

# Effective Counseling Skills

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Daniel Keeran, MSW, has been a professional counselor and therapist for over 30 years. He has provided counseling and training to thousands of professionals and the public through his private practice and leading groups for healing grief in hospital settings. To view the best-selling book "Effective Counseling Skills" found in many academic and public libraries, visit <http://www.amazon.com/Effective-Counseling-Skills-therapeutic-statements/dp/1442177993> This article is a taste of what you will learn in the Professional Counsellor Training Course. To register go to [www.collegemhc.com](http://www.collegemhc.com)

Counseling skills can benefit you in nearly all areas of your life and are easy to acquire. As you read this article you will discover how easy it is for you to learn these skills and how you can apply them in all your relationships.

## What Is Counseling?

Counseling in the broad sense of the term is simply expressing your ideas about how someone can improve their situation. Human beings are always faced with issues that involve a degree of anxiety. An obstacle or challenge is presented by poor choices or circumstances, and a decision must be made about how to approach the issue in order to reduce the tension and restore hope. Everyone becomes a counselor for themselves or for others whenever the challenge is presented or arises.

The goal in learning counseling skills is to present ideas in a way that is intentional and that can be predicted to improve a situation faced by the person.

## What Are Fundamental Counseling Skills?

Some of the simplest and most obvious counseling skills involve ways of listening and speaking that help a person feel supported, understood, validated, and hopeful.

## THE EMPATHIC REFLECTIVE STATEMENT

If the counselor has faced his own pain, then he will be able to be genuine in making what Carl Rogers called the "reflective statement." This is used also to educate the client who is unaware of his emotions, and so it is one of the core counseling skills. People who use the Rogerian model strictly may argue that's all one needs to do in a counseling session. And, in fact, I think you can carry on a counseling session just by using reflective statements and invitations to say more.

This means to simply take what the client has said and reflect it back to him including a feeling word, because sometimes when the client is speaking he doesn't attach feeling words: fear, anger, annoyed, guilt, sadness, emptiness, low self-worth, despair, happy, excited, hopeful, and so on. He doesn't have these words in his vocabulary, and if we offer the words we can help him begin to identify painful feelings. The reflective statement is also the key skill for helping the client gain insight and to feel supported and validated when done with sincere empathy. In addition, being able to hear what he has

just said, helps the client to clarify the problems for himself. Reflection is a way of utilizing the client own strength to heal himself. The counselor in this capacity is acting as the alter-ego, another “client self” helping the client to hear himself.

An example may be a female client who says she had a fight with her husband because he wasn't doing his share of the household responsibilities, that he agreed to do. I may make this kind of statement: “So maybe you feel annoyed with him because he didn't follow through with the tasks that you have agreed on and that's made more work for you. Is that how you feel?”

A reflective statement is a statement, not a question. Rather than say, “I understand” which is a mark of the amateur counselor, the reflective statement demonstrates understanding. Usually I start a reflective statement with, “So maybe you feel...” and then a feeling word. If a person has blocked the feeling or hasn't identified it, I'll reach for a little bit of the feeling. I'll say, “So maybe you feel a little (sad or angry).” If they indicate that they feel a lot, I'll reflect that they feel a lot of it, or “pretty” or “very” something, or maybe “extremely ....”

We need to have a good vocabulary of feeling words so that we can make accurate reflective statements. With the first part of the reflection we supply a feeling word, and then we reflect the meaning. If we have an understanding of what a client has said, we need to reflect both the feeling and the meaning.

## perception check

Then we can check out whether our reflection is accurate or not by saying something like, “Is that what you're feeling?” or, “Do I understand you?” or, “Is that what you're saying?” If the client continues to correct our reflections, then the key is to repeat the client's exact words sincerely so that he feels joined. If then he still corrects our reflection, he is really correcting himself and struggling with his own inner conflict that may be part of a pattern of conflict with others that can be explored.

The client will then respond to the reflection by elaborating more, by correcting the reflection, saying, “No, that's not quite what I said.” Whatever his response is, we can respond by saying, “Can you say a little more about that?” after he has elaborated. We can pretty well carry on an entire session with just reflections and invitations to say more.

## close-ended and open-ended questions

Another benefit of reflective statements is that they allow the client to lead the session, so this approach is called “client-centered.” You are following the client's feelings and thoughts.

In contrast, the questioning approach especially close-ended questions that lead to a one-word reply, tend to direct, lead, and control the session. These are useful in working with a very frightened client or with small children who have limited insight and vocabulary or need structure to stay safe. But the close-ended question approach follows the counselor's agenda. Examples are yes and no questions and questions beginning with ‘who,’ ‘when,’ ‘where,’ ‘do’ or ‘did,’ ‘are,’ ‘can.’ Examples of open-ended questions begin with ‘what’ or ‘how.’ These questions allow the client to elaborate at length and to lead the session. If the counselor leads the session, the client will feel controlled and unsupported and will

not be able to develop a sense of his own power, responsibility, and self-reliance. Avoid 'why' questions because they tend to put the client in a defensive opposing position to the counselor. Instead of "why?" say "what happened?" or "what was that about?"

