first White scholar to introduce multicultural issues to the helping field, and is the author of many books which have deeply influenced the field. He has received many awards, among them APA Award for Distinguished Contributions to the International Advancement of Psychology.

*Every client comes to the interview with multiple voices.*



Courtesy of Derald Wing Sue

**Derald Wing Sue** is a professor of psychology and education at Teachers College, Columbia University. He is a past president and co-founder of the Asian American Psychological Association, and Past Presidents of the Society for Counseling Psychology, and the Society for the Study of Culture, Race and Ethnicity. He was awarded the American Psychological Association's Award for Outstanding Lifetime Contributions to Psychology. Dr. Sue was among the first to develop the Multicultural Competences and is nationally and internationally known for his research on microaggressions and microinterventions.

*To understand the dilemma faced by people of color in race talk we must first become aware of (a) the situational context of oppression that they live under, (b) the ensuing psychological costs associated with racism, and (c) the negative personal and group consequences for breaking their silence.*



## About the Authors

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Courtesy of Allen E. Ivey

**Allen E. Ivey** is Distinguished University Professor (Emeritus) at the University of Massachusetts, Amherst. He is the founder of Microtraining Associates, an educational publishing firm, and now serves as consultant with Microtraining/ProQuest. Allen is a past president, Diplomat, and Fellow of APA's Society for Counseling Psychology. He is also a Fellow of the American Counseling Association, the Society for the Psychological Study of Culture, Ethnicity, and Race, and the Asian American Psychological Association. But he is most proud of being named Distinguished Multicultural Elder at the National Multicultural Conference and Summit. He and Mary have consulted and conducted workshops in over 25 countries. He is author or coauthor of over 200 articles and more than 50 books, which are internationally translated into many languages. He is the originator of the video-based microskills approach, which is fundamental to this book and used in multiple settings throughout the world.



Courtesy of Mary Bradford Ivey

**Mary Bradford Ivey** is a former school counselor and the vice-president of Microtraining Associates, and is now serving as a consultant for Microtraining ProQuest. She is a Nationally Certified Counselor (NCC) and holds a certificate in school counseling. She is one of the first 15 Fellows of the American Counseling Association, and also received ACA's O'hanna Award for her work in social justice and multicultural issues. Her elementary counseling program was named one of the 10 best in the nation at the Christa McAuliffe Conference. She has served as stress counselor at Amherst College, and a visiting professor at the University of Massachusetts, Amherst; Keene State College; University of Hawai'i, Manoa; and Flinders University, Australia. Mary is the author or coauthor of 21 books translated into multiple languages. With Allen, she has presented workshops and keynotes throughout the world. Her video demonstrations of counseling skills, particularly with children, are an important part of the several Micro-counseling videos to be found on ProQuest's website.



Courtesy of Carlos Zalaquett

**Carlos P. Zalaquett** is a professor in the Department of Educational Psychology, Counseling, and Special Education at the Pennsylvania State University. He is the past president of the Society of Interamerican Psychology/Sociedad Interamericana de Psicología (SIP), the Florida Mental Health Counseling Association, and the Suncoast Mental Health Counselors Association (SMHCA), current president of the Pennsylvania Mental Health Counselors Association, and member of the Global Psychology Alliance (GPA). Carlos is the author or coauthor of more than 60 scholarly publications and eight books, including the Spanish version of *Basic Attending Skills*. He has received many awards, including the University of South Florida's Latinos Association's Faculty of the Year, the Tampa Hispanic Heritage's Man of Education Award, and the SMHCA Emeritus Award. His current brain-based research integrates mind, brain, and body in the exploration of human behavior central to counseling and psychotherapy. He is an internationally recognized expert on mental health, counseling, psychotherapy, diversity, social justice, and education and has conducted workshops and lectures in 12 countries.

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Welcome to the 10th edition of *Intentional Interviewing and Counseling: Facilitating Client Development in a Multicultural Society*!

**Love is listening. (Paul Tillich)** We wrote this book for students to discover and become proficient in counseling and psychotherapy skills in a warm and successful way. Following are some of our main purposes.

---

### Emphasizing Active Listening and Empathy

Listening and reflecting back to the client what you hear is fundamental. Carl Rogers was founder of person-centered counseling and the first to audio record live counseling sessions. As early as 1938, he discovered that what therapists said they did in the session was not necessarily what actually happened. More important was his discovery that an empathic relationship based on [active listening](#) between counselor and client is fundamental to success.

---

### Describing Behaviors That Facilitate Change

In spite of progress, the key **behaviors** facilitating client growth and change remained a mystery. Questions such as “What is listening?” “Is nonverbal behavior an important aspect of successful therapy?” and “How best can we structure an effective session and treatment plan?” remained as unknowns.

Working with colleagues at Colorado State University (CSU), Allen analyzed observable behaviors using videorecorded sessions. The group identified active listening’s observable specifics, which included culturally appropriate eye contact, comfortable body language and facial expression, a pleasant and smooth vocal tone, and verbal following—staying with the client’s central topics and concerns. They also confirmed empathy as a main component.

These findings led to the microskills approach, which has become the standard for interviewing, counseling, and psychotherapy skills training throughout the world. The multi-culturally sensitive microskills model is now available in many translations and used in well over 1,000 universities and training programs throughout the world. The emphasis is on clarity and providing the critical background for competence in virtually all counseling and psychotherapy theories.

---

### Teaching the Microskills

Once Allen became aware of the importance of the microskills, he created a model for teaching the fundamentals of counseling and psychotherapy. He was the first to offer a practical way to teach interviewing to professionals, educators, and students-in-training. The microskills framework has influenced many fields, nationally and internationally, such as counseling, psychology, rehabilitation, medicine, law, and social work, and even police and the CIA. You will find it unexpectedly in such areas as training migrant peer counselors in Africa and even advising, library work and



agricultural extension. In turn, professionals may be found using the framework in family therapy with children, management trainees, psychiatric patients, refugees, and many others.

The backbone of this book is becoming competent in active listening and empathic skills. Both serve as the foundation to the skills shown in the Microskills Hierarchy on the inside cover. Learning includes a step-by-step movement through the microskills hierarchy, showing the major aspects of a successful session.

Almost anywhere you turn, you will find the basic listening sequence in other books, in multiple training programs around the world, even in the [Wall Street Journal](#). Look for: attending/listening, questions, paraphrasing (reflection of content/cognitions), reflection of feeling, and summary, often presented in that order.

---

## Teaching Active Listening to Clients

You will find teaching active listening skills to clients or patients is valuable. At a Veterans Hospital, Allen did therapy using and teaching microskills to inpatients with video feedback. This approach enabled them to be released, even from locked wards. Mary taught listening skills to sixth graders both as therapy and teaching them how to be peer counselors. Carlos taught many of his clients listening skills to improve their communication with others.

---

## Achieving Success

Students who work toward competency and transfer the skills taught here to counseling and clinical practice will be able to:

- **Engage in the basic skills of the counseling or psychotherapy session:** listening, influencing, and structuring an effective session with individual and multicultural sensitivity.
- **Conduct a full session** using only listening skills by the time they are halfway through this book.
- **Become competent in a basic structure of the session—Empathic Relationship, Story, Goals, Restory, and Action**—that can be applied to many different theories:
  1. Develop an **empathic relationship** with the client.
  2. Draw out the client's **story**, giving special attention to strengths and resources.
  3. Set clear **goals** with the client.
  4. Enable the client to **restory** and think differently about concerns, issues, and challenges.
  5. Help the client move to **action** outside the session.

---

## Learning by Example

**Transcripts** of real counseling sessions are given increased attention and emphasis in most chapters, showing how the skills are used in the interview and their impact on client conversation, leading to personal growth. We see how empathy is demonstrated and rated in the session. The Client Change Scale illustrates how the client is learning and progressing in the session. At times, reading key transcripts aloud will bring the interview even more to the here and now.

---

## Reviewing Your Competencies

Students who develop a solid portfolio of competencies become clear about how much they have learned. The **Portfolio of Competencies** is emphasized in each chapter. Students have found that a well-organized portfolio is helpful in obtaining good practicum and internship sites and, at times, professional positions as well. The portfolio concept and video practice increase course satisfaction and ratings.

---

## Sharpening Your Skills

In addition to structuring a meaningful interview you will also:

1. **Analyze with considerable precision your own natural style of helping** and, equally or perhaps more important, how your counseling style is received by clients.
2. **Increase your understanding of diversity** and the need to adjust your interviewing to many types of individuals as you become more multiculturally competent.
3. **Understand the meaning of social justice** and the need to become an advocate for individuals and groups. Develop a client-centric approach, full of genuine desire to help others and advance our communities and societies.
4. **Become able to integrate basic aspects of neuroscience** into the session. Each microskill in some way affects the functioning of the brain through neuroplasticity.

---

## New and Updated Competency Features in This Tenth Edition

- **Trauma informed counseling, crisis counseling, suicide assessment and prevention**, and a transcript of **cognitive behavioral therapy** are given increased attention. In addition, the importance of adverse child events (ACEs) is presented. Adverse experiences from childhood can reappear as symptoms in the teenage years and adulthood. Students can take learning from earlier chapters to develop beginning competence in critical aspects of practice.
- **Integrated mental and physical health services** will enable us to move to new, more sophisticated, and complete systems to help clients and patients. With an increase in mental health disorders, we face deeper and more complex issues. Innovations in team practice are bringing counselors and psychotherapists together more closely with physicians, nurses, and human service workers. Furthermore, neuroscience, neurobiology, and brain research are leading to an awareness that body and mind are one. Actions in the counseling session affect not only thoughts, feelings, and behaviors, but also what occurs in the brain and body. Many exciting new opportunities await both students and instructors.
- **Listening lights up the brain.** The power and importance of attending behavior and empathy are now further validated by neuroscience research showing that specific parts of the brain are activated during empathic listening. Special attention is paid to portions of the brain (with new illustrations) that are affected in the helping process. Details and implications for practice will be found in Appendix IV.

- **The NIH's new Research Domain Criteria** (RDOC) integrates cutting-edge neuroscience with counseling and therapy. Counseling and psychotherapy change the mind and brain, even the body, and build new neural networks in both client and counselor through neural plasticity and neurogenesis. Neuroscience/neurobiology research stresses a positive wellness orientation to facilitate neural development, along with positive mental health. You will find that virtually all of what we do in the helping fields is supported by neuroscience, as illustrated in Appendix IV.
- **The action influencing skills** (Chapter 12) of self-disclosure, feedback, logical consequences, directives/instruction, and psychoeducation are presented together through data and transcripts of a four-interview case study with a single client, who makes progress and becomes able to free herself with the counselor to discuss deeper, more critical relationship issues. A Cognitive Behavioral Therapy (CBT) transcript shows the specifics of work with automatic thoughts and demonstrates clearly how students can use this strategy.
- **Multicultural, social justice, and advocacy** have once again been enlarged. The introduction is Eduardo Duran's concept of the Soul Wound and the historical and intergenerational issue of cultural and individual trauma. We have included specific session recommendations to help clients who have encountered racism, sexism, bullying, and the many forms of harassment and oppression. The American Psychological Association recently released a statement that apologizes to People of Color for their role promoting, perpetuating, and failing to challenge racism, discrimination, and human hierarchy. This may be a new and enriched beginning for us all to ensure we can better work with these challenges of today.
- **Stress and stress management** have always been central in this book, but now with awareness of brain/body connections, we see stress is there in virtually all clients. Regardless of concerns or diagnosis, from everyday challenges, to ADD, to anxiety, to depression, to panic disorder, we need to take management of stress much more seriously. The critical issue of recognizing stress and its dangerous impact on the brain and body is emphasized throughout, while also noting that appropriate levels of stress can be positive and necessary for learning, change, and building resilience to deal with more serious and challenging stress. Research in wellness and neuroscience has revealed the importance of positive psychology and therapeutic lifestyle changes (TLCs) as a supplement to stress management and all theoretical approaches.
- **The fifth stage of the interview—Action**—has been given increased attention with the **action plan**. The action plan is a systematic, comprehensive approach to homework and generalization from the interview to the "real world." Albert Ellis gave us the term [homework](#), which for some clients feels like school. The action plan is more systematic, with an emphasis on collaboration and client decision as to how to take the interview into daily life.
- **Self-actualization, intentionality, and resilience** are clarified and given increased emphasis as goals for the interview. Resilience, especially, has become more central as an action goal to enable clients to adapt and grow as they experience stress. A new section focuses on what we would like to see for our clients as a result of the counseling session. Of course, we want to facilitate their reaching their own desired goals, but we also seek to encourage the development of resilience skills to better cope with future stresses and challenges.

- **Transcendence** goes beyond your own self-development as a person. Your self-realization is wonderful, but helping others, their families, and your community to grow is even better. You gain by applying your newly developed skills to help others as both you and your clients advocate and contribute to the improvement of our communities and society.

