

Outline for Case Conceptualization

EPSY 6325 Theories of Counseling

Consuelo Arbona Ph.D.

Case conceptualization refers to the process by which we make sense of a client's presenting concerns in the context of a theoretical framework. In other words, it refers to how we explain or understand the client's symptoms, personality characteristics, cognitions, feelings, and behaviors in the light of a particular theory or integration of theories. Such understanding should lead to the formulation of *counseling goals* and *intervention strategies*.

At this stage we will conceptualize the client's case from one theoretical orientation at a time. The content of the conceptualization of the same case will differ according to the various theories depending on the aspect of human experiencing that each theory emphasizes.

In general, however, the case conceptualization process (as with the counseling process itself) starts with an understanding of the clients' **presenting concerns** from the perspective of the client.

In other words, **Step 1** addresses the question

- What does the client say her or his problems are?

In **Step 2** we provide a framework from which to explain the origins of the stated problems, addressing the questions:

- How is it that this person came to have these particular problems?
- Where are these problems stemming from?
Intra-psychic issues, environment, early relationships, learned behaviors, faulty cognitions
- What are this person's strengths?

And in **Step 3**,

- Goals for counseling are identified, and
- Specific interventions are used to address the problems identified by the counselor and the client.

The various theories will differ in (a) the questions they ask clients as part of the exploration process. (b) the answers they provide to the questions posed in Step 2 and (c) may lead to different types of interventions in Step 3.

Psychodynamic approaches

For example, regarding Step 2, the **psychodynamic approaches** (Freud, Object Relations Theory, and Adler) will not take the presenting concerns at face value, but will assume that these concerns are **symptoms** of deeper seated problems that somehow relate to experiences that happened earlier on in the life of the person (from childhood on) when his/her **sense of self** was formed. In part, the feelings and thoughts associated with these problems and early experiences are likely to be in the **unconscious**.

Therefore, from the perspective of the psychodynamic theories, before moving on to help clients solve their presenting concerns, the counselor needs to obtain **developmental information** to form hypothesis regarding the **origins of the presenting concerns**, since there may lie the real problem that needs to be addressed. This developmental information will also help the counselor form hypothesis regarding the **sense-of-self** the person may have formed in the context of these early experiences.

In addition to capturing (or describing) the client's **sense of self**, from the psychodynamic perspective the counselor will identify the **mechanisms of defense** the person developed early on to deal with anxiety in the context of early **problematic experiences** and examine to what extent the person still uses the same defenses in interpersonal relations and in times of stress.

Most likely the counselor will discover **patterns of behavior** (in relation to others and to the world) that help explain how the client's particular **sense of self and early experiences** lead to their current conflicts.

The counselor may also identify specific **stages of development (a la Erikson)** that were not resolved appropriately. **Object relations theory** will pay special attention to issues of **attachment** and **autonomy** in clients' development of a sense of self and consequent problems.

In carrying out Step 2 from the **Adlerian** perspective, the counselor will explore the contributions of early experiences to current problems by asking clients' about their **life-style** (role they played in family constellation and early recollections) and identifying the content of the **private or faulty logic** they developed in their attempts to **strive for significance** in the context of their **family constellation**.

The counselor also will pay attention to the clients' level of **social interest**, since this is a sign of healthy mental functioning. The Adlerian counselor will identify current problems in terms of clients' **neurotic symptoms** and help clients become aware how they use the symptoms as excuses to engage in specific **life-tasks**. In this process the counselor will help the client move out of their discouragement and **become encouraged to meet the life tasks**.

Humanistic approaches

From a **Rogerian** perspective, in exploring the client's presenting concerns the counselor will assume that internalized **conditions of worth** have lead clients to disconnect from parts of themselves. This disconnects\, in turn, has resulted in feelings of **incongruency** and **anxiety**, has impaired their **internal locus of control** as well as thwarted their **self-actualizing tendency**.

