Chapter Four

How I Developed My Personal Approach to Counseling

Introduction

Let us consider how theory fits with practice, with emphasis on developing a theoretical framework that is personally compatible. Much of my writing has focused on helping students understand the basic concepts of the contemporary theories of counseling so they can apply them to actual practice. I have come to view theory as a road map that provides a context for understanding client behavior, knowing where the therapist and client are going, and making sense of what therapists are doing in their counseling practice. Attempting to practice without having an explicit theoretical rationale is like trying to build a house without a set of blueprints. The foundation of a house needs to be sturdy and strong to support the rooms. Theory is the foundation for your work in the counseling process, providing you with a blueprint that gives direction to what you do and say. If you cannot draw on theory as a framework to support your interventions, you may flounder in your attempts to help people change. Theory is not a rigid set of structures that prescribes what and how you should function professionally but a road map with general directions.

When I began my work as a counselor, I asked myself “What theory best fits who I am?” and “How can I develop my own framework and use it in my work setting?” In this chapter I describe the experiences that led to my understanding and appreciation of the different theories. One of my areas of specialization for about 38 years has been teaching theory and practice of counseling, writing a series of books applying theory to practice, and in recent years making CD-
ROM and DVD programs demonstrating an integrative approach to counseling practice. I will share the highlights of this journey, which led to the evolution of my integrative approach to counseling practice.

My First Opportunity to Teach Theories and Techniques of Counseling

When I began a doctoral program in counseling at the University of Southern California in 1962, I took two courses devoted to “counseling procedures” but no comprehensive course on theories of counseling. I was exposed to only two major approaches to counseling: the directive approach and nondirective counseling. That was the extent of my formal course work dealing with counseling theories and procedures. Clearly, I had to do extensive reading in the various theories of counseling after graduating from a doctoral program.

In my early teaching years at CSUF, I contributed to the development of an undergraduate human services program. The faculty decided this major needed a course in Theories and Techniques of Counseling. A course proposal was written, which successfully went through the curriculum committee. In 1973 when I began to teach this course on a regular basis, there were few textbooks available that described the current theories and their practical uses. Two of these books were *Theories of Counseling and Psychotherapy* (Patterson, 1973) and *Current Psychotherapies* (Corsini, 1973), which was an edited volume in which a key person from each of the theories contributed a chapter in his or her area of expertise. Because I wanted something that expressed my thoughts, I wrote articles on each of the theories I was teaching at that time: psychoanalytic approach, existential-humanistic approach, client-centered approach, Gestalt therapy, transactional analysis, behavior therapy, rational emotive therapy, and reality therapy. These articles contained a summary of the key concepts and some major techniques associated with each of the theories, along with my personal commentary on what I found most
useful about each approach. I don’t think I intended to write a book on counseling theory at that
time, but I wanted students to be able to read my summary and critique of the theories before we
discussed them in class. In preparation for teaching the theories course, I did a great deal of
reading on all the theories and attended many workshops and conferences to get a better grasp of
how these theories could be applied to practice. My study of theories of counseling really began
after I had completed my doctoral program, and this study continues to this day.

Overview of the Theories of Counseling

In addition to my research, I sought out colleagues and mentors who could deepen my
knowledge of the different theoretical orientations. In this section I identify specific aspects of
each theory that I most value and mention some people who were especially influential in the
development of my theoretical orientation. My aim is not to teach you about these theories but to
describe what I have taken from each theory in designing my own counseling perspective along
with noting some significant influences that shaped my therapeutic style. Many standard
textbooks present a detailed discussion of the key concepts and techniques of each of these
theoretical models, among them are *Current Psychotherapies* (Corsini & Wedding, 2008),
*Systems of Psychotherapy: A Transtheoretical Analysis* (Prochaska & Norcross, 2010), and
*Theories of Psychotherapy and Counseling: Concepts and Cases* (Sharf, 2008).

**Psychoanalytic Therapy**

My own childhood experiences have shown me how important it is to understand how
our past influences our present personality. My friend and colleague, Michael Russell, who is
steeped in the psychoanalytic tradition, has taught me how this approach has been transformed
since Freud’s time. Michael has been instrumental in broadening my understanding of the
approach, especially in calling to my attention the newer formulations of relational
psychoanalysis. From this perspective, I especially value the attention given to understanding the role of transference and countertransference in the psychotherapeutic relationship. This model provides a unique way of understanding how resistance is a basic part of therapy and how to deal with resistance therapeutically. I tell my students that they may not use many psychoanalytic techniques in their work as counselors, but they can learn to think in psychoanalytic terms and conceptualize a case from this valuable perspective.

**Adlerian Therapy**

There is much from the Adlerian approach that I greatly value. Perhaps Adler’s central contribution to the field is the influence his thinking has had on the development of many other therapy systems. As I have studied the contemporary theories, many of Adler’s notions have reappeared with different nomenclature. I owe a debt to my friend and colleague, Jim Bitter, who has mentored me in the Adlerian way of thinking about counseling practice and has been instrumental in my understanding of practical ways to apply these concepts to individual, group, and family therapy. The Adlerian approach has given me an appreciation of how thinking influences feeling and actions. I am intrigued by the notion of exploring one’s lifestyle to discover patterns in one’s life.