---

## Our field is constantly evolving...

As we work on this diverse and evolving world, our attention is drawn to new areas where we can contribute. Eco- and climate change anxiety are now impacting mental health around the globe, as reported during the 2021 United Nations climate change conference (COP26). Current research to be published in *Lancet Planetary Health* shows that seventy-five percent of young people find the future frightening and thirty-nine percent are hesitant to have their own children. Mental health professionals can facilitate ways of coping, transform, and advocate for actions to save the planet, and help your clients deal with the new future.

Our work would never end, but you have our commitment to continue bringing these issues to your attention.

As we always say to our students, colleagues and professionals, *to be continued...*

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## Cengage Instructor Center

Additional instructor resources for this product are available online. Instructor assets include an Instructor's Manual, PowerPoint® slides, and a test bank powered by Cognero®. Sign up or sign in at [www.cengage.com](http://www.cengage.com) to search for and access this product and its online resources.

The Cengage Instructor Center is an all-in-one resource for class preparation, presentation, and testing. The instructor resources available for download include:

- **Instructor's Manual.** Provides activities and assessments for each chapter (including business cases with corresponding assessment activities) and their correlation to specific learning objectives, an outline, key terms with definitions, a chapter summary, and several ideas for engaging with students with discussion questions, ice breakers, case studies, and social learning activities that may be conducted in an on-ground, hybrid, or online modality.
- **Test Bank.** A comprehensive test bank, offered in Blackboard, Moodle, Desire2Learn, and Canvas formats, contains learning objective-specific true-false, multiple-choice, and essay questions for each chapter. Import the test bank into your LMS to edit and manage questions and to create tests.
- **PowerPoint Slides.** Presentations are closely tied to the Instructor's Manual, providing ample opportunities for generating classroom discussion and interaction. They offer ready-to-use, visual outlines of each chapter that may be easily customized for your lectures.
- **Transition Guide.** Highlights all of the changes in the text and in the digital offerings from the previous edition to this edition.

# Acknowledgments

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# The Foundations of Counseling and Psychotherapy

Justice for the individual  
Is part of justice for the community;  
And exists for one, only when  
both are satisfied.  
So it is that personal freedom  
Must be limited by security  
for others.  
And the mature person is a servant to  
the people.

Yakima Nation Proverb

**I**ntentional Interviewing and Counseling presents sound knowledge and practical skills and strategies for effective counseling and therapy in our diverse and changing society. The world enters the third decade of the 21st Century immersed in multiple changes and challenges. Life, due to the COVID-19 and racism pandemics, financial instability, political polarization, climate change, violence, wars, suicide, stress, and personal and relational difficulties, is no longer the same. The events affecting the world, our countries, and ourselves are creating a new normal and are bringing stress and mental issues to new highs, leading the World Health Organization to invest in mental health across the world (World Health Organization [WHO], 2020).

The mental health demands call for mental health professionals to use their expertise to alleviate the widespread suffering. Counselors, psychologists, social workers, and other mental health professionals are needed more than ever. Much of their expertise and interventions are built on the therapeutic skills presented in this book (Ivey & Ivey, 2020; Zalaquett, 2020).

Now more than ever, listening skills help address social challenges, improve relationships, advance wellness, better mental health, promote advocacy, and create a more multiculturally humble, equitable, and just society.

The universal power of intentional listening is observed across all theories in counseling and psychotherapy and across every dimension of human interaction, including the COVID-19 and racism pandemics (Ivey & Ivey, 2020). Building on this foundation, the first half of the book focuses on empathy and listening skills and the building of the therapeutic relationship and structuring of an effective session. Later chapters will discuss influencing skills and strategies, designed to provide you with many possibilities for empowering your clients to take charge, find meaningful goals, change their lives, and contribute to their communities and societies. The book concludes with integrative applications and illustrates how these skills can be applied to multiple theories of counseling and therapy and how you can integrate this learning with your own way of being to advance your own personal style of helping.

**Chapter 1. Intentional Interviewing, Counseling, and Psychotherapy** offers an overview and a road map of what this book can do for you. We begin by defining interviewing, counseling, and psychotherapy. Counseling is best considered both a science and an art. We present the central skills of counseling, but it is you who will make this knowledge live in the interview and therapy session.

Culturally specific microskills are building blocks of effective counseling and psychotherapy and keys to relationship building. The chapter provides information about the importance of multiculturalism, social justice, and advocacy. Counseling changes the brain, and you will find skills supported by a basic neuroscience that will build what is called brain plasticity. The brain has the ability to rewire itself and you can make a difference in how your clients grow.

You are not taking this course by chance: something has led you here, with unique abilities oriented to helping others. We ask you to video record an interview as you start to identify your natural helping skills. This can serve as a baseline on which you can build your own approach to the helping fields. You will be asked to reflect on what brings you to the helping field. What do you want to do to help others grow and develop?

**Chapter 2. Ethics and Multicultural Competence: Stress and Trauma, Building Resilience** Ethics are the professional standards that all major helping professions observe and practice. There are guidelines on issues such as competence, informed consent, confidentiality, power, and social justice. Multicultural competence and multicultural humility focus on awareness, knowledge, skills, and action to meet the highly diverse clients we are likely to meet. You will be asked to examine yourself as a multicultural individual. Positive psychology, wellness, and therapeutic lifestyle changes (TLCs) enable clients to identify their strengths and resources to build resilience. This approach significantly facilitates resolving client life issues, focusing on what they “can do” rather than what they “can’t do.”

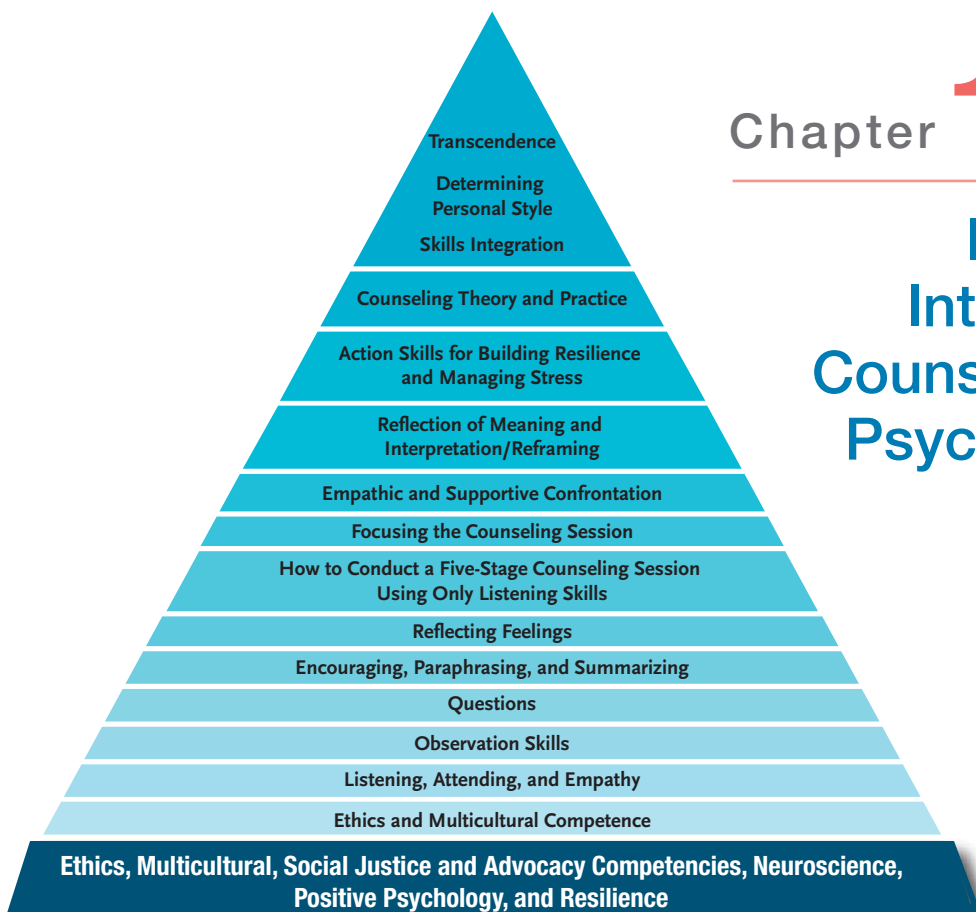
**Chapter 3. Listening, Attending, and Empathy: Essential for Relationship Building** presents the most basic skills of counseling and psychotherapy. Without the listening and attending skills, an empathic relationship cannot occur. Many beginning helpers inappropriately strive to solve the client’s issues and challenges in the first five minutes of the session by giving premature advice and suggestions. Please set one early goal for yourself: [Allow your clients to talk](#). Observe closely how they are behaving, verbally and nonverbally. Your clients may have spent several years developing their concerns, issues, and life challenges before consulting you. Listen first, last, and always.

**Chapter 4. Observation Skills** builds on attending behavior and gives you the further opportunity to practice observing your clients’ verbal and nonverbal behavior. You are also asked to observe your own nonverbal reactions in the session. Clients often come in with a “hangdog” and “down” body posture. Between your observation and listening skills, you can anticipate that they will later have more positive body language, as well as a new story and a better view of self. You can help their bodies to stand up straight and their eyes to shine.

Begin this book with a commitment to yourself and your own natural communication expertise. Through the microskills approach, you can enhance your natural style with new skills and strategies that will expand your alternatives for facilitating client growth and development.

# Chapter 1

## Intentional Interviewing, Counseling, and Psychotherapy



We humans are social beings. We come into the world as the result of others' actions. We survive here in dependence on others. Whether we like it or not, there is hardly a moment of our lives when we do not benefit from others' activities. For this reason, it is hardly surprising that most of our happiness arises in the context of our relationships with others.

—The Dalai Lama

## Chapter Goals and Competency Objectives

Each chapter of this book is organized around the counseling framework of awareness, knowledge, skills, and action. Awareness and knowledge of counseling and therapy are

obviously essential, but they are not really meaningful until skills are built and taken into action beyond the textbook to the real world.

### Awareness and Knowledge

- Define and discuss similarities and differences among interviewing, counseling, and psychotherapy, and review who actually conducts most of the helping sessions. Explore counseling and psychotherapy as both science and art. This may be surprising and rewarding.
- Identify intentionality and cultural intentionality as bases for increasing your flexibility to reach a wide variety of clients with humility as you face an endless array of concerns, issues, and challenges—and these include advocacy—to self, family, and community.
- Examine key goals of counseling and psychotherapy: self-actualization, resilience, and advocacy and resolution of client issues and challenges, such as trauma and mental disorders.
- Consider the value and place of cutting-edge neuroscience in your own approach to counseling and psychotherapy.
- Identify the locations where counseling and psychotherapy are practiced, including remote telemental health or telepsychology.

## Skills and Action

- Ability to assess and evaluate your own helping style. As your first practical exercise, video record a counseling session with a volunteer demonstrating your natural style of communicating and helping. This provides a baseline so that later you can examine how your counseling style may have changed and grown during your time with this book. Practicing and developing a Portfolio of Competencies provide a summary and journal of your experience.
- Ability to reflect on yourself as a potential helper. Whereas science undergirds what is said here, you as an independent artist will find your own integration of knowledge and skills.
- Ability to conceptualize and plan to use the Microskills Hierarchy, which provides a foundation for interview action. The skills hierarchy can be used to examine your early behavior as a counselor/therapist. It also will be useful in becoming skilled in multiple theories and approaches to counseling and therapy, including person-centered therapy, cognitive behavioral therapy (CBT), and crisis and trauma counseling, as well as in coping with many types of discrimination, including that based on race, gender, sexual orientation, and disability.

## Interviewing, Counseling, and Psychotherapy

Sienna, sixteen years old, is eight months pregnant with her first child. She says, “I wonder when I’ll be able to see Freddy [baby’s father] again. Mom works hard to keep him away from me. I mean, I want him involved; he wants to be with me, and the baby. But my mom wants me home. His mom said she’s looking for a two-bedroom apartment so we could possibly live there, but I know my mom will never go for it. She wants me to stay with her until I graduate from high school and, well, to be honest, so that this never happens again [she points to her belly].”

I listen carefully to her story and later respond, “I’m glad to hear that Freddy wants to be involved in the care of the child and maintain a relationship with you. What are your goals with him? What happens when you talk with your mom about him?”

“I don’t know. We don’t really talk much anymore,” she says as she slumps down in her chair and picks away at her purple nail polish. I reflect her sad feelings, but as I do so, she brightens up just a bit as she recalls that most of the time she gets along with her mother fairly well.

She then describes her life before Freddy, focusing mainly on the crowd she hung around, a group of girls whom she says were wild, mean, and tough. Her mood returns to melancholy, and she seems anxious and discouraged. At the same time, the session has gone smoothly, and we seem to have a good relationship. I say, “I sense that you have a good picture of what you are facing. Well, it seems that there’s a lot to talk about. How do you feel about continuing our conversation before sitting down with your mom?”