The Rogerian counselor may also examine the discrepancy between the client's **self-concept** and **ideal self-concept**. Since the theory proposes that given the presence of adequate **facilitative conditions** (empathy, positive regard, and congruence) in the counseling relation, clients will be able to reconnect with themselves and find their own way, the theory does not offer much in terms of a framework to explain the particular issues of each client. **This is more a theory of the change process itself than a theory of personality development.**

From the Existential approach one would explore to what extent the clients' difficulties are related to the clients' efforts to avoid facing the **normal anxiety** generated by **specific givens of existence** (Death, meaning, Freedom, Isolation). For example, to what extent the problems are related to the client's refusal to accept responsibility for self or to face aloneness.

These efforts to avoid normal anxiety, labeled, **mechanisms of defense**, lead to **neurotic anxiety** and/or **neurotic guilt** as well as other problems in living.

Behavioral approaches

From the **Behavioral and Cognitive Behavioral** perspective one will be more likely to take the client's presenting concerns at face value; that is, as the problems that need to be solved. These problems will be primarily understood as the product of specific **faulty learning, which** has led to **irrational thoughts or faulty cognitions** (e.g. Beck's maladaptive patterns of thinking - arbitrary inference, selective abstraction, overgeneralization, etc.). The exploration process entails identifying the **antecedent behaviors and cognitions** that trigger the maladaptive thoughts and behaviors.

Once a theoretical framework has been applied to explain the particulars of a client's case, **interventions** are implemented to help the client solve the presenting concerns. In the case of the **dynamic approaches**, this will entail exploring (gaining insight, analysis of the transference) and resolving (e.g. catharsis; changing faulty logic) the early conflicts that trigger the current problems and identifying the defenses the person developed to cope with these early conflicts and still uses today. In the more **behavioral approaches**, interventions help clients un-learn past negative behaviors and cognitions (e.g. desensitization training, self control) and learn new, more adaptive ones (e.g. skills training). **Existential approaches** emphasize awareness of life's realities and finding productive ways to cope with the normal anxiety related to living

Outline for Case Conceptualization Process

- I. Client's Presenting Concerns** (For the case study papers, this information is outlined in the description of the client so you do not need to repeat it on your paper)

Object Relations Theory

- II. Gathering information to generate hypothesis regarding the origins of the clients' current problems.**

1. Explore current and early relationships as they relate to issues of **attachment** and **autonomy**. This includes gaining an understanding of how the client understands the world and his/her relationships with others (that is the clients' mental representations of others and the world based on internalized objects). Understanding the clients' internal frame of reference will help the counselor understand the clients' behaviors.
2. Describe the **ideas and feelings about self** that the client might have developed in the context of these early relations (internalized objects).
3. Discuss how experiences and behaviors developed in early life have shaped the clients' **sense of self** and have contributed to his/her current problems; identify **conflictive patterns** from the past that the client may be repeating in current life; explore to what extent current experiences **trigger in the client emotional reactions** elicited by past experiences (**relieving the trauma**).
4. Discover specific **defense mechanisms** embedded in clients' presenting concerns and other symptoms and explain how each defense relates to the clients' current difficulties and past experiences.

III. Goal Setting and Interventions

In the **dynamic approaches** the information provided in the conceptualization process leads to specific counseling goals such as:

- ❖ Re-experience earlier conflicts, from an emotional and a cognitive perspective
- ❖ Gain insight regarding how past experiences relate to present problems
- ❖ Resolve the early conflicts, with the help of the therapist
- ❖ Reconcile split-off aspects of the self and move to a more integrated sense of self
- ❖ Modify negative aspects of the self
- ❖ Facilitate the development of positive aspects of the self in the context of the therapeutic relation
- ❖ Change aspects of the persons' sense of self (e.g. feeling unlovable)
- ❖ Work through conflicts in relation to attachment and autonomy in intimate relations

Interventions may include:

- ❖ Free association
- ❖ Dream analysis
- ❖ Confrontation
- ❖ Interpretation
- ❖ Gaining insight
- ❖ Analysis of the transference

Adlerian

II. Gathering information to generate hypothesis regarding the origins of the clients' current problems.

1. Identify how presenting concerns relate to client's ability to successfully meet specific **life tasks**.
2. Explore **family constellation** to discover experiences that might have led client to develop his/her specific **faulty logic**. Describe the content of this faulty logic and the sense of self the client developed in the context of these experiences.
3. Establish a connection between the **content** of the client's faulty **logic** and (a) experiences in the family of origin, (b) problems in current life, and (c) the sense-of-self in relation to the world that the client developed.
4. Identify the **underlining purpose** of the client's problematic behaviors and describe how the clients uses the symptoms as an excuse to engage in meeting specific **life tasks**.