Years ago when Jim and I were teaching at CSUF, he did a lifestyle assessment with me, with a small group of our students observing the process. Actually going through this process was revealing to me and demonstrated the value of this approach to assessment much more than simply reading about lifestyle assessments. This reinforced my belief in the value of involving students in a personal way in learning about theories of counseling.

Studying the Adlerian approach has convinced me that our past does not determine how we presently behave; rather, it is our striving toward the future that motivates us. We can best be
understood by noting goals that we are pursuing. When I think of my own development from childhood to adulthood, I see how Adlerian ideas of interpreting my early experiences within my family of origin shed light on my present behavior. Adler’s ideas on social interest—going outside ourselves and striving to make society a better place—hold special significance for me. I agree with the Adlerian notion that happiness is not based on individual achievements but is rooted in our connection with others. In many ways, the process of mentoring fits within the concept of social interest.


**Existential Therapy**

My interest in existential psychology, which began in graduate school, has developed into the foundation of my theory. What draws me toward this approach is its emphasis on choice, freedom, responsibility, and self-determination. For much of my early years, I did not trust that I could be the author of my life. Freedom of choice was associated with anxiety, which I wanted to avoid. Instead of looking inward and accepting responsibility for making choices in my life, I looked for external authorities to tell me how to live. My personal journey has shown me how basic the key existential themes are in understanding myself. Existential notions that I find especially valuable, both personally and professionally, include the following: meaning in life is not static, for we re-create ourselves through our projects; anxiety goes along with the freedom to choose our way and needs to be explored, not eliminated; and the reality of death gives significance to life and is the source of finding meaning in life. I appreciate the fact that the existential approach is not based on a set of techniques. As an existential therapist, I can draw on techniques from many therapy systems, as long as I remember that what is primary is
understanding the client’s world. One of the best sources for information on the existential approach is *Existential Psychotherapy* (Yalom, 1980). A concise and readable book on a range of existential topics is *The Gift of Therapy* (Yalom, 2003).

**Person-Centered Therapy**

My respect for Carl Rogers and his contributions to the field of counseling and psychotherapy date back to a course in counseling procedures that was part of my doctoral studies. Through Carl Rogers’s writings I came to appreciate what it means to trust in the client’s capacity to provide the direction of counseling. Listening carefully to the client and following his or her lead is essential. My job is to provide a climate that will allow clients to tell their story.

Rogers taught me that the quality of the therapeutic relationship is at the heart of counseling. The core therapeutic conditions of therapist respect for the client, assuming a nonjudgmental position, being genuine, and showing empathy are basic qualities that must be present in any therapeutic relationship, regardless of the therapist’s theoretical orientation. I have come to realize that the basic attitudes of a person-centered therapist have relevance for creating an effective relationship.

A few years ago I was fortunate in meeting Carl’s daughter, Natalie Rogers, at a humanistic psychology conference. I was giving a keynote address on my perspective on humanistic psychology, and Natalie was in the audience. We talked for a while, and she graciously agreed to review my chapter on person-centered therapy in my theory book. Although she shares the philosophy of the person-centered approach with her father, Natalie believes that clients also can be helped in their personal journey through person-centered expressive arts therapy. She has taught me how the expressive arts can be effectively incorporated into a person-centered approach to group work.
If you want to learn more about the influence of Carl Rogers on the counseling profession, I recommend *The Life and Work of Carl Rogers* (Kirschenbaum, 2009). For more on person-centered expressive arts, see *The Creative Connection: Expressive Arts as Healing* (N. Rogers, 1993).

**Gestalt Therapy**

Both Marianne and I have had the good fortune of participating in workshops led by Drs. Erv Polster and the late Miriam Polster, two key leaders in Gestalt therapy but each having a different therapeutic style. This taught me that there is great variability within a given theory, even among the masters of a theory. At one of the Polsters’ workshops, Marianne said to Erv, “You don’t sound like a Gestalt therapist or Fritz Perls.” He replied: “Thanks for the compliment. Fritz was my mentor, and I had to find my own way. While a theory provides structure, we each have to create our own therapeutic style.” The Polsters influenced Marianne and me in gaining a deeper understanding of ways to create an effective therapist–client relationship. The personal way of being exhibited by both Miriam and Erv demonstrated that effective therapy entails much more than using techniques. The Polsters agreed to do a one-day workshop at which they each demonstrated their own unique style as Gestalt practitioners through live demonstrations. The students were impressed with how they blended their presence and human touch while working with volunteer clients in a highly creative manner. The Polsters taught us how therapists with the same theoretical orientation frequently have diverse styles of applying the theory to working with clients. They reconfirmed my belief that what counts is the counselor’s presence, which is fundamental to establishing contact with a client. Through my study of Gestalt therapy I have come to value the power of being as fully present as possible with a client.
The Gestalt approach is characterized by many key concepts that can be usefully blended into other theoretical orientations. Gestalt therapy techniques encourage clients to bring early memories and feelings pertaining to both past and present events to center stage. I like the way Gestalt therapists speak of experiments rather than prefabricated techniques. Experiments are unique to what is happening in the context of a therapeutic session, and they are tailored to helping a client gain insight, trying on a new behavior to see how it fits, or taking what the client is learning in the therapy office into his or her daily life. In collaboration with the therapist, clients devise experiments that can lead to decisions that change the course of their lives. Gestalt therapy utilizes experiments to move clients from talking about to taking action. There is a creative spirit of suggesting, inventing, and carrying out experiments aimed at increasing awareness. What I especially value with this approach is the emphasis given to the relationship between client and therapist, which is shared with the existential and person-centered approaches.