Surprisingly, she says, “No. Let’s talk next week with her. I think she might come. The baby is coming soon and, well, it’ll be harder then.” As we close the session, I ask her, “As you look back on our talk together, what comes to mind?” Sienna responds, “Well, I feel a bit more hopeful, and I guess you’re going to help me talk about some important issues with my mom, and I didn’t think I could do that.”

This was the first step in a series of five sessions. As the story evolved, we invited Freddy for a session. He turned out to be employed and was anxious to meet his responsibilities, although finances remained a considerable challenge. A meeting with both mothers followed, and a workable action plan for all families was generated. I helped Sienna find a school with a special program for pregnant teens.

### Reflective Exercise

#### Love is listening

Famed theologian Paul Tillich says, “Love is listening.” [Listening](#), [love](#), [caring](#), and [relationship](#) are all closely related. These four words could be said to be the center of the helping process.

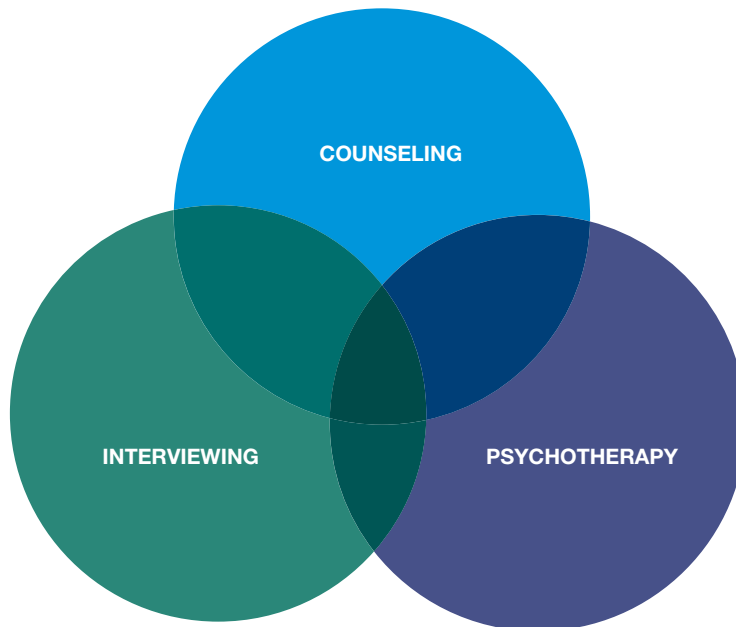
- What relevance do these words have in the meeting with Sienna?
- What are your reactions and thoughts about the centrality of these words?
- How might the science and art of counseling and psychotherapy speak to this issue?

This case exemplifies the reality of helping. We often face complex issues with no clear positive ending. If we can develop a relationship and listen to the story carefully, clearer goals develop, and solutions usually follow.

#### Defining Interviewing, Counseling, and Psychotherapy

The terms [interviewing](#), [counseling](#), and [psychotherapy](#) are used interchangeably in this text. The overlap is considerable (see Figure 1.1), and at times interviewing will touch briefly on counseling and psychotherapy. Both counselors and psychotherapists typically draw on the interview in the early phases of their work.

**Interviewing** is the basic process used for gathering data, providing information and suggestions to clients, and offering workable alternatives for resolving concerns. Interviewers can be found in many settings, including employment offices, schools, and hospitals. Professionals in many areas also use these skills—for example, in medicine, business, law, community development, library work, and many government offices.



**Figure 1.1** The interrelationship of interviewing, counseling, and psychotherapy.



Closely related to interviewing, **coaching** is a short to medium term professional, collaborative relationship between a client and coach, aimed at the “identification, utilization, and development of personal/psychological strengths and resources in order to enhance positive states, traits and behavior” (van Zyl et al., 2020). Many aspects of the coaching movement are closely related to counseling and psychology’s history, but coaching is now recognized as a separate profession.

**Counseling** is a more intensive and personal process. Counseling’s focus is on listening to and understanding a client’s life challenges and then developing strategies for change and growth. Counseling is most often associated with the professional fields of counseling, human relations, clinical and counseling psychology, pastoral counseling, and social work and is also part of the role of medical personnel and psychiatrists.

**Psychotherapy** focuses on more deep-seated difficulties, which often require more time for resolution. Historically, psychotherapy was the province of psychiatrists, but they are limited in number, and today they mostly offer short sessions and treat with medications. Professionals other than psychiatrists conduct primarily talking therapy. Table 1.1 shows a total of 25,530 psychiatrists along with more than one million other helping professionals. Thus, it is only logical that other specialists, such as clinical and counseling psychologists, clinical mental health counselors, clinical rehabilitation counselors, and clinical social workers now provide most psychotherapy. All these professionals interview clients to obtain basic facts and information as they begin therapy, and they often provide counseling as part of the therapeutic process. The skills and concepts of intentional interviewing and counseling are equally necessary for the successful conduct of longer-term psychotherapy.

Importance of Attending Sessions

For counseling and therapy to work, clients need to attend their sessions. Do they?

Studies indicate that the mean number of sessions attended per client of outpatient therapists is about six sessions, a number very similar to the 5.65 observed for student therapists (Meier, 2021). Studies also show differential rates of dropouts by population treated, type of treatment, and accommodations to client preferences. Henshaw, Wall, and Lourie (2020) indicate dropout rates in college counseling centers range from 16% to as high as 67%. In addition, Sue and Sue (2019) have noted that close to 50% of clients from minority groups may drop out after the first session. Dropouts represent opportunities missed for both client and counselor.

Table 1.1     Numbers of Helping Professionals			
School & Career Counselors	333,500	Marriage and Family Counselors	62,200
College Counselors	72,050	Clinical, Counseling, and School Psychologists	192,300
Mental Health Counselors	139,820	Child, Family and School Social Workers	320,170
Rehabilitation Counselors	120,200	Health Care Social Workers	174,890
Substance Abuse and Behavioral Disorder Counselors	91,040	Psychiatrists	25,530
Human Service Workers—Social and Human Service Assistants	425,600	Professional Coaches identified by the International Coaching Federation	41,500

U.S. Department of Labor. (2020). *Occupational Outlook Handbook*. [www.bls.gov/ooh/home.htm](http://www.bls.gov/ooh/home.htm). The Labor Department updates these data regularly.

The Center for Collegiate Mental Health (CCMH, 2021) reported clients attend an average of 4.35 individual sessions, including initial clinical evaluations and individual counseling. Clients attending counseling improve on their issues and beyond. A survey of 562 counseling center directors reported anxiety (60.7%), depression (48.6%), stress (47.0%), family concerns (29.0%), specific relationship problems (27.0%), and academic performance difficulties as frequent client concerns. The services of counselors not only helped the students overcome their issues but also helped them remain engaged in their institutions (62.3%) and improve their academic performance (66.2%) (AUCCCD, 2020; The Center for Collegiate Mental Health [CCMH], 2021).

There is also the possibility of harming clients and a common estimate is that 5% of clients feel that harm has been done (Crawford et al., 2016).

The failure to establish a relationship is a major cause, though some therapists have used inappropriate techniques. If the culture of the client is different and the therapist has had insufficient training and skill, or fails to follow ethical principles, errors may occur.

## The Science and Art of Counseling and Therapy

Is therapy effective? Yes! Many psychotherapies have been found to be effective interventions for a range of psychological concerns (Lambert & Kleinstäuber, 2019; Wampold, cited in No, 2019; Zalaquett, Ivey, & Ivey, 2019). Prochaska, Norcross, and Saul (2020) reviewed the results of thousands of randomized clinical trials (RCTs) and hundreds of meta-analyses and found research confirmed that psychotherapies work. “The typical client receiving psychotherapy is better off than 80% to 85% of untreated people within a dozen sessions. The average effect size of 0.85 compared with no treatment is a large, robust effect. Those numbers concretely translate into healthier and happier people” (p. 996).

Counseling and psychotherapy now have a solid research and evidence base that identify the many qualities and skills that lead to effectiveness. This research focuses on the factors that contribute to establishing an effective working relationship with the client (empirically supported relationships), as well as the effects of specific interventions (empirically supported treatments) (Norcross & Lambert, 2018).

But an evidence-based approach by itself is not enough. Counseling is both a science and an art. You as counselor are similar to an artist whose skills and knowledge produce beautiful paintings out of color, canvas, and personal experience. You are the listener who will

### Reflective Exercise

#### Where is your place in the helping field?

- Do you see yourself emphasizing interviewing, counseling, or psychotherapy?
- Given the many possibilities for service, which of the professions listed in Table 1.1 appeals to you most at this time?
- Would you rather work in a school, a community mental health clinic, a hospital, rehabilitation clinic, a business, private practice, telemental health practice, or community work preventing and treating alcohol and drug issues?
- What are your thoughts as to your responsibility in meeting the overall mental health needs of all clients, regardless of cultural background or those who may be in poverty or harassed because of race, social status, or LGBTQIA+ identity?
- Would you like to work to improve the overall mental health and well-being of your society?

provide color and meaning to the interpersonal relationship we call helping. And, like art, each interview and each client is unique.

Like the artist or the skilled athlete, you bring a natural talent to share with others and the flexibility to respond to surprises and change direction when necessary. Theories, skills, and strategies remain essential, but you are the one who puts them together and can uniquely facilitate the development and growth of others.

Please take a moment first to review the Voices from the Field, which explores how traditional counseling too often focuses only on problems. James Lanier suggests positive ways to draw out clients' stories and focus more on strengths.

### Voices from the Field

## National and International Perspectives on Counseling Skills

### Problems, Concerns, Issues, and Challenges—How Shall We Talk About Client Stories?

James Lanier, University of Illinois, Springfield

There are different ways of listening to client stories. Counseling and therapy historically have tended to focus on client problems. The word **problem** implies difficulty and the necessity of eliminating or solving the problem. **Problem** may imply deficit. Traditional diagnosis such as that found in the *The Diagnostic and Statistical Manual of Mental Disorders* (5th ed. [DSM-5]; American Psychiatric Association, 2013) carries the idea of **problem** a bit further, using the word **disorder** with such terms as **panic disorder**, **conduct disorder**, **obsessive-compulsive disorder**, and many other highly specific disorders. The way we use these words often defines how clients see themselves.

I'm not fond of problem-oriented language, particularly that word **disorder**. I often work with African American youth. If I asked them, "What's your problem?" they likely would reply, "I don't have a problem, but I do have a concern." The word **concern** suggests something we all have all the time. The word also suggests that we can deal with it—often from a more positive standpoint. Defining **concerns** as **problems** or **disorders** leads to placing the blame and responsibility for resolution almost solely on the individual.

Recently, there has been increasing and particular concern about that word **disorder**. More and more, professionals are realizing that the way people respond to their experiences is very often a **logical response to extremely challenging situations**. Thus, the concept of posttraumatic stress *disorder* (PTSD) is now often referred to as a *stress reaction*. Posttraumatic stress reaction (PTSR) has

become an alternative name, thus normalizing the client's response. Still others prefer to **avoid naming** at all and seek to work with the thoughts, emotions, and behaviors of the stressed clients.

Finding a more positive way to discuss client concerns and stories is relevant to all your clients, regardless of their backgrounds. *Issue* is another term that can be used instead of **problem**. This further removes the pathology from the person and tends to put the person in a situational context. It may be a more empowering word for some clients. Carrying this idea further, **challenge** may be defined as a call to our strengths. All of these terms represent an **opportunity for change**.

Remember, if you listen carefully to most stories, what at first seems "abnormal" often will gradually become more understandable as you discover that the client has presented a "normal" response to an insane situation.

As you work with clients, please consider that change, restorying, and action are more possible if we help clients maintain awareness of already existing personal strengths and external resources. Supporting positive stories helps clients realize the positive assets they already have, thus enabling them to resolve their issues more smoothly and effectively, and with more pride—specifically, they become more actualized. Then you can help them restory with a **can-do** resilient self-image. Out of this will come action, generalizing new ideas and new behaviors to the real world.

# Cultural Humility and Intentionality: The Flexible, Aware, and Skilled Counselor

All interviewing and counseling are multicultural.

Each client comes to the session embodying multiple voices from the past.

—Paul Pedersen

The culturally intentional counselor acts with a sense of purpose (intention), skill, and respect for the diversity of clients. **Cultural intentionality** is a central goal of this text. We ask you not only to be yourself but also to realize that to reach a wide variety of clients, you need to be flexible, constantly changing behavior and learning new ways of being with the uniqueness of each client. There are many ways to facilitate client development.

Furthermore, practice cultural humility, an orientation to care for clients that is based on self-reflexivity and self-awareness, valuing clients' expertise on the social and cultural context of their lives, openness to establishing power-balanced relationships, and a lifelong dedication to learning. The counselor is willing to learn from clients about their experiences without forgetting their own cultural context and exploring their own beliefs, values, and biases through introspection (Lekas, Pahl, & Fuller, 2020). Humility is becoming a central part of multicultural competence and opens an intrapersonal and interpersonal approach toward person-centered care.