III. Goal Setting and Interventions

In the **Adlerian approach** the information provided in the conceptualization process leads to specific counseling goals such as:

- ❖ Identify and modify faulty logic
- ❖ Gain encouragement to face life-tasks,
- ❖ Develop social interest
- ❖ Identify the underlining purposes of symptomatic behaviors
- ❖ Make a commitment to behavior change

Interventions may include:

- ❖ Life-style assessment
- ❖ Paradoxical Intention
- ❖ Spitting in the Soup
- ❖ Catching oneself
- ❖ Acting as if
- ❖ Task setting

Rogerian

II. Gathering information to generate hypothesis regarding the origins of the clients' current problems.

Counselor's goal is to create safe, trusting relationships so that clients will be able to:

- ❖ Explore the parts of themselves that they have denied or distorted.
- ❖ Recognize and give up the **internalized conditions of worth**
- ❖ Develop and **internal locus of evaluation**,
- ❖ Become more **open to experience**,
- ❖ Achieve **self-trust**.

III. Goal Setting and Interventions

Counselor's role is to help clients set their own goals.

The Intervention is for the most part is the relationship in itself, which must include three conditions:

- ❖ Congruence or genuineness
- ❖ Positive regard
- ❖ Accurate empathetic understanding

Specific counselor's behaviors to facilitate the relationship and foster client change include:

- ❖ Reflection of feeling
- ❖ Paraphrasing, rephrasing
- ❖ Questions for clarification

Existential

II. Gathering information to generate hypothesis regarding the origins of the clients' current problems.

1. Identify how presenting concerns (problem behaviors/cognitions) relate to specific **givens of existence**.
2. Discover how the client uses specific **mechanisms of defense** to avoid facing the normal anxiety generated by specific **givens of existence**.
3. Describe how each mechanism of defense (a) help the client **avoid anxiety**, and, (b) prevents the client from taking **responsibility** for self and/or live an **authentic existence**.
4. Describe how these defensive behaviors have led the client to experience **neurotic anxiety** and/or **neurotic guilt** and further problems.

III. Goal Setting and Interventions

In the **existential approach**, goals may involve to:

- ❖ Help clients gain awareness of the choices they are making in their lives
- ❖ Encourage clients to face the givens of existence that they may be avoiding and helping them become aware of the defenses they are using to avoid the normal anxiety generated by the givens of existence.
- ❖ Help clients become aware of the negative effects these defensive behaviors/cognitions have in their lives and to recognize how these defensive behaviors are related to their presenting concerns
- ❖ Help clients find adaptive ways of facing the anxiety generated by specific givens of existence
- ❖ Encourage client to take responsibility for their lives and make active choices regarding the life situations they are facing

Interventions may include:

- ❖ Confrontation
- ❖ Process interpersonal dynamics of the counseling relationship, attending to the emotions generated by the counseling process in the context of the here and now relationship with the counselor.
- ❖ Paradoxical intention
- ❖ Situational reconstruction
- ❖ Compensatory self improvement

Behavioral/Cognitive Behavioral

II. Gathering information to generate hypothesis regarding the origins of the clients' current problems.

1. Relate the presenting concerns to **faulty learning, irrational thoughts, and/or faulty cognitions**.
2. Identify the client's **irrational thoughts** (Ellis) and/or **specific faulty cognitions or maladaptive thought patterns** (Beck) and illustrate how these lead to the problematic behaviors.
3. Describe the **antecedent behaviors and cognitions** that trigger the client's maladaptive behaviors and thoughts (this is called behavioral assessment).