**Psychodrama**

I was introduced to psychodrama in my mid-30s when I attended a workshop on this therapeutic modality. In the spirit of the psychodrama approach, I learned about this form of therapy through my personal involvement as a participant. Psychodrama and Gestalt therapy share some of the same attributes. Both therapies are action-oriented, focus on the here and now, place value on the therapeutic relationship, encourage clients to enact life situations rather than talk about them, and emphasize experiential learning. A motto in psychodrama is, “Don’t tell me,
show me!” Using psychodrama, the client dramatizes past, present, or anticipated life situations and roles to gain a deeper understanding, explore feelings and achieve emotional release, and develop behavioral skills. Significant events are enacted to help members in a psychodrama group to connect with unrecognized and unexpressed feelings, to provide a channel for the full expression of these feelings and attitudes, and to broaden the roles that they might play in everyday life.

When I was a participant in a psychodrama, I experienced how intense it can be to bring a past problem into the here and now and explore facets of a life situation. For me, there was a big difference between trying to analyze a problem intellectually and actually experiencing the situation. This experiential work tends to result in both emotional and cognitive insight, which can lead to new behaviors. Through my participation in psychodrama groups, attending psychodrama conferences and workshops, and through reading about the approach, I learned many useful techniques that I could apply in groups I was facilitating. I also saw how valuable role-playing techniques can be in my work as a counselor educator. Psychodrama concepts and techniques provide the basis for the integrative approach I use in group work.

I did not meet the founder of psychodrama, J. L. Moreno, but I have been fortunate in attending workshops presented by his wife and colleague, Zerka Toeman Moreno, who has played a key role in the development of psychodrama. She typifies a sense of presence, engagement, and creativity in her work with participants in her psychodramas. Observing her work in action and studying her writings has been influential in teaching me more about psychodrama. For more on Zerka’s contributions, I highly recommend *The Quintessential Zerka: Writings by Zerka Toeman Moreno on Psychodrama, Sociometry and Group Psychotherapy* (Horvatin & Schreiber, 2006).
I have learned a great deal about psychodrama from Adam Blatner, a psychiatrist who has written extensively on the theoretical foundations and methods of psychodrama. In his workshops, Adam has highlighted the value of play, creativity, and spontaneity. Not only did I enjoy his workshop on play, but it showed me how play and humor can be effectively integrated into intense personal work in a group. Adam has worked closely with me for every revision of the psychodrama chapter in *Theory and Practice of Group Counseling* (Corey, 2008) and has generously offered suggestions for updating each edition. If you are interested in an introduction to psychodrama, see *Acting-In: Practical Applications of Psychodramatic Methods* (Blatner, 1996).

Recently, I was invited to give the keynote address at the annual conference for the American Society for Group Psychotherapy and Psychodrama in St. Louis. My talk dealt with ways that I use psychodrama from an integrative perspective and how psychodrama techniques can be incorporated into many other therapeutic systems. During this 3-day conference I attended several experiential workshops and was again impressed with the power of this approach and the willingness of participants to get personally involved. This conference reaffirmed my belief in the value of the philosophy underlying psychodrama and the usefulness of integrating concepts and techniques from this approach into other therapy orientations.

**Cognitive Behavior Therapy**

When I first studied behavior therapy in the 1970s, it was my least favorite approach because it seemed too structured and in some ways mechanistic. However, it is abundantly clear that cognitive behavior therapy (CBT) has broadened considerably since my early encounter with this model. Traditional behavior therapy has been greatly expanded to include what has been called the “third wave” of behavior therapy. My sense is that there are not many traditional
behavior therapists today as behavior therapy has made room for cognition and other nonobservable phenomena. New facets of cognitive behavior therapy have emerged that emphasize considerations that would have been out of bounds at an earlier time. Some of these newer trends are mindfulness, acceptance, the therapeutic relationship, spirituality, values, meditation, and being in the present moment. In addition to reading about these recent developments, I have learned more about them by attending workshops at the Association for Behavioral and Cognitive Therapies conferences and at the Evolution of Psychotherapy conferences. To learn more about the evolution of behavior therapy, I recommend *Contemporary Behavior Therapy* (Spiegler & Guevremont, 2010).

Presently, the cognitive behavioral approaches are most commonly used in working with diverse client populations in clinical settings. Under this general category are specific approaches such as behavior therapy, cognitive therapy, and rational emotive behavior therapy. With respect to cognitive therapy, I have been influenced by both Aaron Beck and Judith Beck. Attending presentations at conferences by Judith and Aaron Beck has taught me a great deal about the contributions of cognitive therapy and has brought their writings to life for me.