Keep in mind that one of the fundamental goals in counseling is to help the client put his life experiences and feelings into spoken words, to get it from the inside to the outside of himself. Some of you reported that when you did the assessment, that's exactly how you benefited, just by having that full hour to talk about nothing but your own life experiences.

Once we've reflected the client's feelings, we need to draw him out. We're doing that by using the feeling list and by inviting the client to say more about the identified feeling; "Say more about the sadness," or, "Say more about the anger." That's what we mean by drawing it out, focusing on the feeling, having him talk about the feeling, "What's that feeling about? What's the sadness about?"

Support the client's feelings by saying, "Let yourself feel that right now." Staying with that feeling, "Take some time to let yourself feel that." I used to say, "Just go with that feeling," but now I say, "Stay with that feeling." I don't want them to go, I want them to stay. The process of integration refers in counseling refers partly to exploring, acknowledging, and validating each emotion the client may be experiencing around very painful events and also successes and celebrations.

## BUILDING SAFETY

Be aware of helping the client feel safe in counseling. We discussed that already in terms of counselor qualities, but we can reinforce safety with a client by saying things like, "What's it like talking about this so far?" If a client is very resistant, not willing to talk, what he's telling us nine times out of ten is that he doesn't feel safe enough to talk about whatever he needs to talk about. And so I'll say to him, "I wonder if you feel safe enough in this setting to talk about the things that you need to talk about?"

I've also experienced people who've said they didn't think of anything worth talking about. They didn't think anyone wanted to listen because they've had a history of nobody listening. You can make a reflection of that. You could say, "So maybe you're saying that what you have to say is not worth talking about, or you feel other people don't care about what you have to say?" I'd want to hear more about that. I'd say, "Say more about that. Where is that coming from? What's that about?" So I reflect that back to them and keep the process going: "Talk more about that."

If you have a client who is aware of counseling skills you may engage her in lighter conversation, something that's easier to talk about, something safer. That may be feeding into the defense, though. It's saving her from the difficulty. So what I may be willing to say is, "Maybe you're feeling a little uncomfortable about talking about this right now? Is that accurate?"

See if she acknowledges that. Then say, "Say a little about what is scary about this. What's the discomfort about?" The key to helping a person feel safe when she works through her un-safety is to have a talk about the fear and the un-safety. Then I can say, "I wonder what you may be feeling beside the fear. What's under the fear?"

And I may make a validating statement, such as, "It makes a lot of sense that you may feel a little afraid of talking about this. You've had a difficult time and so it's understandable that you may not want to say a lot. It may be a little scary. If you can say a little about what that scary feeling is about...." If she can begin to talk about that scary feeling or that fear, then I could support that and reflect that.

Then I could say, "I wonder what you may be feeling beside the fear. Would it be sadness or anger or..." As soon I've got her past fear to identify another feeling, she's gone past the safety issue. She's now feeling safe again. Working through the fear is the key to the safety issue.

So you don't want too many options. You don't want to provide the client ways out. I don't want to allow her an escape from facing what's most difficult, but I don't want to put her in a position of facing too much too soon. So, if I get a sense she's too frightened, I'll slow her down but still invite her to keep going in a forward movement, toward the pain. The client needs to hear, "Whatever is most difficult to talk about is the key to your progress."

## CORE SKILLS TO PRACTICE

Now I want to discuss some core skills and interventions that I want you to use in your practice sessions. There are several basic skills and interventions that can be used to facilitate the healing process, and these are important to master as fundamental to professional counseling.

## VALIDATING INTERVENTIONS

An example of a validating intervention would be, "Is it okay to feel that?" In other words my first approach to validation is to elicit it from the client himself, or herself: "Is it okay to feel that sadness?" or "Is it okay to feel that anger?" If he says no, I'll say, "What gets in the way of your feeling okay with that? What's that about, not feeling okay?" And he'll talk about it.

And then I will make a validation even when he doesn't validate himself. I'll say, "It seems to me you have every right to feel that." There's a validation statement. "What you're feeling, or what you did makes sense. It fits with what you've been through. It seems to me you are entitled to that." You may also say, "It takes courage to take that step, to feel that, to face that pain." That's a validation as well.

"It's okay to cry, just let it out." There's a validation combined with engaging a feeling. "Just let it out," is engaging. "It's okay to feel, to cry," is a validation.