The word **intentionality** speaks to the importance of being in the moment and responding flexibly to the ever-changing situations and needs of clients. Beginning students are often eager to find the "right" answer for the client. In fact, they are so eager that they often give quick patch-up advice that is inappropriate. Even experienced counselors can become encapsulated into one way of thinking, and may focus on potential client's shortcomings, forgetting the impactful influence of societal or contextual factors such as racism, inequalities, and access barriers to needed services, including mental health and counseling services.

In short, flexibility—the ability to move in the moment and change style—is basic to the art form of helping. But this needs to be based on solid knowledge, awareness, and skills that are then turned into culturally intentional action. For example, your own personal issues or cultural factors such as ethnicity, race, gender, lifestyle, socioeconomic background, or religious orientation may have biased your response and session plan for Sienna.

The words **cultural intentionality** speak to the fact that the interview occurs in a cultural context, and we need to be aware of diversity and difference. Culturally intentional counseling and psychotherapy are concerned not with which single response is correct but with an awareness that different people from varying backgrounds respond uniquely. We can define **cultural intentionality** as follows:

Cultural intentionality is acting with a sense of capability and flexibly deciding from among a range of alternative actions. The culturally intentional individual has more than one action, thought, or behavior to choose from in responding to changing life situations and diverse clients. The culturally intentional counselor or therapist remembers a basic rule of helping: **If a helping lead or skill doesn't work—try another approach!**

**Multiculturalism**, also referred to as diversity or cross-cultural issues, is now defined quite broadly. Once it referred only to the major racial groups, but now the definition has expanded in multiple ways. The story is that we are all multicultural. If you are White, male, heterosexual, from Alabama, a Methodist, able-bodied, a veteran, and raised in a rural area, you have a distinct cultural background. Just change Alabama to Connecticut or California, and you are different

culturally. Similarly, change your color, race, gender, sexual orientation, religion, or physical ability, and your cultural background changes your worldview and behavior. Multiculturalism means just that—many cultures.

We are all multicultural beings. Culture is like air: We breathe it without thinking about it, but it is essential for our being. Culture is not “out there”; rather, it is found inside everyone, markedly affecting our views of the world. Continually learn about and be ready to discuss cultural difference, but always with a sense of humility and willingness to learn.

We live in a multicultural world, where every client you encounter will be different from the last and different from you. Without a basic understanding of and sensitivity to a client’s uniqueness, you may fail to establish a relationship or a true grasp of the client’s issues. Throughout this book, you will examine the multicultural, social justice, and advocacy issues and opportunities we all experience.

## Resilience and Self-Actualization in Social Context

When we tackle obstacles, we find hidden reserves of courage and resilience we did not know we had. And it is only when we are faced with failure do [sic] we realize that these resources were always there within us. We only need to find them and move on with our lives.

—A. P. J. Abdul Kalam  
11th President of India

Humans have prevailed during challenging times, such as wars, natural disasters, pandemics, and traumatic events causing varying degrees of personal and interpersonal distress. Many, even most, of our clients come to us feeling that are not functioning effectively and are focused on what’s wrong with them. Clients may feel **stuck**, **overwhelmed**, and **unable to act**. Frequently, they will be unable to make a career or life decision. They are **stressed**. Often, they will have a **negative self-concept**, or they may be depressed or full of anger. This focus on the negative is what we want to help change as we emphasize positive psychology and enable development of client intentionality, resilience, self-actualization, and transcendence. We need to listen, but this requires that we also take an advocacy position.

We cannot expect to solve all our clients’ issues and challenges in a few sessions, but in the short time we have with them, we can make a difference. First think of what cultural intentionality, humility, and flexibility mean for you as a counselor or psychotherapist. Clients will benefit and become stronger as they feel heard and respected, and they will discover new ways

### Reflective Exercise

#### Developing your own culturally intentional style

- How do you define culture and how it influences you?
- What is your family and cultural background, and how does that affect the person you are?
- How has each new experience or setting changed the way you think?
- Has this led to increasing flexibility and awareness of the many possibilities that are yours?
- Can you listen and learn from those who may differ sharply from you?

to resolve their concerns. Resolving specific immediate issues, such as choosing a college major, making a career change, deciding whether to break up a long-term relationship, or handling mild depression after a significant loss, will help them feel empowered and facilitate further action.

**Resilience** is a short- and long-term goal of effective counseling and psychotherapy. We seek to help clients “bounce back” and recover when they encounter serious life challenges, including the traumatic. We do not want just to resolve issues and concerns: we also want to help our clients handle future difficulties, become more competent, and respect themselves more. When our clients adapt and learn from stressful threat, adversity, tragedy, and trauma, they are building their strengths and resilience.

Helping a client resolve an issue is a good contribution to increasing client resilience. You have helped the client move from stuckness to action, from indecision to decision, or from muddling around to clarity of vision. Pointing out to clients who change that they are demonstrating resilience and ability is even better, as it facilitates longer-term success. Counseling’s ultimate goal is to teach self-care and self-healing—the capacity to use what is learned in counseling to resolve other issues in the future. This is the ultimate demonstration of achieved resiliency.

**Self-actualization** as a goal of counseling and therapy was central to the world of both Carl Rogers and Abraham Maslow. Closely related to cultural intentionality and resilience, self-actualization is defined as

the curative force in psychotherapy—humans’ tendency to actualize themselves, to become their potentialities . . . to express and activate all the capacities of the organism. (Rogers, 1961, pp. 350–351)

intrinsic growth of what is already in the organism, or more accurately of what is the organism itself. . . . self-actualization is growth-motivated rather than deficiency-motivated. (Maslow, Frager, & Fadiman, 1987, p. 66)

Regardless of the situations in which our clients find themselves, we ultimately want them to feel good about themselves, in the hope of good results (resilience). Both Rogers and Maslow had immense faith in the ability of individuals to overcome challenges and take charge of their lives.

Counseling and psychotherapy sessions are indeed for the individual client, but both Rogers and Maslow also gave central importance to **being in relation** to other and to give back to others and your society and world—which includes advocacy. They were fully aware that clients and their cultural backgrounds were unique. Increasingly, professionals are talking of building [resilient self-actualization in relation to others and their cultural/environmental context \(CEC\)](#).

### Reflective Exercise

#### What are the goals of counseling and psychotherapy?

- Self-actualization is a challenging concept. What does it mean to you?
- How do the words [self-care](#), [wellness](#), and [advocacy](#) relate to the actualizing self?
- What experience and supports (family friends, community, and beyond) have led you to become more yourself and more aware of what you really are and want to be?
- How have you bounced back (resilience) from major challenges you have faced? What are you doing for self-advocacy?
- What personal qualities or social supports helped you grow?
- How might the concept of self-actualization speak to issues of social justice and the serious life challenges faced by many of different backgrounds?



Let us now turn to the skills and strategies that are aimed at developing cultural intentionality and humility, resilience, and self-actualization and that, above all, provide the foundation for establishing an effective working relationship with your clients.

## The Microskills Hierarchy: The Listening and Action Skills of the Helping Process

Counseling and psychotherapy require a relationship with the client; we seek to help clients work through issues by drawing out and listening to their stories.

**Microskills** identify the behavioral foundations of intentional counseling and psychotherapy. They are the specific communication skills that provide ways for you to reach many types of clients. They will clarify the “how” of all theories of counseling and therapy. You master these skills one by one and then learn to integrate them into a well-formed session.

Culturally intentional use of microskills enables you to anticipate how clients may respond to your interventions. With practice you will be able to match the microskills to the developmental and idiosyncratic characteristics of each client. We will offer you ways to adapt your communication to work with children and adult clients at every stage of development. And if clients do not respond as you expect, you will be able to shift to skills and strategies that match their needs.

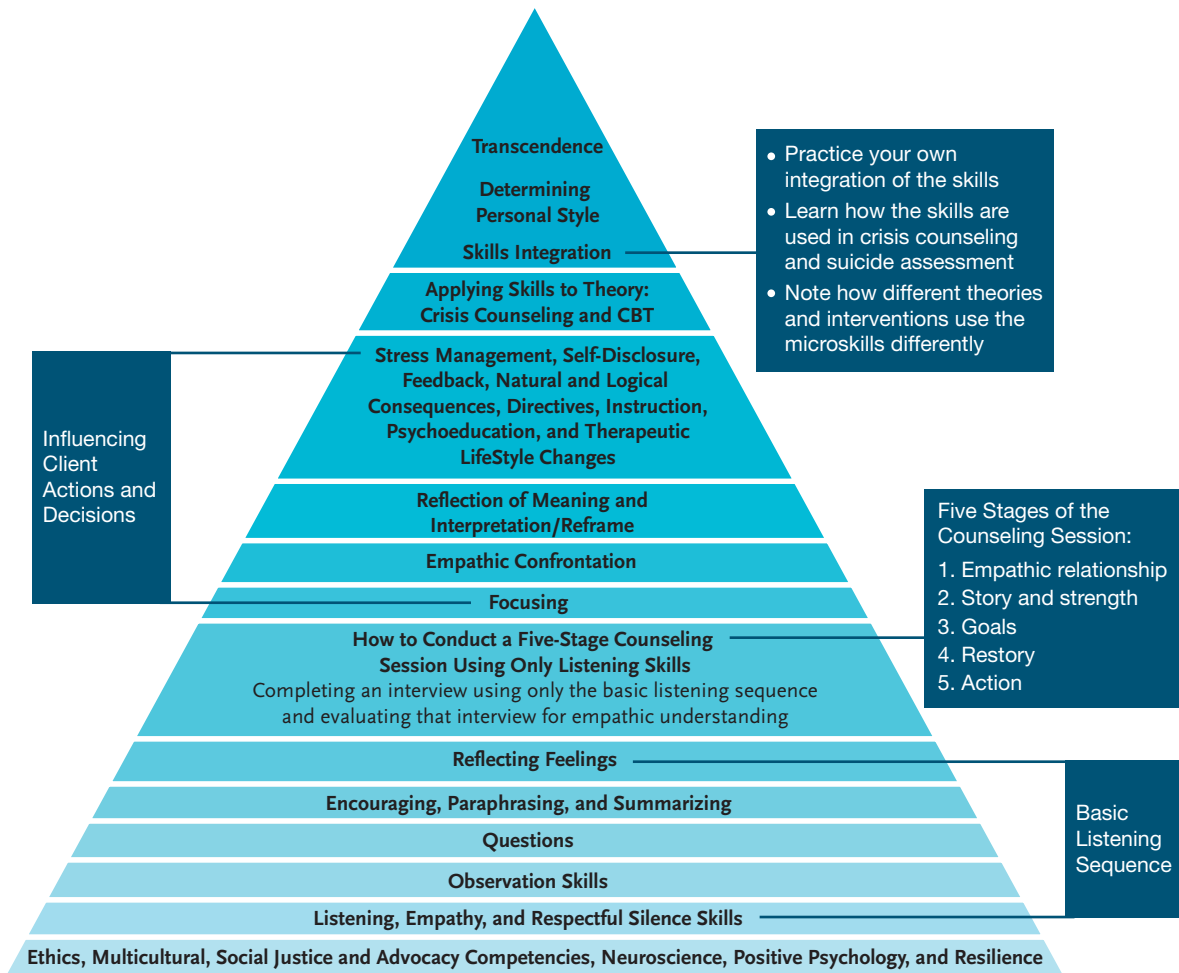
The **Microskills Hierarchy** (see Figure 1.2) summarizes the successive steps of intentional counseling and psychotherapy. The skills rest on a base of ethics, multiculturalism, social justice and advocacy competencies, neuroscience, positive psychology, and resilience (Chapters 1 and 2). On this foundation rests listening and observation skills (Chapters 3 and 4), which are key to successful use of all the other aspects of the helping interview.

You next will move up the microskills pyramid to the empathic basic listening skills of **questioning, observation, encouraging, paraphrasing, summarizing, and reflecting feelings** (Chapters 5–7). Unless you have developed skills of listening and respect, the upper reaches of the pyramid are meaningless and potentially damaging. Develop your own style of being with clients, but always respect the importance of listening to client stories and issues. Understand the client’s story before imposing a specific theory or seeking to resolve issues too quickly.

Once you have basic competence, you will be able to conduct a complete session using only listening skills. The **five-stage** structure provides a framework for integrating the microskills into a complete counseling session. The **empathic relationship–story and strength–goals–restory–action** framework provide an overall system for you to use and serves as a checklist for all your meetings with clients. You will use this framework when you practice completing a full session using only listening skills (Chapter 8).