Albert Ellis, the founder of rational emotive behavior therapy (REBT), has had a significant influence on my thinking about therapy practice. Indeed, he has been a mentor to me in learning about REBT. In his workshops he seemed to enjoy peppering his speech with four-letter words. He also had a reputation for being rather confrontational, abrasive, flamboyant, and eccentric, but I saw a side of Al that was often not noticed. When our daughter Heidi developed Type-1 diabetes, he wrote her a lengthy letter expressing his regret over hearing this news. He was a diabetic for 30 years, but he reassured Heidi with these words, “By using the philosophy of Rational Emotive Behavior Therapy to the hilt, I do very little whining, keep very busy, and
enjoy life in a highly active manner. Similarly, I am sure you can do the same.” He also admitted, “It is a royal pain in the ass having this condition!”

Marianne and our daughters dropped in to the Ellis Institute to see Al on a trip to New York, but he was off doing a workshop in another country. Marianne wrote him a note and joked that she and our daughters were deeply disappointed that he was not at the Institute, but they would try to get over this rejection! Al wrote to Marianne saying that he was sorry he wasn’t available but asked them to drop by again if they found themselves in the neighborhood. He was attentive and responsive, and I had numerous delightful human exchanges with Al Ellis from the late 1970s until he died in 2007 at the age of 93.

Ellis was devoted to his work and to helping others learn about REBT, and he was not afraid to speak his mind. I invited him to present a daylong workshop at CSUF, and the students loved him and enjoyed his manner of presenting. As busy as he was, Al always made time to read the REBT chapter in each new edition of my theory book, and he was not shy about suggesting changes.

I respected Al’s capacity to live by what he taught. He was certainly committed to the REBT way of life, especially as a way to deal with adversity, including coping with his many health problems well into his 90s. Rational Emotive Behavior Therapy: It Works for Me—It Can Work for You (Ellis, 2004) illustrates how he applied his theory to his own life. Most of what I learned about REBT came directly from contact with Al Ellis and his writings. I appreciated both him and his work and have incorporated many of his ideas into my personal life and my own style of counseling.

Although the cognitive behavioral approaches are quite diverse, they place thinking at the core of emotional and behavioral problems. My study of CBT has convinced me that if we
change the way we think, we can also change our feelings and our behavior. I especially like the emphasis of CBT on a collaborative partnership between therapist and client. For change to come about, clients must assume an active role, both in the therapy office and in outside life. I also appreciate how homework can be designed collaboratively and how clients are expected to practice new skills in their daily life.

For more on these subjects, see *Cognitive Therapy for Challenging Problems* (Beck, 2005) and *Rational Emotive Behavior Therapy: A Therapist’s Guide* (Ellis & MacLaren, 2005).

**Reality Therapy**

I was initially introduced to reality therapy through the writings of its founder, William Glasser, and learned about this approach by attending many of Glasser’s lectures and workshops. We also had a collaborative relationship, and he reviewed chapters I wrote on reality therapy. Like Al Ellis, Glasser was quite able to express his thoughts. I found his books easy to read and was able to glean ideas from each of them that I wanted to apply in my work with clients and students. Glasser did pioneering work in counseling, beginning in the mid-1960s, and he wrote in a way that appealed to counselors working with difficult-to-reach clients. He also influenced elementary and secondary school teachers and devoted considerable time to workshops for teachers and administrators who were interested in alternative forms of teaching and learning. Reality therapy is grounded on an existential philosophy, which I like. I value the basic notion of the need to assume personal responsibility for our feelings that reality therapy stresses. William Glasser accepted an invitation to present a one-day workshop on reality therapy at CSUF, and by doing this he mentored students and faculty on ways to apply reality therapy to many counseling situations.

A colleague and friend, Robert Wubbolding, is Director for the Center for Reality
Therapy in Cincinnati and also Director of Training for the William Glasser Institute. He has done a great deal to advance the development of reality therapy, and he presents workshops in the United States as well as around the world. Bob has had an even greater influence than Glasser did on my understanding of the practice of reality therapy. I have attended a number of Bob’s workshops, and from this I have learned how to apply reality therapy concepts to many different kinds of counseling situations. In fact, Bob and his wife, Sandie, joined Marianne and me for a cruise in Alaska, and we spent countless hours discussing reality therapy on the deck while watching the ocean slide by beneath us. He has been most helpful not only as a teacher but also as a reviewer for everything I have written about reality therapy.

I appreciate the emphasis of reality therapy on focusing on what we are doing. This approach does not ignore the role of feelings or thinking but incorporates these aspects as a way of understanding behavior. Bob Wubbolding has shown me the importance of asking clients what they want, asking if what they are doing has a good chance of meeting their needs, and asking clients to evaluate their current behavior. If clients determine that what they are doing is not working for them, the reality therapist then helps them design an action plan and make a commitment to implementing their plan as a route to change. This emphasis is useful for any therapy, and I see value in using this framework as a basis for practice. I like the focus on what we are doing and our ability to control our actions. For a more detailed presentation of this approach, see *Reality Therapy for the 21st Century* (Wubbolding, 2000).