III. Goal Setting and Intervention

Resolving the presenting concerns by:

- ❖ **Learning new behaviors,**
- ❖ **Changing environmental conditions, and**
- ❖ **Replacing irrational thoughts and/or maladaptive cognitive schemas with more rational thoughts.**

Interventions may include:

- ❖ Modeling
- ❖ Behavioral rehearsal
- ❖ Skills development training (e.g. assertiveness, social behavior)
- ❖ Self control or self-monitoring
- ❖ Stimulus control
- ❖ Contingency contracting
- ❖ Systematic desensitization
- ❖ Recognizing and changing irrational thoughts
- ❖ Cognitive restructuring to change maladaptive thought processes
- ❖ Learning a new internal dialogue
- ❖ Relaxation training

Client: Richard

I. Presenting Concerns

Richard, a man in his mid-forties, feels depressed following his recent divorce after few years of marriage. He is particularly distressed about the divorce because this was his first marriage, at age 44. He had thought that in Connie had found the perfect woman. He describes his wedding day as the happiest day in his life. However, soon into the marriage he and Connie experienced what he calls communication problems. About a year ago Connie asked for them to separate and shortly thereafter she served him divorce papers. At times he expresses anger towards Connie for having taken everything away from him. At other times he expresses concern for her and feels that he did not bring anything into the relationship. Richard indicates that before meeting Connie most of his relations with women had been brief and non-committal. He dated some after the divorce, but he has not found the perfect woman (that have both looks and brains) that he is looking for. Richard also reports that throughout his life he has had difficulty relating to others and making friends. His priority in life has been getting ahead economically and only recently he has discovered the importance of relating to others. Lately he is feeling very lonely and depressed. Saturday afternoons when he does not have a date are particularly difficult times for him.

Richard is an only child and both his mother and father were alcoholic. As a young child Richard witnessed his parents' violent fights characterized by shouting and scuffling. He remembers feeling very scared at those times. As a child he did not have any friends; it was just him and his teddy bear. Richard moved around frequently staying with different relatives for brief periods of time. During his childhood he stayed the longest with his grandmother who is currently in the hospital terminally ill. Richard indicates in a very flat tone that he is not upset about his grandmother's impending death because she is very ill and does not have much quality of life.

II. Case Conceptualization

Psychodynamic/Object Relations Theory

Hypothesis based on theory's concepts

It seems that as he was growing up, Richard did not have the opportunity to form **adequate attachment bonds** with his mother or father (he reports both parents as alcoholic). It appears that he also lacked other adult figures in his environment (relatives, siblings) with whom to form significant relations (he reports being very lonely and isolated as a child). Because of this deprivation of a significant nurturing relationship, as a child Richard must have felt great pain; together with the pain he likely experienced great anger both towards himself and towards others. He might have concluded that he was not loved because he is defective and, therefore, not lovable, developing a **negative sense of self**. In order to avoid this pain, it is possible that early on, as a defense mechanism, Richard disconnected himself to a certain extent from his emotional self. This disconnect from his own emotion allowed him to survive emotionally as a child (adaptive quality of the defense). However, being disconnected from his own emotions has made it difficult for Richard to connect with others, feel empathy and develop intimate relationships (a defense that was adaptive in early life, continues to be used in adulthood with negative consequences)

These early experiences may have led Richard to believe that as an adult he is not lovable, he doesn't have much to offer emotionally to others, and that he cannot trust others to meet his needs (he appears to fluctuate between believing that he doesn't deserve other's attention and care and believing that others are mean and will not give of themselves). He seems to feel that he needs to always be on the defensive because this is "a dog eats dog" world. This pattern of relating to others most likely emerged in the context of his early relationship with parents, where his basic emotional needs of nurturing and affection were not met. The anger **he experiences now** may have originated earlier in his life as a way of coping (**defense**) with the intense pain generated by this early emotional deprivation. Deprivation that he carries with him today and perpetuates by his inability to bond with others (**he seems to be repeating in his adult life the patterns of early relations with his parents**). His failures in current relationships make him feel angry all over again.