Next you will encounter the influencing skills to help clients explore personal and interpersonal conflicts. **Focusing** will help you and your clients to see personal, cultural, and contextual issues related to their concerns (Chapter 9). **Empathic confrontation** (Chapter 10) is considered critical for client growth and change. Interpretation/reframing and **reflection of meaning** in Chapter 11 are important influencing skills to help clients think about themselves and their situations in new ways.

**Concrete action strategies** (Chapter 12) include an array of influencing skills that offer tested methods for change and for building resilience. Here you will find first the skills of self-disclosure and feedback, then strategies of **logical consequences**, along with some basics of **decision counseling**. This is followed by specific examples of the best ways to provide information and direction for the client, emphasizing stress management, **psychoeducation**, and how to use **therapeutic lifestyle changes** to provide more self-direction for clients.



**Figure 1.2** The microskills hierarchy: A pyramid for building cultural intentionality.

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By the time you reach Chapter 13, you will be prepared to build competence in multiple theories of counseling and psychotherapy. You will find that microskills can be organized into different patterns utilized by different approaches. Crisis counseling and cognitive behavioral counseling are presented with transcripts of action alternatives.

At the apex of the microskills pyramid are integration of skills, developing your own personal style of counseling and therapy, and transcendence (Chapter 14). Competence in skills, strategies, and the five stages are not sufficient; you will eventually have to determine your own approach to the practice of counseling and psychotherapy. Counselors and psychotherapists are an independent lot; the vast majority of helpers prefer to develop their own style and their own blend of skills and theories.

**Transcendence** speaks about your capacity to go beyond yourself and successfully apply your newly mastered skills to help others. The ultimate test of your capacities is the benefit they can afford to others. Your growth is wonderful; helping others to grow is even better!

As you gain a sense of your own expertise and power, you will learn that each client has a unique response to you and your natural style. Whereas many clients may work well with you, others will require you to adapt intentionally to them and their individual, multicultural styles.

## The Microskills Teaching and Learning Framework

The model for learning microskills facilitates the acquisition of each skill and is complemented with specific feedback forms. It is a good way for you to learn interviewing skills to a full competence level. Also, you will likely teach listening skills yourself to clients, peer counselors, churches, and many other groups.

The model is practice and feedback oriented, and follows this step-by-step progression:

1. **Introduction.** Focus on a single skill or strategy and identify it as a vital part of the helping process.
2. **Awareness, Knowledge, and Skills.** Read about the single skill or strategy and/or hear a lecture on the main points of effective usage from your instructor. Cognitive understanding is vital for skill development. However, understanding is not competence, nor does it show that you can actually engage in an effective interview, counseling, or therapy.
3. **Observation.** View the skill in operation via a transcript and process analysis—or better yet, watch a live demonstration or view a videotaped presentation. When necessary, do a live demonstration.
4. **Multiple Applications.** Review different applications of the skills, variations according to diversity and other cultural dimensions, and additional ways in which the skill or strategy can be used.
5. **Action: Key Points and Practice.** Review the main topics of the chapter, summarized under key points. Use video recording for skill practice (you can use your cell phone, tablet, or laptop recording capabilities). Increase role-play practice's effectiveness with observers and feedback sheets. Seek immediate feedback from your practice session. How did those who watched the session describe your interaction?
6. **Portfolio of Competencies and Personal Reflection.** Here you develop a summary of your interviewing, counseling, and psychotherapy abilities. Questions will ask you to summarize the meaning of the chapter for practice now and in the future.

## Research Evidence You Can Use

### Microskills' Evidence Base

More than 600 microskills research studies have been conducted (Daniels, 2022; Ivey & Daniels, 2016). The model has been tested nationally and internationally in more than 1,000 clinical and teaching programs. Microcounseling was the first systematic video-based counseling model to identify specific observable counseling skills. It was also the first skills training program that emphasized multicultural

issues—and likely practical applications of neuroscience as well. Some of the most valuable research findings include the following:

- **You can expect results from microskills training.** Several critical reviews have found microtraining an effective framework for teaching skills to a wide

variety of people, ranging from beginning interviewers and counselors to experienced professionals who need to relate to clients more effectively. Teaching your clients many of the microskills will facilitate their personal growth and ability to communicate with their families or coworkers. The formal term for including teaching in your interviews is **psychoeducation**. Most chapters of this book will contain discussion of psychoeducational microskills in the activities section.

- **Practice is essential.** Practice the skills to mastery if the skills are to be maintained and used after training. **Use it or lose it!** Complete practice exercises and generalize what you learn to real life. Whenever possible, video record your practice sessions.
  - **Multicultural differences are real.** People from different cultural groups (e.g., ethnicity/race, gender) have different patterns of skill usage. Learn about people different from you and use skills in a culturally appropriate manner.
  - **Different counseling theories have varying patterns of skill usage.** Expect person-centered counselors to focus almost exclusively on listening skills, whereas cognitive behaviorists use more influencing skills. Microskills expertise will help you define your own theory and integrate it with your natural style.
  - **If you use a specific microskill, then you can expect a client to respond in anticipated ways.** You can anticipate how the client will respond to your use of each microskill. Some clients will not respond as expected. Cultural intentionality prepares you for the unexpected and teaches you to flex with another way of responding or use of another microskill.
  - **Neuroscience and brain research now support clinical and research experience with the microskills approach.** Throughout this book, we will provide data from neuroscience and brain research. This research explains and clarifies much of what counseling and psychotherapy have always done and, at the same time, increases the quality and precision of our practice.
- 

We offer this learning framework because you can “go through” the skills quickly and understand them but practicing them to full mastery is what makes for real expertise. We have seen many students “buzz” through the skills, but end with little in the way of actual competence and effective application. Teaching these skills to clients has also proven to be an effective counseling and therapeutic technique (Ivey & Daniels, 2016).

The microskills of this book are key to developing an empathic relationship, drawing out the client’s stories and issues, ensuring that change and growth will be the result of your conversations with your clients, and encouraging clients to develop self-healing—the capacity to apply what they have learned with you to other situations. **Research Evidence You Can Use** summarizes the key findings of the more than 600 data-based studies on the microskills framework.

## Counseling and Psychotherapy Theory and the Microskills

All counseling theories use the microskills, but in varying patterns with differing goals (see Table 1.2). Mastery of the skills will facilitate your ability to work with many theoretical alternatives. The microskills framework can also be considered a theory in itself, in which counselor and client work together to enable the construction of new stories, accompanied by changes in thought and action.

In short, if you become competent in these thoroughly researched skills, tested in multiple clinical and counseling settings around the world, you will have developed a level of proficiency that will take you in many directions—not only in the helping fields but also in business, medicine, governmental work, and many other settings.

**Table 1.2** Microskills Patterns of Differing Approaches to the Interview

Microskill Lead		Decisional counseling	Person-centered	Logotherapy (Viktor Frankl)	Multicultural and feminist therapy	Crisis counseling	Cognitive behavioral therapy	Brief counseling	Motivational interviewing	Psychodynamic	Medical diagnostic interview
Basic Listening Skills	Open question	●	○	●	●	●	●	●	●	●	●
	Closed question	●	○	●	●	●	●	●	●	○	●
	Encourager	●	●	●	●	●	●	●	●	●	●
	Paraphrase	●	●	●	●	●	●	●	●	●	●
	Reflection of feeling	●	●	●	●	●	●	●	●	●	●
	Summarization	●	●	●	●	●	●	●	●	●	●
Influencing Skills	Reflection of meaning	●	●	●	●	○	○	○	●	●	○
	Interpretation/reframe	●	○	●	●	●	○	●	●	●	●
	Logical consequences	●	○	○	●	○	●	○	●	○	●
	Self-disclosure	●	●	●	●	●	○	○	●	○	○
	Feedback	●	●	●	●	○	●	●	●	○	○
	Instruction/psychoeducation	●	○	○	●	●	●	○	●	○	●
	Directive	●	○	●	●	●	●	○	●	○	●
Confrontation (Combined skill)		●	●	●	●	○	●	●	●	●	●
Focus	Client	●	●	●	●	●	●	●	●	●	●
	Main theme/issue	●	○	●	●	●	●	●	●	●	●
	Others	●	○	●	●	●	●	●	●	●	○
	Family	●	○	●	●	●	●	●	●	●	○
	Mutuality	●	●	●	●	○	●	●	●	○	○
	Counselor/therapist	○	●	●	●	○	○	○	○	○	○
	Cultural/environmental/contextual	●	○	●	●	●	●	●	●	○	○
	Issue of Meaning (Topics, key words likely to be attended to and reinforced)	Problem solving	Self-actualization, relationship	Values, meaning vision for life	How CEC impacts client	Immediate action, meeting challenges	Thoughts, behavior	Problem solving	Change	Unconscious motivation	Diagnosis of illness
Counselor Action and Talk Time		Medium	Low	Medium	Medium	High	High	Medium	Medium	Low	High

**Legend**

● Frequent use of skill    ● Common use of skill    ○ Occasional use of skill

# Neuroscience and Neurobiology: Implications of Cutting-Edge Science for the Future of Counseling and Psychotherapy

Psychotherapy is a biological treatment, a brain therapy. It produces detectable physical changes in our brain, much as learning does.

—Eric Kandel, Nobel Prize Winner

Our interaction with clients changes their brain (and ours). In a not-too-distant future, counseling will be regarded as ideal for nurturing nature.

—Óscar Gonçalves

No longer can we separate the body from the mind or the individual from his or her environment and culture. Counseling and psychotherapy are moving closer to medicine, neurology, and cognitive science. Counselors once argued against the “medical model.” Influenced by preventive medicine, accountability, and neuroscience research, however, physicians are increasingly aware that what happens in the body is deeply influenced by the mind. And the counseling and therapy field has led this change in consciousness through effective helping skills and strategies. For example, many medical schools have adopted some version of the listening skills of this book as an essential part of education. Listening develops a relationship that encourages a client or patient to become more resilient and improve both mind and body. Furthermore, neuroscience information has become a constant, so expect your clients to be informed and ask questions about how counseling affects the brain.

Appendix IV contains a comprehensive summary of key information on neuroscience/neurobiology. Please refer to this for more detailed information as you read through the text. You can see Allen and Mary speak with PowerPoints on elementary basics of neuroscience by inserting “allenivey” in the YouTube search field. Allen and Mary were the first to present a keynote on how neuroscience applies to counseling during the annual American Counseling Association meeting in 2013.

## Executive Functions and Emotional Regulation

Executive function is a set of mental skills that include working memory, flexible thinking, and self-control (Zelazo, 2014–2021). We use these skills every day to learn, work, and manage daily life. Trouble with executive function can make it hard to focus, follow directions, and handle emotions, among other things. As a counselor, you seek to facilitate effective decisions and the ability to communicate with others.

## Emotional Regulation and Self-Regulation

It refers to the ability to control troublesome emotions and impulses. But also:

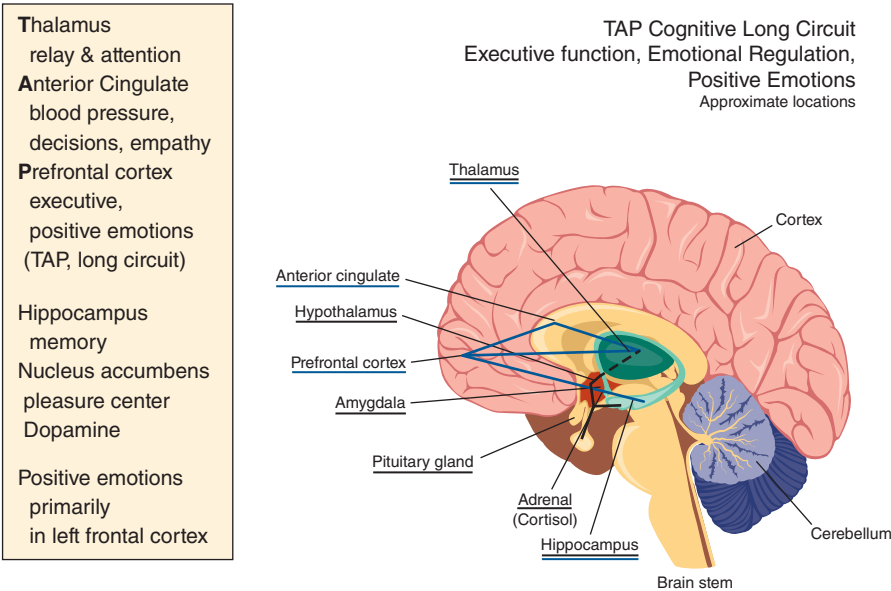
Emotional regulation is actually a simple mental and behavioral process that many of us already do, consciously and unconsciously. For example, many people take walks or listen to music to calm down, or stifle a laugh when something unintentionally funny happens in a serious setting. Emotional regulation can also involve the emotions of other people, such as soothing an over-excited child or softening criticism of someone known to be sensitive (Alvarado Parkway Institute, 2016).