**Feminist and Systemic Therapies**

I included a discussion of issues pertaining to gender, culture, and family in my early years of teaching, but my main emphasis was on an individual perspective and understanding models that could be applied to counseling individuals. Most of the individual counseling
theories do not place a primary focus on the influence of systemic factors on the individual, and my knowledge of the importance of integrating systemic factors as a vital component of counseling practice was slim. A number of colleagues suggested ways to broaden my understanding, which led me to study feminist therapy, family therapy, multicultural perspectives, and postmodern approaches. Again, by attending conferences and workshops on these topics I gained a clearer understanding of how an individual’s dysfunctional behavior grows out of the interactional units of the family, the community, and society. One of my colleagues from the University of New Orleans, Barbara Herlihy, has been instrumental in helping me gain a better understanding of the principles and applications of feminist therapy. Our collaboration resulted in a coauthored chapter on feminist therapy that is part of my theories of counseling book.

I came to appreciate the commitment of feminist therapists to actively breaking down the hierarchy of power in the therapeutic relationship. Therapists with a feminist orientation understand how important it is to become aware of typical gender-role messages, and they are skilled in helping clients identify and challenge these messages. Both feminist and systemic therapies operate on the premise that an individual’s problems cannot be understood by focusing solely on the individual’s internal dynamics. Individuals are best understood within the context of relationships.

For a comprehensive treatment of feminist therapy, I recommend *Feminist Theories and Feminist Psychotherapies: Origins, Themes, and Diversity* (Enns, 2004) and *Feminist Therapy* (Brown, 2010). For an excellent overview of systemic therapies and the various theories of family therapy, I recommend *Theory and Practice of Family Therapy and*
Postmodern Approaches

I began including a chapter on the postmodern approaches to counseling in my theories book in 2005. Postmodernism is a philosophical movement across a variety of disciplines that critically examines many of the assumptions underlying established truths in society. The heart of the therapeutic process from the postmodern perspective involves identifying how societal standards and expectations are internalized by people in ways that result in narrowing their quality of life. Therapists with a postmodern orientation invite clients to think of themselves as being separate from their problems so that they do not adopt a fixed problem-oriented identity. With the assistance of a therapist, clients come to view their life stories from different perspectives and eventually create alternative life stories. What I particularly like about the postmodern therapies is the notion that clients know more about their lives than the therapist does. The therapist-as-expert is replaced by the client-as-expert. Working together, therapist and client collaborate on ways to open up a range of possibilities for present and future change. One of the best ways to create this collaborative therapeutic partnership is for therapists to show clients how they can use the strengths and resources they already possess to find solutions. This therapy involves a movement from problem-talk to solution-talk. Attention is paid to what is working and clients are encouraged to do more of this. I particularly like the emphasis on viewing people as being competent, resourceful, and oriented toward growth.

Attending workshops helped me understand that the postmodern therapies provided an alternative perspective to the traditional therapy models I had been writing about for years. I was fortunate enough to meet and develop relationships with Gerald Monk and John Winslade, both of whom are steeped in the postmodern tradition. We have had many fruitful discussions about
the field of psychotherapy. I have been mentored through association with many talented people over the course of my career through these relationships. If you want to learn more about the postmodern perspective, I recommend *Narrative Therapy in Practice: The Archaeology of Hope* (Monk, Winslade, Crocket, & Epston, 1997) and *Narrative Counseling in Schools* (Winslade & Monk, 2007).

**Writing a Textbook on the Theory and Practice of Counseling**

Much of my writing has been devoted to helping students understand the basic concepts of the contemporary theories of counseling so they might be able to apply these concepts to actual practice. My emphasis in both writing and teaching is on the practical applications of the various theories. Creating materials for my classes led me toward a more formal writing career, and I learned a great deal from these projects.

Many years ago two executives from Brooks/Cole Publishing Company came to my office for a routine visit and asked if I was doing any writing. I quickly presented them with a copy of the articles I had created as handouts for my students and let them know I was excited about teaching Theories and Techniques of Counseling and would be open to publishing possibilities. We talked about their publication process, and they indicated I would hear from them soon. Almost a year later Claire Verduin, an acquisitions editor, called to apologize for the delayed response, saying she had just discovered my articles on a desk amidst other papers. She expressed interest in a book contract because Brooks/Cole did not have a book on counseling theory and practice at that time. In 1975 I drove to Monterey, California, to meet with Claire Verduin and Terry Hendrix to talk about the process of translating a manuscript into a book. They said that before submitting the final manuscript for the publication process, reviews would be necessary. This included both general reviews of the entire book and expert reviews by a
leading person in each of the theories. Most of the reviews were positive and supportive, but a few reviewers gave some very harsh, critical, and discouraging feedback. Others thought my style of writing was too informal and not empirically sound. These negative reviews were difficult to hear, but I considered their specific criticisms and decided they had made some valid points.