This **negative view of self** and his **detachment from his own emotions** (in order to avoid the pain - defensive behaviors) makes it difficult for Richard to develop emotionally satisfying intimate relationships. He is probably scared and overwhelmed by the idea of getting too close to another person. Because of his inability and fear to get close to others, Richard has chosen to establish superficial, short relationships with women; he does not allow the other person to really come close to him, nor does he truly give of himself. At some level, it is almost as he feels that he does not have anything to give, except his pain (which he cannot really face) and his anger (which may feel overwhelming). With his behaviors, Richard ends up pushing other people away, which serves to confirm what he already knew – that either he is not good enough or that others are mean to him- which makes him feel angry all over again. In this way, Richard may be responding to others not only according to who and what they are, but also according to his **internalized negative objects** (that is unresponsive and uncaring significant others).

In this way, Richard seems to be wrapped up in himself – which is labeled by the psychodynamic approach as a **narcissistic personality trait**. The lack of adequate emotional support and care as a child did not allow Richard to fully **grow out of the normal narcissistic stage** experienced by infants (as described by **object relations theory**).

In terms of **defense mechanisms**, Richard seems to be experiencing some degree of **splitting** between his **cognitive and emotional self**, which leads to **intellectualization**, and expression of contradictory, rigid ideas. For example, he says that he desperately needs a woman in his life, but describes women as "bitches"; he professes to love his ex-wife Connie and feels sorry for her because she must be suffering, but at the same time he is extremely angry and would like to have the opportunity to yell his anger at her. In some ways Richard's negative perceptions of others result from his **projection** (defense mechanism) of his anger and negative view of himself on others. In the development of his sense of self, Richard internalized **the negative relationships he had early on** with his caretakers, who did not meet his basic needs of nurturance and emotional security (internalization of bad objects). Richard is likely to feel unworthy of others' attention and care, but instead of connecting with these feelings of low self-worth (**splitting**), Richard projects the feelings of negative self-worth onto others and feels very angry because he expects others to reject him.

To **compensate** (defensive behavior) for his **negative perception of himself**, Richard is in search of the "perfect" woman that will lead to the "perfect" relationship. At some level (probably

unconscious) Richard may believe that being with a perfect woman will compensate for his profound sense of inadequacy because being with someone perfect will make him acceptable and good. However, perfect women do not exist. Therefore, the goal of finding perfect women is also a **defensive behavior** that protects Richard from allowing any body coming close to him (true intimacy is hard for him), which perpetuates the cycle of loneliness, pain, and anger. The unavailability of a “good enough” woman gives him an excuse that masks his true feelings and fears.

In addition, Richard’s **difficulties with intimacy** may stem from his great emotional neediness. He may fear that if he allows someone to come close to him, he will feel overwhelmed and lose all control. According to Objects Relation theory, **lack of proper attachment** has likely impaired his ability to form an **autonomous self**, which may be where the fear of intimacy is stemming from. If he allows someone to come close to him, he might feel overly dependent emotionally on the other person and not know how to keep a healthy boundary. This conflict may be inferred from the fact that even though he reports that he and his wife had very poor communication and a relatively hostile relationship, Richard still feels that by leaving she has taken **everything** away from him (mostly, I believe himself...).

Goals for Counseling

From a psychodynamic and object relations perspective, the goal of therapy is to help Richard connect with his emotional self, feel the pain and rage associated with his early negative experiences to achieve emotional catharsis and gain insight regarding how these early experiences are related to the relationship problems he has experienced in his life. It is expected that by forming a close emotional bond with the therapist, Richard may learn how to experience closeness in relationships, while maintaining appropriate boundaries.