Again, counseling and therapy rewire the brain and through neuroplasticity, new connections are made. Figure 1.3 will be explored in detail in Appendix IV. As we begin, it is sufficient to understand that the prefrontal cortex is key to executive functioning and emotional regulation. The limbic system, deep in the brain, is particularly important in emotional areas and emotional regulation. Here you see the thalamus, anterior cingulate, hypothalamus, amygdala, pituitary, adrenals, and hippocampus.

**Brain Plasticity**

Whether in interviewing, counseling, or psychotherapy, the conversation changes the brain through the development of new neural networks. This is an example of **brain plasticity** and **neurogenesis**. Throughout our lives, we are adding and losing many millions of neurons, synapses, and neural connections. Effective counseling and therapy develop useful new neurons and neural connections in the brain.

Both your own and your client’s brain functioning can be measured through a variety of brain-imaging techniques, most notably functional magnetic resonance imaging (fMRI) (Hölzel et al., 2011; Logothetis, 2008; Welvaert & Rosseel, 2014). Dudek and Dodell-Feder (2021) provide a good example of the integration of neuroscience and counseling. They reviewed studies using functional magnetic resonance imaging (fMRI) to treat depression, ADHD, anxiety, PTSD, substance use disorder, and schizophrenia. These studies used a technique called real-time fMRI neurofeedback (rtfMRI-NF) to help clients see their brainwaves in real time, via a computer screen and made attempts to change the observed brain activity. The analysis



**Figure 1.3** Location of TAP, executive function, emotional regulation, and positive emotions in the brain.



of seventeen studies including 410 participants revealed that when people were shown their own brain patterns, they were able to regulate brain and behavioral outcomes.

“Neuroplasticity can result in the wholesale remodeling of neural networks . . . a brain can rewire itself” (Schwartz & Begley, 2003, p. 16). “But there is also negative plasticity—the loss of neural networks and neurons—associated with stress, whether hunger, poverty, bullying, or many types of trauma” (Mateos-Aparicio & Rodriguez-Moreno, 2019). If we are indeed affecting the brain in all our sessions, then perhaps neuroscience can help us understand a bit more of what is happening between counselors and clients.

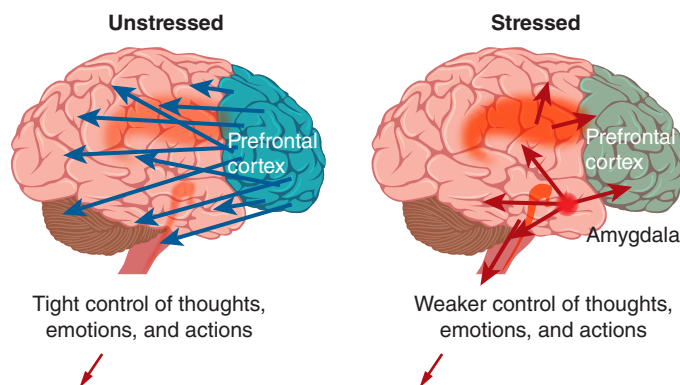
## The Brain and Stress

Some 80% of medical issues involve the brain and stress (Ratey & Manning, 2014). You will find that, in one way or another, the vast majority of your work in counseling and psychotherapy includes stress as an underlying issue. Resolving stressors is critical in many styles of treatment. The evidence is clear that stress management and therapeutic lifestyle changes (see Chapter 2) are effective routes toward both mental and physical health and are necessary regardless of your counseling style or chosen theoretical approach.

Stress and stressful events leave a marked imprint on the brain. We need some stress for learning and for physical growth. Some people have compared the brain to a muscle: If it doesn't get exercise, it atrophies. But, like a muscle, it can be overstressed, which can result in damage and loss of neurons. Figure 1.4 shows the brain under severe stress (aversive condition) compared with the relative absence of stress (neutral condition).

At another level, you will find stress involved in virtually all of the issues clients face. Admission to college, career choice, financial issues, and coping with racial or gender harassment are what many would term **normal** concerns. But these do not feel normal to our stressed and worried clients.

We suggest that you periodically explore Appendix IV on neuroscience/neurobiology as you encounter terms or concepts that you feel need further explanation. Do not worry about always learning the meanings of new words at this time. Gradually, we find that, as a result of neuroscience/neurobiology, our work is more precise and successful. Neuroscience is improving your practice over time and it will become part of your counseling vocabulary.



**Figure 1.4** The brain under aversive stress.

<https://www.sciencenews.org/article/coronavirus-covid19-stress-brain>

### Reflective Exercise

#### How does neuroscience speak to you?

The idea of the brain being central in counseling practice is relatively new. Some of you have taken biology or psychology courses (particularly social psychology) that speak with sophistication about the brain and its structures. For others, this will be a new topic with new vocabulary.

Here are some questions to consider:

- How do you react to the introduction presented above?
- Do you agree that neuroscience and the brain are relevant to your work as a counselor or psychotherapist?
- Will you seek to expand your knowledge of neuroscience?

## Office, Community, Phone, and Internet: Where Do We Meet Clients?

Regardless of physical setting, you as a person can light up the room, street corner, even the Internet. Smiling and a warm, friendly voice make up for many challenging situations. It is the **how** you are, rather than **where** you are.

—Mary Bradford Ivey

First let's recognize that interviewing and counseling occur in many places other than a formal office. Furthermore, with the mobility restrictions and displacements imposed by natural disasters, wars, and pandemics, counseling and psychotherapy moved into a remote delivery mode, via online platforms such as Zoom, Skype, Cisco Webex Meetings, and GoToMeeting (Office for Civil Rights, 2021).

There are street counselors who work with youth organizations, homeless shelters, and the schools, as well as those who work for the courts and who go out into the community and get to know groups of clients. Counseling, interviewing, and therapy can be very informal, taking place in clients' homes, a neighborhood coffee shop or nearby park, or while they play basketball or just hang out on a street corner. The "office" may not exist, or it may be merely a cubicle in a public agency where the counselor can make phone calls, receive mail, and work at a computer, but not necessarily the place where they will meet and talk with clients. The office is really a metaphor for your physical bearing and dress—smiling, culturally appropriate eye contact, a relaxed and friendly nonverbal style.

As a school counselor, Mary Bradford Ivey learned early on that if she wanted to counsel recent immigrant Cambodian families, home visits were essential. She sat on the floor as the family did. She attended cultural events, ate and cooked Cambodian food, and attended weddings. She brought the Cambodian priest into the school to bless the opening ceremonies. She provided translators for the parents so they could communicate with the teachers. She worked with school and community officials to advocate for the special needs of these immigrants. The place of counseling and developing your reputation as a helper varies widely. Maintaining a pleasant office is important, but not enough.

Another approach, also used by Mary, is to consider the clientele likely to come to your setting. Working in a school setting, she sought to display objects and artwork representing various races and ethnicities. The brightness of the artwork worked well with children, and many parents commented

favorably on seeing their cultures represented. But most important, make sure that nothing in your office can be considered objectionable by any of those whom you serve.

## Smart Cellular Phone and Internet-Based Counseling

Telebehavioral health, or distance counseling, is the use of a digital platform that provides secure, encrypted, audio-video conferencing to communicate with a client in real time.

American Counseling Association

Telemental health, telebehavioral health, telepsychology, or distance counseling have become everyday terms for counselors and psychotherapists who migrated from face-to-face services to remote counseling delivery during the pandemic's restrictions (McCord, Bernhard, Walsh, Rosner, & Console, 2020).

Historically, the emphasis has been on keeping the boundaries between counselor and client as clear and separate as possible. Where once the therapist was opaque and psychologically unseen, the profession has realized you as a person are important.

Internet counseling was available before but became widely used when physical isolation was enforced. The centrality of the fifth stage of the interview (action and follow-up) is recognized as increasingly critical to client change. Thus, many counselors are now using smartphones so that clients can follow up with them or ask questions. But nonverbal communication may be missed, and confidentiality may be endangered.

Moreover, many suggest these new systems are not the same as a face-to-face relationship. In spite of raised concerns, studies conducted on telemental health show that counseling and psychotherapy delivered via online services is similar to traditional in-person therapy for treating diverse populations and a variety of client concerns, ranging from daily issues to depression and anxiety. It is now possible even to deliver evidence-based treatments such as cognitive behavioral therapy via virtual platforms (Saenz, Sahu, Tarlow, & Chang, 2020).

**Social justice and telemental health.** Many people in many countries, states, and communities, regardless of income level, have limited access to the Internet, video/audio connectivity, broadband capability, and safe, private settings in which to participate. Many clients and even patients don't have the competencies or the personnel available to use this type of service. These constraints affect clients with severe mental disorders. Taking care of the clients to the best of your abilities within these circumstances and advocating for ways to facilitate access represents a valued advocacy action (Stoll, Sadler, & Trachsel, 2020).

## An Important Videorecorded Exercise

*We believe the following is one of the most central exercises in the book!*

At the beginning of this chapter, you were asked to give your own response to Sienna's multiple issues. Your response reflects you and your worldview. Your use of microskills and the five-stage structure must feel authentic. If you adopt a response simply because it has been recommended, it will likely be ineffective for both you and your client. Not all parts of the microtraining framework are appropriate for everyone. You have a natural style of communicating, and these concepts should supplement your style and who you are. Learn these new skills, strategies, and concepts, but be yourself and make your own authentic decisions for practice.

This exercise will help you develop awareness of your natural style and that of the client with whom you worked. What is this experience like for you? What do you notice about your style of communication? What about the client's style? Use your observations to establish your basic counseling style!

Video makes it possible for you to discover what you are really doing, not just what you think you are doing. Feedback from others helps evaluate both your strengths and the areas where you might benefit from further development and growth.

**Exercise: Your natural counseling style guidelines**

**Step 1: Form a practice group of three or four participants.**

**Step 2: Select a group leader.** This person will help the group follow the steps outlined below.

**Step 3: Assign roles for the first practice session.** Client, counselor, and one or two observers, who will use the Feedback Form. Find someone who is willing to role-play a client. The volunteer client can select almost any topic for the session. A useful topic might be some type of interpersonal conflict, such as concern over family tensions, or a decision about a new job opportunity. Other suggested topics might include the following:

- A friend or family member in conflict
- A positive addiction (such as jogging, health food, biking, team sports)
- Strengths from spirituality or ethnic/racial background

**Step 4: Plan.** The counselor will practice counseling the “client” for at least fifteen minutes, using their own natural style.

**Step 5: Conduct a fifteen-minute practice session using your natural style.**

**Step 6: Review the practice session and provide feedback for six to seven minutes.** When you have finished, ask your client to fill out the Client Feedback Form. In practice sessions, always seek immediate feedback from clients, classmates, and colleagues. We suggest that you use this form for this purpose, with your own adaptations and changes, throughout your practice sessions—and later as a practicing professional. You may also find it helpful to continue using this form, or some adaptation of it, in your work in the helping profession. Professional counselors and therapists seldom offer their clients an opportunity to provide them with feedback, but we know that it is a positive growth practice. We ourselves have learned valuable and surprising things through feedback, particularly when we may have missed something.

Ask client and observers to focus on counselor strengths as well as areas for improvement. Stop the audio or video recording periodically and listen to or view key items several times for increased clarity. Observers should give special attention to careful completion of the Feedback Form throughout the session, and the client can give important feedback via the Client Feedback Form.

**Step 7: Rotate roles.**

Telemental health option:

If you are completing this exercise online, providing telemental health, you can use only two participants. If you are working on FaceTime, Zoom, or another video platform and you have four participants, the same model can be used. Video recording by yourself with a client still can be useful practice. Ideally, review the session with the volunteer client. But if you recorded the session, a supervisor can work with you. And finally, it is good for make videos by yourself and conduct an analysis of how effective you were and how you could improve.

**Guidelines for online practice:** The following will help you prepare for your recording. Use a private and quiet place with a door that can close and wear headphones so no one will overhear your conversation or interrupt. Dress in business casual style with plain colors. Use an appropriate background or use a virtual background when available. Use adequate lighting to be easily seen, sit up straight, make sure eyes are level with the camera, and visually demonstrate attentiveness. Avoid the monitor reflecting in your eyeglasses. Make sure to test your video and audio capabilities before the recording.

Please transcribe the video for later study and analysis. You'll want to compare your first performance with subsequent practice sessions and, ideally, with another, more detailed analytic transcript and self-evaluation at the end of this course of study.

Before you start—follow ethical guidelines as you work with a volunteer client. Ask the client, “May I video record this session?” Also inform the client that the video recorder may be turned off at any time. Common sense demands ethical practice and respect for the volunteer client. Use the Sample Practice Contract presented in this chapter.

You can scan or photocopy the Client Feedback Form included in this chapter. Occasionally, adding specific items for individual clients may enable them to write things that they find difficult to put into words.