An important lesson here is that critical reviews should not stop us from pursuing projects we believe have merit. It would have been easy to let discouragement get the best of me, but I continued to see the value of persistence, hard work, and self-discipline as a route to reaching my goals. I also learned to persist in the face of self-doubts. The editors I worked with had faith in the overall book and were supportive and helped me apply the comments of reviewers toward making this a better book. From these early experiences in writing, I learned that a textbook involves the collaborative efforts on the part of many. In December 1975 I delivered the final manuscript; *Theory and Practice of Counseling and Psychotherapy* was published in 1977 and is now in its eighth edition (Corey, 2009c).

I have frequently been asked how I decided which theories to add over the various editions. Early on I felt that Adlerian therapy deserved a chapter of its own because Adler’s ideas were visionary and his core concepts are found in many contemporary counseling models. Later I decided to add chapters for various cognitive behavioral approaches, feminist therapy, the postmodern approaches (solution-focused brief therapy and narrative therapy), and family systems therapy. I also gave increased attention to the movement toward psychotherapy integration. Prior to revision for a new edition, my publisher and I conduct a survey of university professors to determine which theories they most want to include in their courses. The results of these surveys guide my choice of theories for the new edition of the book.
Developing the Theory and Practice of Counseling Course

I continued to experiment with various approaches to teaching the Theory and Practice of Counseling. Students were now using my theory textbook, so I did not see it as the best use of class time to lecture on the assigned readings. I did some lecturing on key concepts and practical applications of each theory, but I frequently used live demonstrations to illustrate my way of working with a “client” (a volunteer from the class) using a particular theoretical approach. This seemed to bring to life the readings and the discussions in class. I also made use of the Case of Stan, which has been in all eight editions of *Theory and Practice of Counseling and Psychotherapy*. At times I would have a student “become Stan,” and I would demonstrate how I would counsel him from the perspective of the particular theory we were studying that week. This gave students a glimpse of some ways of applying principles to an actual case. In small groups, students took turns “counseling Stan” for a few minutes, and they had the opportunity to process what it was like to be the counselor and the client.

Students had an opportunity to apply some of the ideas of each theory to themselves in small-group work in class. Rather than just learning about the theory, students spent some time in personal reflection and discussed with one another how each theory could be applied to their own concerns. For example, when learning about Adlerian concepts such as the family constellation, students were asked to share in a small group what they learned from their family of origin and how this might be influencing them today.

Creating a Casebook for Counseling Practice

During the summer of 1980, my family and I went to Germany for 7 weeks, which we did most summers. I love to walk in the forests and on the many walking paths near my wife’s hometown. While on one of these walks, I began to think about writing a book that would apply all the
theories I discussed to a single case. This idea became a reality when *Case Approach to Counseling and Psychotherapy* (first edition) was published in 1982. I thought of common themes in the lives of many clients with whom I had worked and came up with a composite client who would illustrate the kinds of problems a client might bring to psychotherapy. As I was writing in Marianne’s family courtyard, their neighbor, Hans, drove up to his entry gate on a tractor and began calling for his wife, Ruth. His routine was to have Ruth open the large gate so he would not have to get off his tractor to open the gate himself. He called Ruth’s name several times, and each time his voice escalated in volume. I decided then and there to name my fictitious client Ruth.

In this book, I wanted to show how I would work with Ruth from each of the theoretical perspectives that are featured in my theory book. During that summer most of the days were cold and rainy, which helped me stay focused and allowed me to write the first draft in 2 weeks. Marianne was a practicing marriage and family therapist who did a good deal of individual counseling, so I recruited her to read what I wrote each day. Marianne provided insightful comments that I incorporated into the manuscript, and she was especially helpful in providing a focus for the clinical work and for making sure that my work with this client was a realistic portrayal. She has been a vital part of this project from the day I first got the idea for the book to the current edition many years later. In fact, Marianne has always played a significant role in the development of my books by reading drafts and providing ideas and feedback, even for those books we have not coauthored.

The first edition of this casebook had its limitations because I was the only therapist counseling Ruth, but it provided me with another tool for conceptualizing cases in my classes. In subsequent editions I invited experts in each theory to write about how they would work with
Ruth from their theoretical orientation, and the seventh edition of *Case Approach to Counseling and Psychotherapy* (Corey, 2009b) has expanded considerably from the original version. This book retains my approach to counseling Ruth from the vantage point of each theory, but it has benefited from including the therapeutic styles of other contributors as well. In the latest edition, 26 colleagues, all of whom possess expertise in a particular theory, demonstrate techniques they would use when counseling Ruth. For some theories two experts present their style of counseling Ruth. For example, in the chapter on reality therapy William Glasser describes his perspective on Ruth and provides sample therapist–client dialogue to illustrate the key points of therapy sessions, and then Robert Wubbolding writes about his style of counseling Ruth as a reality therapist. I included two therapists to show that there is often great variation in therapeutic styles even among practitioners who share the same theoretical orientation. Collaborating with the 26 theorists and practitioners in my current casebook has been a great way for me to learn more about the nuances of each theory and about a multitude of therapeutic styles. These contributors have been mentors to me in understanding practical applications of therapy.