Interventions

Establishing the relationship - Given Richard’s lack of significant nurturing relationships in his life, issues of trust were particularly difficult with him. This was addressed, in an empathetic way, early on in the relationship – I told him that I recognized and understood that it would likely be difficult for him to trust me, the therapist, but that as he felt comfortable it was important for him to gain some trust so that the therapy may work. I also encouraged him to communicate to me how he felt regarding being or not being able to trust me, even if it felt uncomfortable for him to talk about trust issues. Initially Richard was very guarded, tended to make jokes or become hostile with me when the counseling came close to painful issues for him. In some of these instances I pointed out his behavior and asked him what he might have been feeling about himself and about me (**immediacy of the relationship**) just before he said the remark. Sometimes, instead of asking, I **reflected to him feelings** of discomfort or anger that I picked up in relation to the issues we were discussing. Sometimes, I shared with him (**immediacy of the relationship**) how his jokes and/or angry remarks made me feel in the relationship with him (e.g. “when you respond in that way – make a joke about something serious we are talking about or respond angrily at me – makes me feel like you are pushing me away.”). And, using **parallel process**, other times I wondered out loud to what extent others in his life may feel like me when he behaves that way.

Analysis of transference - I helped Richard recognize and process when he was pushing me away. In these instances I asked him to stay with and explore the feelings that he was experiencing - which often included fear, anxiety, pain, disbelief that the therapist cares. As he was able to recognize and label these feelings I encouraged him **to make connections with other times in his life when he had felt in similar ways**. As I described above, these intervention entailed confronting Richard with what was happening in the here and now of the counseling relationship.

With some time, Richard **experienced the connection** between his early experiences of abandonment and his current difficulties. He allowed himself **to experience and accept the pain** of his lost childhood, and **the anger** he felt toward his parents for the constant fighting in the house and for not loving and caring for him. During these times I assured Richard that, regardless of the parents' problems, their behavior had been wrong and that as a child he deserved better. This served as a corrective **emotional experience** – he was able to feel that his anger was justified and that another person, the therapist, was able to accept him with his anger whereas in the past he interpreted his feelings of anger as further proof of his badness and feared that if the parents knew of this anger they would further reject him.

Insight - As part of the therapy process Richard came to understand how his early deprivation, which was not his fault, led him to not trust himself or others and feel bad about himself, and how these feelings have made it very difficult for him to enter in close relationships with others.

In summary this process involved both **emotional and intellectual insight**. With the support of the therapist, he allowed himself to get in touch - feel - the pain generated by his early deprivation, which lies beneath the strong anger that he feels today.

During this process my role as a therapist included **providing emotional support**, helping Richard **“hold”** and **“contain”** the strong pain and anger that had been pent up in him for so long, and feel accepted as he was. I often assured him that his feelings were reasonable given the experiences he had had, and communicated to him (verbally and non-verbally) that it was ok to express them and that I was not overwhelmed by his pain, anger, and fear. In some ways, he was able to re-live his painful childhood experiences in the context of a relationship where **he felt accepted**, and **psychologically taken care of**. These experiences constituted a **“corrective emotional” experience**.

With this new insight and corrective emotional experiences, Richard started to be less defensive and more open in relationships with women. He realized that his search for the perfect women was in part an effort to cover his strong sense of inadequacy (**insight**). However, the search for the perfect woman also served to keep others away, and “protected” him from engaging in an authentic intimate relationship with a women (Engaging in an intimate relations with a woman was scary and painful for Richard, because a desire for closeness triggered in him the sense of inadequacy he developed as he experienced the lack of proper nurturance from parents). The insight he gained regarding the motivation for his search for a perfect woman, helped Richard to work towards **accepting himself** as he is **and others** as they are, with good and not so good things.

Adlerian

Hypothesis based on theory's concepts

From an Adlerian perspective, one would say similar things about working with Richard but using slightly different language. In the context of his **family constellation** Richard was not able to achieve a **place of significance** because his parents seemed to be immersed on their own problems and basically neglected him. His inability to find a **place of significance** with his family led to the development of strong **feelings of inadequacy**. In this context he developed a **life-style** characterized by **feelings of unworthiness**, the belief that **nobody will care** for him (**overgeneralization**), and that **he has little to offer to others**. These experiences and feelings have generated significant levels of anger in Richard. He often **finds a place for himself in the world** by asserting his anger (e.g. situations at work with female co-worker). He has also come to believe that in order **to be significant** (to be ok and accepted by others) (**self-ideal**) he must achieve a perfect relationship with a perfect woman, which constitutes a **misperception of life demands**.

