



How Counselling Theories View and Work with Common Mental-Health Issues

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Several awarding bodies use the term 'mental health issues' to denote the client's presenting issues. According to Ballantine Dykes et al. (2014, p, 158), depression, anxiety, grief and all common mental health problems affect all levels of society.

Students (and qualified practitioners) must be able to frame mental health issues within their theoretical model.

Psychopathology

Feltham and Dryden (1993, p. 148) define psychopathology as 'the science of mental disorder'. The term 'psychopathology' forms part of the medical model.

Psychoanalysis was originally developed by medical doctors (such as Sigmund Freud). However, these days, CBT is the main modality used in the NHS. CBT manuals and research studies often focus on clients with particular diagnoses, reflecting this modality's base within the medical model.

Feltham and Dryden (1993, p. 148) note meanwhile that 'counsellors are more likely to speak of clients' real problem/s or underlying problem/s than of psychopathology'.

Classification Systems

There are two classification systems internationally for mental-health conditions: the *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5)*, published by the American Psychiatric Association; and *International Classification of*

Diseases, Eleventh Edition (ICD-11), which also includes physical-health conditions and is published by the World Health Organization. Each presents slightly different ways to categorise diseases, but only *DSM-5* includes criteria and definitions to enable suitably qualified clinicians (usually psychiatrists) to diagnose disorders.

Psychopharmacology

Psychopharmacology (i.e. the study of medication to address mental-health conditions) again sits within the psychopathological model, given its shared basis in Western science.

Drummond (2014, p. 232) observes that ‘the majority of patients who are treated by CBT in a psychiatric hospital and a significant minority treated by CBT in general practice will be on at least one psychopharmacological agent’.

Psychoanalytical Theory

This approach to therapy views human functioning as being based upon a mixture of drives and forces within the individual, particularly unconscious processes. The idea draws on the tripartite model of personality: the id, the ego and the super ego. The theory considers how childhood experience shapes our personality and how it may subconsciously cause problems in adults, for example anxiety and depression. It is believed that people develop defence mechanisms to avoid distressing thoughts and feelings.

A psychoanalytical therapist helps the client understand how past events, rooted in the subconscious, affect 'here and now' processes. They also use the therapeutic relationship as a tool in itself, paying particular attention to transference and countertransference, to explore the client's maladaptive coping strategies and relationship patterns.

Cognitive Behavioural Therapy

CBT views mental disorder as resulting from negative core beliefs and assumptions, leading to negative automatic thoughts; these in turn impact on emotions and then behaviours. These elements may become mutually reinforcing, for example social anxiety may lead to avoiding social situations, and this lack of exposure to socialising may then increase fear – and therefore avoidance – of this.

CBT therapists use cognitive interventions to help their clients challenge their thoughts and beliefs to see whether or not they are true. They also look at behavioural changes – using exposure, experimentation and activation to support clients to move away gradually from old ways of behaving.

Person-Centred Theory

This modality is rooted in the philosophy of perception, known as phenomenology, and mainly holds that the values and opinions of others influence how we believe ourselves to be in the world. Thus, a child is influenced by adults in their life (such as parents and teachers), developing conditions of worth that prescribe how the child must behave in order to be loved and valued.

A person-centred therapist believes that by offering empathy, congruence and unconditional positive regard, they can support clients to develop their views of the world free from the judgements of others. Often referred to as a 'growth model', person-centred therapy gives clients a space to consider their values and self-direction, rediscovering their real self from underneath the layers of introjects received from others.

References

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