Reminiscing about the evolution of this particular book reminds me of how a project can develop over the years. The casebook was a simple idea that evolved into a comprehensive treatment of diverse ways of assessing and treating a single client. With all the counseling that Ruth has received from 26 different expert therapists and from me, you would think she would be cured by now! Sadly, she is still working through the life themes that brought her into therapy back in 1982! Years later while chatting with the real Ruth when I was in Germany, I told her how I came about borrowing her name for the main client in my book. She laughed and said she wanted some royalties, so I reached into my pocket and found one Euro and gave it to her for the use of her name, which delighted her.
My First Educational Video on Integrative Counseling

The theory books that I developed all served a purpose, but one component was missing. I began thinking of the value of doing an educational video in which I could actually apply my therapeutic style in counseling Ruth. Robert Haynes, a colleague and friend, was producing educational video programs as a part of his work as director of professional education at a psychiatric hospital. Bob and I talked about the possibility of creating a video program that would involve me demonstrating an integration of various theoretical approaches in working with themes from Ruth’s life. Having determined that this was a worthwhile project, the next step was to find a person to role-play Ruth with me as her therapist. I asked a former graduate assistant, Lynn Henning, if she was interested in assuming the role of “Ruth” for this video program, and she was eager to participate. Although a great deal of preparation took place in advance of the filming, I did not want us to use a rehearsed script. Both Lynn and I tried to make our interactions as real as possible, even though my “client” was role-playing; we relied on improvisation to elaborate on themes we identified. We did have clear objectives and a general plan of what we wanted to demonstrate in each of the 13 counseling sessions, yet we wanted to create the space for spontaneity in these sessions. Some of these sessions included creating a therapeutic relationship, establishing therapy goals, understanding diversity, working with resistance, exploring how the past influences the present, and termination. The emphasis was on illustrating how I counseled Ruth by drawing on cognitive, emotive, and behavioral techniques in an integrative way.

We did the filming over a 4-day period in January 1995 with a full technical crew, a producer and director, and consultants. Everything went relatively smoothly during the counseling sessions and the process commentaries following each session. Toward the end of the
last day I was to introduce the program. My prescribed lines were simple, yet I stumbled over each sentence again and again. The camera crew was growing exhausted, as were the director and producer. Try as I might, I just could not recite memorized sentences in a way that seemed natural. Once the filming was over, the work continued because the producer (Bob Haynes), the director (Tom Walters), Marianne, and I had the tedious job of editing 4 days of filming into a 1-hour educational video on integrative counseling. We eventually converted the program and expanded some commentaries and it became *CD-ROM for Integrative Counseling* (Corey, with Haynes, 2005). Lynn Henning is now a licensed marriage and family therapist in private practice and recently earned a doctorate in psychoanalysis. She is a vibrant and enthusiastic woman with a rich personal and professional life. Although she convincingly played the role of Ruth, she is nothing like this character in her real life.

Doing this program taught me that creating an educational video involves as much work as writing a book. I learned how important preparation is, and I became aware of the importance of being flexible and dealing with the unexpected. Lynn and I worked well together, which calls to mind the importance of a good relationship, whether it is in an actual client–counselor relationship or working together to film the counseling process. This video proved to be helpful for visual learners, and it was the forerunner for four other video programs on different aspects of counseling, three of which Marianne and I did in consultation with Bob Haynes and Tom Walters.

**Making a DVD Program on Counseling Stan**

Having successfully completed the Ruth video applying my integrative perspective, I was motivated to create a video in which I would counsel Stan (the central case in my theory book) demonstrating 11 different theoretical orientations. The Stan program also consisted of 13
separate “counseling sessions,” and in each of these sessions I applied one or two selected
techniques to illustrate a particular theory.

The idea for a video with Stan originated in the spring semester of 2000, when I invited
one of my advanced undergraduate students, Jamie Bludworth, to coteach the Theory and
Practice of Counseling course with me. Both he and I presented brief lectures on each of the
theories, and we both facilitated small discussion groups aimed at helping students to personalize
each theoretical approach. Each week Jamie became the client “Stan,” and I counseled him
utilizing the theory we were studying.

In 2006 I approached my publisher with a proposal for a DVD program with Stan, who
would be role-played by Jamie. The publisher was interested in a different kind of program, one
that would feature various therapists with different clients. Ed Neukrug was interested in this
idea, and *Theories in Action: Counseling DVD* (Neukrug, 2008) was made featuring different
therapists demonstrating counseling with different clients. I recommend Neukrug’s video
program for getting a sense of how various practitioners apply their respective approaches with
diverse clients.

I had written about how therapists with various theoretical orientations might work with
Stan, but I did not yet have a vehicle to show how I would apply each theory to my work with
Stan. I wanted to demonstrate my interpretation of each of the theories in my work with Stan,
and I was convinced this would be an effective way for students to learn practical applications of
these theories. My publisher eventually agreed to the project I was proposing, which resulted in
*Theory in Practice: The Case of Stan—DVD* (Corey, 2009d).