These **faulty beliefs** have led him to have difficulties in **meeting the life tasks**. Because of his lack of nurturing relationships in his family constellation, he has developed a very poor sense of himself, he does not accept himself and has difficulty accepting others for what they are. He is having, and has had throughout his life, major difficulties with the **life task** of forming **intimate relationships**. Because of his inability to trust others, and his belief that he does not deserve others to be there for him (**faulty logic**), he does not seem to allow the women he dates (or the woman he married) to come emotionally close to him. At the same time he is not able to give of himself in these relationships. His problems in relating to others and the pent-up anger he feels have also affected his **worker** role. He has had various interpersonal problems at work that have led to him being fired. He also is having difficulty in finding **meaning** in his life. At times he feels suicidal because all his pain and suffering seem worthless. He also lacks **social interest**. Until very recently he felt that this is a “dog eat dog” world and that he needed to be ready to strike first. He feels very **discouraged** to face a new relationship and life in general. His recent divorce have heightened these feelings to the point of making them unbearable.

Goals for Counseling

Goals for counseling include helping Richard (a) identify and change the faulty beliefs (about himself, others in general and woman in particular) that he developed in his family of origin (b) identify and stop his self-defeating behaviors regarding his difficulties in relating to others (his anger), and (c) develop social interest.

Interventions

From an Adlerian approach I helped Richard to identify and change his **faulty beliefs** - that nobody will care about him, that he has nothing to offer to others and there is something totally wrong with him. As part of this process I gently **confronted** him with the **underlining purpose** (or secondary-gain) of his anger. Mostly, his anger prevents others from getting close to him. This is a defensive maneuver, because desire for or the experience of closeness unconsciously triggers in him the early

conflict and its associated pain and feelings of inadequacy (generated by the deprivation and neglect he experienced in his family of origin). Using **immediacy**, I encouraged Richard to explore what he was feeling and what he wanted to accomplish when he got angry at me in the session – e.g. (push me away, change the topic). I helped him see that this anger prevents others from coming close to him, something that he desperately wants but is very afraid of. I brought to his attention the importance of developing **social interest**. I encouraged him to think about a project he could initiate that involved helping others. As therapy progressed, Richard volunteered with a mentoring program in his company, where he served as a mentor to a child who experienced difficulties at home. This helped him feel better about himself and allowed him to start discovering good things about himself that he can give others.

I also encouraged Richard to revise his beliefs about women, which seemed to include very negative thoughts and expectations. He understood how he was **projecting** on all women the anger and distrust he felt towards his mother (in Adlerian language, he was operating from the **faulty logic** that all women are selfish, angry and rejectful and that women are ultimately at fault for the pain he feels). These beliefs and expectations regarding women led him to keep women at an emotional distance, and often times reject them before the women had a chance to reject him. This, of course, prevented him from forming a stable, open relationship with any woman. As we discussed these issues, Richard realized that one way he distanced Connie from him was by being sarcastic when he felt put down or threatened by her, instead of openly expressing his feelings to her. In this way he came to understand, and **accept responsibility** for his role in creating some of the problems in his relationship with Connie.

To help Ricahrd control his anger, and **discover the connections between his anger and his negative feelings about self**, I encouraged him to **catch himself** when he started feeling angry toward another person and stop to explore other feelings he may be experiencing underneath the anger. This was hard for him to do at first, but slowly he started to recognize how feeling rejected or put down by others triggered his anger. Using **immediacy** I challenged him to explore his anger towards me when it happened in counseling. For example, in one occasion when I was confronting him with his role in distancing women from him, he became very sarcastic. I confronted his sarcasm by telling him that I felt he was angry at me, and using **spitting in the soup**, suggested that he was being sarcastic instead of expressing directly the anger that he was feeling toward me. That maybe my remarks made him feel (rejected, inadequate). When he was able to recognize and accept his anger and feelings of rejection, I asked him to **act as if** he could share with me other feelings he was having (e.g. hurt, fear, and sadness). By “acting as if” he can allow himself to enact behaviors that are comfortable to him, but that maybe more adaptive more adaptive in managing his emotions.