## Sample Practice Contract

The following is a sample contract for you to adapt for practice sessions with volunteer clients. When you counsel a minor, the form must be signed by a parent as appropriate under Health Insurance Portability and Accountability Act (HIPAA) standards (see Appendix II).

Dear Friend,

I am a student in interviewing skills at [insert name of class and college/university]. I am required to practice counseling skills with volunteers. I appreciate your willingness to work with me on my class assignments.

You may choose to talk about topics of real concern to you, or you may prefer to role-play an issue that does not necessarily relate to you. Please let me know before we start whether you are talking about yourself or role-playing.

Here are some dimensions of our work together:

**Confidentiality.** As a student, I cannot offer any form of legal confidentiality. However, anything you say to me in the practice session will remain confidential, except for certain exceptions that state law requires me to report. Even as a student, I must report (1) a serious issue of harm to you; (2) indications of child abuse or neglect; (3) other special conditions as required by our state [insert as appropriate].

**Video recording.** I will be recording our sessions for my personal listening and learning. If you become uncomfortable at any time, we can turn off the recorder. The recording(s) may be shared with my supervisor [insert name and phone number of professor or supervisor] and/or students in my class. You'll find that recording does not affect our practice session so long as you and I are comfortable. Without additional permission, recordings and any written transcripts are destroyed at the end of the course.

**Boundaries of competence.** I am an inexperienced interviewer; I cannot do formal counseling. This practice session helps me learn interview skills. I need feedback from you about my performance and what you find helpful. I may give you a form that asks you to evaluate how helpful I was.

\_\_\_\_\_  
Volunteer Client

\_\_\_\_\_  
Interviewer

\_\_\_\_\_  
Date

Client Feedback Form

Date

(Name of Interviewer)

(Name of Person Completing Form)

**Instructions:**    Rate each statement on a 7-point scale, with 1 representing “strongly disagree (SD),” 7 representing “strongly agree (SA),” and 4 as the midpoint “neutral (N).” You and your instructor may wish to change and adapt this form to meet the needs of varying clients, agencies, and situations.

	Strongly Disagree SD			Neutral N	Strongly Agree SA		
1. (Awareness) The session helped you understand the issue, opportunity, or problem more fully.	1	2	3	4	5	6	7
2. (Awareness) The interviewer listened to you. You felt heard.	1	2	3	4	5	6	7
3. (Knowledge) You gained a better understanding of yourself today.	1	2	3	4	5	6	7
4. (Knowledge) You learned about different ways to address your issue, opportunity, or problem.	1	2	3	4	5	6	7
5. (Skills) This interview helped you identify specific strengths and resources you have to help you work through your concerns and issues.	1	2	3	4	5	6	7
6. (Skills) The interview allowed you to identify specific areas in need of further development to cope more effectively with your concerns and issues.	1	2	3	4	5	6	7
7. (Action) You will take action and do something in terms of changing your thinking, feeling, or behavior after this session.	1	2	3	4	5	6	7
8. (Action) You will create a plan of action to facilitate change after this session.	1	2	3	4	5	6	7

What did you find helpful? What did the interviewer do that was right? Be specific—for example, not “You did great,” but rather, “You listened to me carefully when I talked about \_\_\_\_\_.”

What, if anything, did the interviewer miss that you would have liked to explore today or in another session? What might you have liked to have happen that didn’t?

Use this space or the other side for additional comments or suggestions.

## Client Feedback Form

Review your video recording and ask yourself and the volunteer client the following questions. Include your thoughts about these questions in your Portfolio of Competencies.

1. We build on strengths. What did you do right in this session? What did the client notice as helpful?
2. What stands out for you from the Client Feedback Form?
3. What was the essence of the client's story? How did you help the client bring out his or her narrative/issues/concerns?
4. How did you demonstrate intentionality? When something you said did not go as anticipated, what did you do next?
5. How did you experience the session? How authentic and genuine did you feel?
6. Name just one thing on which you would like to improve in the next session you have. What actions will you take?

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## Key Points and Practice

Welcome to the fascinating field of counseling and psychotherapy! You are being introduced to the basics of the individual counseling session, but the same skills are essential in group and family work. These therapeutic skills are essential whether you find yourself in a school or university, in a community mental health clinic or hospital, or in private practice. The microskills framework has been taught throughout the world of business, law, and medicine and used by UNESCO and others with disaster survivors, refugees, COVID-19 patients, health workers, the general public, and AIDS workers. These skills are also essential to interpersonal communication—they can make a difference not only in client lives but also in your own relationships with others.

This first chapter frames the entire book. The following key points will be elaborated with the specifics you need for culturally competent practice. Each of these is foundational to professional practice in multiple settings. The first competency practice exercise in this chapter asked you to examine yourself and identify your strengths as a helper. In the end, **you** are the person who counts, and we hope that you will develop your counseling skills based on your natural expertise and social skills. We hope that you enjoy the journey.

Following is a summary of awareness, knowledge, skills, and actions that you may want to take home:

### Interviewing, Counseling, and Psychotherapy

These are interrelated processes that sometimes overlap. Interviewing may be considered the most basic; it is often associated with information gathering and providing necessary data to help clients resolve issues. Counseling focuses on normal developmental concerns or adjustment issues, whereas psychotherapy emphasizes treatment of more deep-seated issues. But the overlap is considerable, and we will see therapists engaged in counseling and counselors active in psychotherapy. The concept of coaching has not yet received full attention within the counseling field, but its positive orientation and its emphasis on co-discovery of client values and goals is highly consistent with the traditions of counseling.

The field of counseling and therapy is now well supported by empirical research. Therapy works! More recently, neuroscience findings have added to our understanding, solidifying



counseling as a scientific undertaking. Nonetheless, it is you, the counselor or therapist, who effectively integrate the many aspects of research and theory, creatively apply these findings to the client, and seek their feedback to improve effectiveness.

### **Counseling Is Both Science and Art**

The evidence base for our effectiveness in helping others is strong. Nonetheless, it is counselors and psychotherapists who take the science, the evidence base, and the microskills into concrete practice. Placing various oils on a painting is an art form based on specific skills. However, it is the artist who arranges the elements into a creative whole. The challenge for you, as an artist, is to take the scientific side of counseling and psychology and facilitate the growth of your clients.

### **Cultural Intentionality**

The culturally intentional counselor or therapist acts with a sense of capability and flexibly in deciding from among a range of alternative actions. *If a helping lead or skill doesn't work—try another approach!*

### **Resilience and Self-Actualization**

A major objective of counseling and psychotherapy is enabling clients to find their own direction and enhance their potential. Self-actualization requires resilience and the ability to rebound from the inevitable stresses and challenges we all face. Stressors of many types will strengthen us and enable us to be more resilient. For example, the athlete needs to push beyond ordinary bounds to strengthen muscles and flexibility.

### **Microskills and the Microskills Hierarchy**

Microskills are single communication skill units (e.g., questioning or reflection of feelings). They are taught one at a time to ensure mastery of basic counseling and therapy competencies.

The microskills hierarchy organizes microskills into a systematic framework for the eventual integration of skills in a natural fashion. The microskills rest on a foundation of multicultural competence, ethics, positive psychology/resilience, and neuroscience. The attending and listening skills are followed by focusing, confrontation, influencing skills, integration of skills, and your own analysis of your personal style of interviewing, counseling, and psychotherapy.

All counseling theories use the microskills with varying patterns and goals. Mastery of the skills facilitates a capacity to work with many theoretical alternatives.

### **Neuroscience/Neurobiology and Stress**

Newer research in these areas indicates that virtually all of counseling and psychotherapy is valid and on the right track. Particularly important is neuroplasticity, or “rewiring” of the brain. Counseling changes the brain, but it is possible to harm the client with absence of empathy, warmth, and listening skills.

Successful therapy may be expected to help clients develop new neural connections. Neuroscience and neurobiology will lead us to a deeper understanding of the importance of helping clients deal with stress, which can result in negative plasticity. Although stress can be helpful for learning and action, it is a real concern when one is overstressed.

The evidence base of neuroscience/neurobiology provides concrete evidence that racism, sexism, and other oppressions harm the brain and body—over time this may even mean illness and early death. Dangerous cortisol can build up and injure neurons and neural networks. In

addition to “normal” stressors such as divorce, separation, failing an exam, or even choosing a college, stress underlies most diagnostic categories in our field. Thus, stress management becomes a central issue in virtually all counseling and therapy.

## Places Where We Meet Clients

Interviewing and counseling occur in many places other than a formal office. Many services are also offered via the Internet.

## Your Natural Helping Style

Microskills are useful only if they harmonize with your own natural style. Video record a session with a friend or classmate; make and save a transcript. Later, as you learn more about session analysis in your counseling practice, continually examine and study your behavior. You'll want to compare this first interview with your performance in another recording some months from now.

# Portfolio of Competencies and Personal Reflection

## Developing a Portfolio of Competencies: Your Initial Video Recording

We recommend that you develop a Portfolio of Competencies as a journal of your path through this course and your reflections on your place in this field. This portfolio is a way of putting together what you have learned and your counseling practice. Students have used this portfolio as they apply for practicums or internships.

Your first video recorded practice session will provide a critical foundation on which to build. We recommend developing a transcript of that first session. You can later compare your first interview with other practice sessions as you progress. Your self-assessment and personal reflection will help you assess progress chapter by chapter. This transcript can serve as a baseline as you learn and evaluate your skills and actions in counseling and psychotherapy.

## Assessing Your Level of Competence: Awareness, Knowledge, Skills, and Action

We speak in terms of four levels of competence in counseling skills. The first three are awareness and knowledge, basic competence, and intentional competence. **Awareness** refers to self-awareness and your ability to be genuine, whereas **knowledge** refers to your understanding of counseling concepts. **Basic competence** asks you to practice the skills or strategies, showing that you know what they are and how to use them in the session. **Intentional competence** speaks to action and occurs when you can use a skill and anticipate how the client will respond. You can also demonstrate the flexibility to change your skill usage and/or personal style in accordance with the client's immediate and long-term needs.

The fourth level that you may want to achieve is **psychoeducational teaching competence**. Many of the skills and strategies of this book can be taught to clients as part of counseling and therapy. In addition, you may be asked to conduct more formal presentations in which you

teach other counselors, volunteer peer counselors, or others who may benefit from listening skills training, such as businesspeople, clergy, or community service workers.

Please take a moment now to start the process of competency assessment for this chapter using the following checklist. As you review the items below, ask yourself, “Can I do this?” Check those dimensions that you currently feel able to do. Those that remain unchecked can serve as future goals. Do not expect to attain intentional competence on every dimension as you work through this book. You will find, however, that you will improve your competencies with repetition and practice.

**Awareness and Knowledge.** Can you define and discuss the following concepts?

- ☐ Distinctions and similarities among interviewing, counseling, and psychotherapy
- ☐ Balance of science and art that makes sense to you as appropriate for counseling
- ☐ Meaning and importance of cultural intentionality in counseling practice
- ☐ Resilience and self-actualization as potential goals for clients within a balanced framework of allostasis
- ☐ The microskills hierarchy and its relevance to practice
- ☐ The potential value of neuroscience for the practice of counseling and psychotherapy
- ☐ The places where counseling and psychotherapy are practiced

**Basic Competence.** We have asked you to take ideas from the chapter and actually try them out in your own life and/or the real world.

- ☐ Finding a volunteer client, conducting a session, obtaining client feedback, and evaluating your own natural style of helping

Intentional competence and psychoeducational teaching competence will be reviewed in later chapters.

### Personal Reflection on This Introductory Chapter

This chapter has presented the foundations of this book. Take time to write down your reflections about interviewing and counseling. Consider adding your responses to the following questions to your Portfolio of Competencies. These ideas are the building blocks upon which you can begin the process of developing your own style and theory.

What stood out from this chapter? What are your major questions or concerns? What is your view of counseling and psychotherapy at this point?

How have personal relationships strengthened you? What positive assets and resources do you bring to counseling and therapy?

What did you discover in your first videotaped interview? What did you notice about your natural helping style? What did you do right? Where might you seek to improve?

Where do you see yourself in the helping field? What do you envision doing, whether in counseling and therapy or in some other field of endeavor?

How might you use ideas in this chapter to begin the process of establishing your own style and theory?

Keep a journal of your path through this course and your reflections on its meaning to you.

## Chapter 2

# Ethics and Multicultural Competence

## Stress and Trauma, Building Resilience



With permission, and adapted slightly from Martin LaRoche (2020) *Toward a Global and Cultural Psychology*. San Diego: Cognella.

I am (and you also)  
Derived from family  
Embedded in a community  
Not isolated from prevailing values  
Though having unique experiences  
In certain roles and statuses  
Taught, socialized, gendered, and sanctioned  
Yet with freedom to change myself and society.

Ruth Jacobs, 1991

Jacobs, R. (1991). *Be an Outrageous Older Woman*. Manchester, CT, Knowledge, Trends, and Ideas.