To prepare for the filming, Jamie and I spent a couple of days during the summer of 2006
hiking and talking about the different segments. Together we identified a topic for exploration
for each session and a specific technique to illustrate a given theory in action. For example, for
the Gestalt therapy session we decided Stan would bring in a dream to explore. Although we
identified topics and what we wanted to accomplish for each session, we did not rehearse the
specifics as we had faith that we could both improvise, which provided a more natural quality to
the sessions. We filmed all 13 sessions in one day, which was a real improvement over the 4
days of filming I did with Ruth in 1995.

**Designing Your Integrative Approach to Counseling Practice**

Ultimately, I hope counseling students will learn the fundamentals of the various counseling
models and begin to develop their own integrative approach. Whether you are a student-in-
training or a counseling professional, it is a good practice to familiarize yourself with what the
diverse theoretical orientations have to offer you.

It is important to develop a style of counseling practice that reflects your uniqueness as a
person. Your theory of counseling needs to be congruent with what complements you personally.
Some counselors base their practice on a single theoretical system. Other counselors recognize
the value of integrating various therapeutic approaches or drawing on a diverse range of
techniques. Even if you work within the framework of a single theory, it is unlikely that you will
use the same techniques with all of your clients. We need to be flexible in applying the
techniques that flow from a theory as we work with different clients. For myself, I draw from a
thinking, feeling, and behaving model. Thinking, feeling, and acting are interactive, and a
complete therapeutic approach needs to address all aspects of human functioning. I attend to
what clients most need at a particular moment in a session. I attempt to address what clients are
thinking, how their thinking affects how they feel, and what they are doing. Paying attention to
what clients are experiencing provides clues to which dimension is the most salient to explore.
By accepting that each theory has strengths and weaknesses and is, by definition, different from the others, you may find some basis to begin developing a counseling model that fits for you. As I illustrated in my overview of the various theories, by direct contact with proponents of different theoretical positions and a comprehensive reading program, I eventually discovered aspects of all of the therapeutic systems that I wanted to incorporate in my personal therapeutic perspective.

**Learn About Many Theories of Counseling**

All the theories have unique contributions as well as some limitations. It is useful to study all the major contemporary theories to determine which concepts and techniques you can incorporate into your approach to practice. It is my bias that because there is no “correct” theoretical approach, it is well for you to search for an approach that fits who you are and to think in terms of working toward an integrated approach that addresses thinking, feeling, and behaving. This kind of integration implies that you have a basic knowledge of various theoretical systems and counseling techniques. Developing an integrative perspective requires being thoroughly conversant with a number of theories, being open to the idea that these theories can be unified in some ways, and being willing to test your hypotheses to determine how well they are working. Functioning exclusively within the parameters of one theory may not provide you with the therapeutic flexibility you need to deal creatively with the complexities associated with diverse client populations.

Some research indicates that therapy outcomes are roughly equal regardless of the theoretical orientation of the practitioner. The trend over the past couple of decades has been away from single-theory practice and toward an integration of therapeutic approaches. Psychotherapy integration is best characterized by attempts to look beyond and across the
confines of single-school approaches to see what can be learned from—and how clients can benefit from—other perspectives. The integrative approach is characterized by openness to various ways of integrating diverse theories and techniques.

**Identify and Master a Primary Theory**

For those of you who are beginning your counseling career, I recommend that you learn a theory as thoroughly as you can, and at the same time be open to examining other theories in depth. If you begin by working within the framework of a primary theory that comes closest to your worldview, you will have an anchor point as a foundation for developing a personal therapeutic style. It is possible to select concepts and techniques from many of the contemporary theoretical approaches and strive to see how these concepts and techniques can fit within the general spirit of a given theory.

**Diversity as a Part of Effective Practice**

One of the major challenges you will face as a counseling professional is understanding the complex role cultural diversity and similarity plays in your work. All counseling interventions are multicultural. Clients and counselors bring a great variety of attitudes, values, culturally learned assumptions, biases, beliefs, and behaviors to the therapeutic relationship. From both an ethical and a clinical perspective, it is essential that your practices be accurate, appropriate, and meaningful for the clients with whom you work. This entails rethinking your theories and modifying your techniques to meet clients’ unique needs and not rigidly applying interventions in the same manner to all clients.

**Give Yourself Time**

If you are currently a student-in-training, it is unrealistic to expect that you will already have an integrated and well-defined theoretical model. An integrative perspective is the product
of a great deal of reading, study, experiential personal work, supervision, clinical practice, research, and theorizing. With time and reflective study, you will develop a consistent conceptual framework that you can use as a basis for selecting from the multiple techniques that you will eventually be exposed to. Developing a personalized approach that guides your practice is a lifelong endeavor that is refined with clinical experience, supervision, and continuing study.

Because I am drawn to the value of integrative approaches to counseling practice, I wrote a book that describes the basis of my integrative approach. If you are interested in more on this subject, see *The Art of Integrative Counseling* (Corey, 2009a). For a more comprehensive and in-depth treatment on the topic of integrative approaches, I recommend *Handbook of Psychotherapy Integration* (Norcross & Goldfried, 2005). Another useful resource is *A Casebook of Psychotherapy Integration* (Stricker & Gold, 2006).