## INSIGHT INTERVENTIONS

An example of an Insight Intervention is, "What is it about that situation that pushed your buttons? And what other person or situation in your life had similar characteristics?" The phrase "pushed your buttons" implies the exaggerated response or reaction, or the hypersensitive reaction. Or I may say to a person, "As you're talking, it's striking to me that this isn't the first time this has happened to you. You're telling me that in this situation, you are a helpless victim. That's not the first time you were a helpless victim. Can you think of another time when you were a helpless victim?"

In other words I'll suggest to him that there was another time that he was a helpless victim but I won't tell him when it was. And then I'll leave it up to him to come up with another time as a way of gaining insight into previous experience that was similar, so he can begin looking at the patterns in his behaviour.

When you're giving suggestions like, "Can you tell me another time in your life that you were a victim?" does it matter whether it's actually accurate that he was a victim or is it just his perception that matters? His perception is what's most important to work with.

A client I was working with was talking about feeling controlled, that she had no power in her life, that things just kept happening to her since she'd been assaulted about three years ago. She was afraid to go places. She turned down going to a concert because she was afraid the person who assaulted her may be there, even though the chances were almost nil. And she talked about being afraid that the person who assaulted her was coming around her home, had been tinkering with her car, leaving the gas cap off or leaving the oil cap off and the door open, and so on. She was getting quite paranoid.

She came across generally as a helpless victim. As we talked about that, having done the assessment, I was aware of other situations in her life when she had been a helpless victim. I said, "You know, it seems to me this isn't the first time you've felt like a helpless victim." Another way I may put it to a client is, "Is this the first time you have felt like a victim of other people, that you were treated unfairly?"

She thought of another situation and talked about that for a while. Then I said, "Can you identify another situation? And another?" And she accumulated eight or ten different situations.

There was a cluster of experiences in her current life, and she was able to identify other experiences going back even to childhood, from the time her mother kept two younger children and gave her up to be taken care of by her grandparents. So she felt like her mother's victim. It's been a life pattern. That's a way, in working with a person, that we may help her to look at patterns and to gain insight. Then look at changes she can make to regain a sense of control.

## CHANGE INTERVENTIONS

One of my favorite change interventions is the paradoxical intention saying, "It's understandable that you wouldn't be ready to change yet," when a person is very stuck. We've already looked at that. But essentially when we're looking at change, we're helping a person look at choices. And then we're going to help her take the risk to implement a choice or combination of choices.

Part of that movement toward change may look like the following. You'll be saying to a person, "Is what you did in that situation working well for you?"

So I may say to a person, "What did you feel in that situation when your husband called you a name?" She responds, and we'll sort it out, maybe by using a feeling list. She says, "I felt resentment."

"What did you do with that resentment? Where did the resentment go?" She says, "I guess I kept it inside." So I say, "I wonder if that's a pattern of how you cope with your feelings of anger and resentment? Is that what you do generally?" She says, "Yes it is." She generally doesn't speak about it or

address it to anyone. So I say, "What happens when you do that? Does that work well for you?" And she identifies that it doesn't work very well.

My next question is, "What gets in the way of you letting your husband know that you feel resentment? This is a key step because what she's going to say is, "I'm afraid if I do, something is going to happen." Fear gets in the way. She is afraid she may lose him or he may react to her in some way, but she doesn't know how because she's never really done it.

It may go back to relationships in the family of origin where she learned to internalize feelings. So I'll say, "For you to express your resentment may mean taking a risk."

## Here are some additional therapeutic statements:

Validation intervention: "What you did as a child made sense because it helped you survive."

Insight intervention: "If you can imagine an ideal caring parent, what do you wish he or she had done or said to you or for you?"

Client response: "I wish they had spoken up for me and supported me." If the client cannot come up with this, suggest that maybe it is something he wished.

Change intervention: "So today, whenever no one speaks up for you or supports you, who does that leave?"

Client response: "Just me."

Change intervention: "So you need to do for yourself today what you needed as a child but could not do. Otherwise you end up doing to yourself what was done to you."

I may then have her rehearse using an empty chair, or with me acting as her husband. Now she may come up with the real issue that she has with me; not as the pretend husband, but as the counselor.

If that happens I'll say, "I think it will be important to identify a concern you have with me. See if you can take the risk to face me with it. It will be important to your therapy, and I'm not fragile." I'll give her that reassurance.

And I may even give her the three-part assertiveness statement that we'll go over later on. She'll try it on, fill in the blanks and address an issue to me, and then I'll congratulate her when she does that.

The next step will be to encourage her to do an assignment: take the risk to address an issue with somebody outside the office. In preparation, I will ask her write a list of fifteen names of people in her life, then to check off three names that she has minor issues with. Then she is asked to approach one of them and let him know she is doing this as an assignment to practice assertiveness. When she returns reporting she was able to do that, I'll congratulate her. If not, we will explore what got in the way.

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