Cognitive Behavioral

Hypothesis based on theory's concepts

Richard's feelings of depression and anger are primarily caused by how he interprets the events in his life. He has irrational thoughts such as I must find the perfect women to be happy; Connie took everything from me, if I am alone I feel miserable.

Goals for Counseling

Have Richard (a) identify his irrational thoughts and mistaken assumptions and replace them with more adaptive rational thoughts and (b) identify and rehearse new behaviors that will allow him to relate better to others and overcome his depression. At the behavioral level, start with small, specific changes that he is likely to have success with (e.g. what to do when he feels lonely on Saturday afternoons, how to relate to co-worker)

Counseling Interventions

Use Socratic **dialogue** and **guided discovery** (Beck) to help Richard identify his irrational thoughts and mistaken assumptions such as "others are responsible for me", "I will only be happy in a relationships with women who is prefect", "without a woman in my life I am unhappy and miserable,"" the failure of the marriage with Connie means that I will never be able to form a satisfying relationship with a women." Once identified, I disputed (Ellis) these ideas to help him develop the ability to disprove these irrational thoughts for himself and replace them with rational thoughts (e.g., it is sad and inconvenient that the marriage ended but it is not a catastrophe). Give **Richard** homework such as what to do when he feels lonely and sorry for himself on Saturday afternoons. I used **modeling** to show Richard how he could communicate to others feelings of discontent, anger, fear, or pain as well as positive feelings. Later on I encouraged him to **rehearse those behaviors** by openly expressing his feelings to me. We also **role-played** responses to situations he was facing with co-workers and acquaintances in which he would practice communicating his feelings without becoming angry and sarcastic. In a slowly and painstaking process, Richard became more aware of feelings underlining his anger and became more adept at sharing them with me and with others.

Existential

Hypothesis based on theory's concepts

From the **Existential** perspective, Richard seems to have most difficulty dealing with the **givens of existence** in the areas of **isolation, freedom-responsibility and meaning**. Primarily he is struggling with **inter-personal** and **intra-personal isolation**. Richard is estranged from parts of himself (he is somewhat disconnected from parts of his emotional self as a way to protect himself from his profound pain) and consequently has difficulty engaging emotionally with others to form real and meaningful relationships. Instead, he seems to be using women to help him cope with his existential isolation and lack of meaning in life. Because he is not really in touch with himself, and as a way to avoid the pain of looking inwards, Richard tends to blame others for his problems, and therefore **avoids responsibility** for himself and his actions (**freedom**). His inability to form deep, real relations with others makes him feel empty and his life **lacks meaning**. The failure of his marriage has been a **boundary situation** that has led Richard to look at himself and seek counseling.

Goals for Counseling

Richard needs to (a) connect with his emotional self, (b) confront his existential isolation and learn to accept himself (intra and inter-personal isolation) (b) become aware of how he contributes to his own problems (freedom and responsibility issues)

Interventions

As therapist I provided a **real relationship** to Richard to facilitate his exploration of the difficulties he has experienced in relationships and his pain and anger. I used the intervention of **compensatory self-improvement** to help him cope with the pain of the loss of his marriage and motivate him to use this crisis to improve parts of himself he has control of (e.g. career-wise, personally; something that he seems to be already doing suggested by his willingness to come to therapy). The issues described in the psychoanalytic approach related to helping him become aware of how he behaves toward others in general and women in particular would also be consistent with the Existential goal of helping clients **become aware of the choices they are making in life**.

III. Conclusions

With time, Richard became better at recognizing his anger and confronting the feelings associated with it. His sense of self improved as well as his social interest. He also recognized his role in keeping people away and slowly started to trust him and others more. Richard still had to watch his tendency to have negative feelings toward women and to expect that all women will end up hurting him. He continued to catch himself when these thoughts and feelings emerged and led him to close up and act in ways that distanced others away from him.