## Chapter Goals and Competency Objectives

### Awareness and Knowledge

- Develop an understanding of the basics of ethical counseling and therapy practice.
- Examine your identity as a multicultural being, how dimensions of diversity and privilege may affect the session, and the central importance of multicultural competence.
- Become aware of the Soul Wound, trauma, and inter-generational trauma.
- Understand how neuroscience can guide our practice.

### Skills and Action

- Ability to use the RESPECTFUL model for encountering multicultural difference.
- Ability to counsel beginning clients who experience microaggressions.
- Ability to apply positive psychology and wellness as a basis for fostering and building client resilience.
- Ability to employ therapeutic lifestyle changes (TLC) as positive wellness strategies in the session for physical and mental health.

## Ethics and the Counseling and Psychotherapy Process

Ethics is nothing else than reverence for life.

—Albert Schweitzer

Action indeed is the sole medium of expression for ethics.

—Jane Addams

Albert Schweitzer was awarded the Nobel Peace Prize in 1952. A renowned philosopher and musician, he earned his medical degree and started practice in a hut in Africa. Jane Addams founded Hull House in Chicago in 1889, which resulted in the formation of social work as a profession. She is again gaining attention for her pioneering work with low-income people and community interventions. Both represent the ideals of ethical practice, taking philosophy into concrete action.

Ethics is a system of moral principles that we apply through our commitment to excellence, reverence for others, and willingness to take action to improve life for ourselves and others. Ethical codes are thoughtful professional lists of do's and don'ts for our profession.

Ethical codes can be summarized as follows: “Do no harm to your clients; treat them responsibly with full awareness of the social context of helping.” As interviewers, counselors, and psychotherapists, we are morally responsible for our clients and for society as well. At times these responsibilities conflict, and you may need to seek guidance from documented ethical codes, your supervisor, or other professionals.

Effective practice is not only scientific, it is also ethical. Appendix II lists websites with specific information on ethical standards for professional helping associations. Included are the American Counseling Association (ACA), American Mental Health Counseling Association

(AMHCA), American Psychological Association (APA), National Association of Social Workers (NASW), and American Association of Marriage and Family Therapy (AAMFT).

### Ethics and Morals

Ethics are rules, typically prescribed by social systems and, in counseling, as professional standards. They define how things are to be done.

Morals are individual principles we live by that define our beliefs about right and wrong.

A moral approach to interviewing and counseling allows us to apply ethical principles respectfully to our clients and ourselves.

### Anticipated Client Response

Following professional ethics results in client trust and provides guidance for client advocacy and social justice.

Morals are principles for the individual, family, community, and nation that we can live by and use to define beliefs about right and wrong.

Morals guide our individual and group efforts and actions to follow ethical principles supporting individual choice and social justice.

Furthermore, a moral approach to the session requires you to encourage clients nonjudgmentally to examine their own moral and ethical stances toward their own and societal actions.

## Ethics and Responsibility: A Summary

Acting in a professional and ethical way means that the bulk of ethical responsibility lies with you. A person who comes for help is vulnerable and open to constructive or possible destructive actions by the counselor. The following are basic guidelines for you to consider as you review ethical standards in more detail. See **Appendix II** for more complete details for ethical practice. Particularly vital for counseling and therapy are the following:

1. **Maintain Confidentiality.** Counseling and psychotherapy rest on trust between counselor and client. You as counselor are indeed in a powerful relationship and the more trust you build, the more help you can provide. Always maintain the confidence of your volunteer client. Later, during your practice courses, help the person you are working with become aware of your student status and the boundaries of confidentiality.
2. **Recognize your limitations.** Maintain an egalitarian atmosphere with your volunteer “clients,” classmates, or co-workers. Share with them, before you begin, the constraints of the situation: the task you wish to work through with them. Inform them that they are free to stop the process at any time. Seek supervisors’ assistance when you do not feel prepared to address clients’ issues.
3. **Seek consultation.** As you practice the exercises presented throughout this text, remain in consultation with your professor, workshop leader, or mentor—constantly obtain supervision and consultation in your work. You may also find it helpful to discuss your own growth as a helper with other students, while maintaining clients’ confidentiality.
  1. **Be aware of individual and cultural differences.** This point will be stressed throughout this book. An emphasis on cultural issues can lead at times to stereotyping an individual or group. At the same time, an overemphasis on individualism may miss background multicultural issues; in addition, what is

occurring currently in the client's community, and even national and global issues in society, may underlie current issues in decision making, anxiety, or depression.

2. **Remember both the Golden Rule and the Platinum Rule.** In counseling and psychotherapy:

Treat the client as you would like to be treated.

Treat clients the way they want to be treated.

Put yourself in the place of the client. Every person deserves to be treated with respect, dignity, kindness, and honesty. Current research finds many practitioners adapt their counseling to the preferences and characteristics of the client (Kim et al., 2020).

3. **Give special attention to ethical treatment of children and their rights.** Recognize the importance of early childhood experiences and the presence of a nourishing and protective environment to promote children's development and realization of potential. Children have the right of survival, developing to the fullest, being protected and being heard (Convention on the Rights of the Child, 1989; Zalaquett et al., 2020).

## Multicultural Humility and Social Justice Competencies

Every session has a cultural and societal context that underlies the way clients and counselors think, feel, and behave.

—Carlos Zalaquett

Counseling has now become a global phenomenon. The early history of interviewing, counseling, and psychotherapy is populated primarily by famous White male European and American figures, such as Sigmund Freud, Carl Jung, Carl Rogers, Viktor Frankl, Albert Ellis, and Aaron Beck. While their contributions are legion, the focus of their writing has been primarily on the individual with only minor attention to cultural difference to women, or to BIPOC people (Black, Indigenous, and People of Color).

As a counselor seek to learn the preferred name that the client favors. Moreover, it is important to remember that the word "Indian" is becoming used less frequently. More appropriate language would be naming the specific nation or tribe (e.g., Navaho, Lakota Sioux, Lummi, Swinomish). More general terms speaking to larger groups would be Indigenous, which is more frequently used around the world. Naming specific groups is First Nations (or one of 50 groups such as Haida and Inuit (Canada), Aboriginal (Australia), use capital A or clan). Indigenous seems to become the most used name throughout the world.

The rise of the multicultural movement in the United States can be traced to the Civil Rights Act, followed by the growth of awareness in activists from groups such as African Americans, those who are of mixed race, women, the disabled, war veterans, and individuals who may identify as lesbian, gay, bisexual, transgender, queer, intersex, or asexual (LGBTQIA+). All these in different ways have identified and named oppression as a root cause of human distress. Counseling was slow to respond to these movements, but gradually our field has become a central force in what is termed "psychological liberation" (Comas-Díaz & Torres Rivera, 2020).

Furthermore, national and global events that often reverberate through the community and family have become more polarized and people have become less inclined to dialog. We see the impact of politics enacted in personal decisions and relationships with friends and family. Needless to say, if clients raise these issues in the session, you need to give special attention to ethics and listening.



### Multicultural Competence

Your competence in multiculturalism is based on your level of **awareness**, **knowledge**, **skills**, and **action**. Self and other awareness and knowledge are critical, but one must also have the skills and the ability to act.

### Anticipated Client Response

Anticipate that both you and your clients will appreciate, gain respect, and learn from increasing knowledge in intersecting identities, the nature of privilege, and multicultural competence. You, the interviewer, will have a solid foundation for a lifetime of personal and professional growth. You will be challenged to consider implications of social justice and advocacy for your practice.

Multicultural and social justice competencies seasoned with humility are imperative in the counseling and psychotherapeutic process. Awareness of our clients' backgrounds and social contexts enables us to understand their uniqueness more fully. Approaching clients with humility help us deepen our understanding by directly hearing their stories in a caring and an ever-learning relationship. As you counsel any client, they are giving you the gift of trust. Each person is unique and has something to teach you and enables you to become more competent and experienced. The concept of "cultural humility" will be helpful to remember. It is easy to become too confident and miss the essence of the person. They have honored you by coming to meet you.

You may anticipate the client's response to your exhibiting multicultural competence.

## RESPECTFUL Interviewing and Counseling

All interviewing and counseling are multicultural. The client brings many voices from the past and present to any counseling situation.

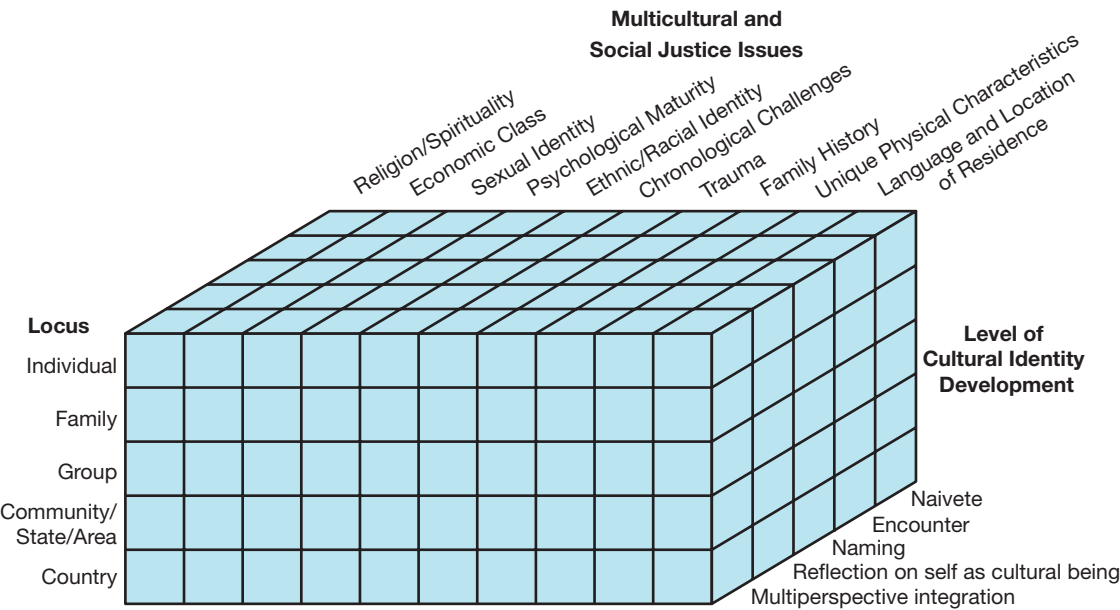
—Paul Pedersen

The **RESPECTFUL model** (D'Andrea & Daniels, 2001, 2015) (see Figure 2.1) listed multiple groups and communities which impact our lives and represent some of the multiple voices that clients bring to us. In addition, it provides a way for you to identify the past and present voices and communities<sup>1</sup> that affect your own thoughts, feelings, and behaviors. This framework is a basic **awareness** and **knowledge** opportunity. Please review the list in Box **The RESPECTFUL Model** and identify your multicultural self and the communities that help define who you are. It is possible that you have not thought of yourself as a multicultural being with any communities. Note which communities you think about most often and least often. Which ones strongly influence how you perceive yourself? Which ones affect how others perceive you? Which ones do you like, or feel you need to hide from others?

As you review your multicultural/communities identity, what stands out for you among these voices? What might be surprising? Then look for strengths in each dimension that support you as an individual. There are certain givens in life, such as being a man or woman of a certain race or ethnicity, that affect how we see ourselves and how others view us. But other dimensions can be as important or more important in our identities. For some of you, the most important dimension may be spiritual or religious values or where you lived when you were growing up; for others, it may be your education or being raised in a lower-income situation.

Developmental issues are important. For example, increasingly we are finding that infants and children may be traumatized by abuse or neglect or that serious bullying can turn a teen

<sup>1</sup> The locus and community names were developed by Michael D'Andrea and Judy Daniels, levels of identity by William Cross.



**Figure 2.1** The RESPECTFUL Cube: Multicultural and Social Justice Issues.

into angry silence. If you happen to be an older person or one who has been affected by physical or mental disability, that could be the most salient factor when you think of yourself.

**Individualism and/or Community**

Individualism and community are often treated as opposites, but in truth they work together easily. Many miss the heart of community and substitute vague terms such as collectivism, which only build heat, anger or frustration

Whether liberal or conservative, we all are members of multiple communities, many of which influenced our life path and may even become our main identity today

Think of your important communities, past and present. How have they affected your identity? The community genogram of Chapter 9 and the family genogram of Appendix III will give you an opportunity to explore your individuality in a community context.

The giants of psychology looked at the person primarily as an individual and for more than 100 years, this has been our focus with little attention to our communities and their meaning to us. This means that future psychologists never really learned the centrality of community and cultural/environmental/contextual influences.

Only now is this awareness developing. Without context you only know part of the person. Here are data for your consideration.

Individualism is defined in the Merriam-Weber dictionary (search “What is individualism?”).

**Doctrine that the interests of the individual are or ought to be ethically paramount. Also:** conduct guided by such a doctrine. (2) The conception that all values, rights, and duties originate in individuals.