

Jude T. Austin II
Julius A. Austin

Doing Counseling

Developing Your
Clinical Skills and Style




American
Counseling
Association

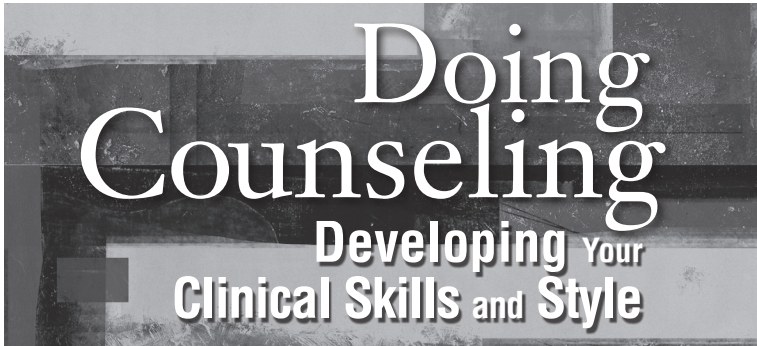
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 American Counseling Association
2461 Eisenhower Avenue, Suite 300
Alexandria, VA 22314
www.counseling.org



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Dedication

*To our trainers—Dr. Ty Leonard, who taught us levity;
Dr. Wen-Mei Chou, who taught us to see resilience in clients;
Dr. Ray Eary, who taught us to pay attention to old-time feelings;
Dr. Bill Benner, who taught us self-sufficiency;
Dr. Dave Howard, who taught us to see relationally;
Dr. Christina Ballard, who taught us to fight for ourselves;
Dr. Raylene Stats, who taught us grit; and
Dr. Gerald Corey and Marianne Schneider Corey, who
taught us how to use our voice—
and to our parents, who taught us style.*

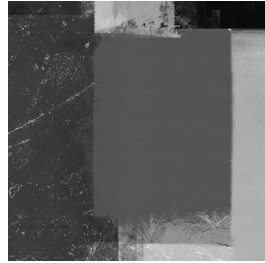
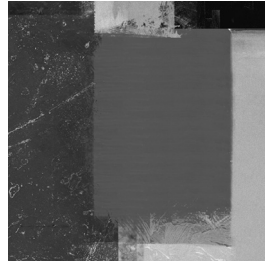


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Preface

You may have picked up this book because you feel just as lost and overwhelmed as we feel sometimes. Some days you've got it, and other days you just don't. We are not promising this book will help you find yourself or whatever you are looking for, but we can promise that you will feel less alone in this profession as you turn each page. We do not want this book to be a stuffy, professional, or esoteric manuscript we wrote from some mountaintop to get tenure. We most certainly are not on a mountaintop, and we don't have tenure—yet (fingers crossed). Before we get into specifics about what we will discuss throughout the book, we want to share a couple of things about ourselves and our motivations for writing the book. Our hope is that this brief description will help you position us correctly in your mind while reading our thoughts.

We are still raising babies and learning how to balance work and family. Our practices are not in tall office buildings where you call our assistants to schedule an appointment. We don't drive new cars, and money is most certainly not inconsequential. Over the last 8 years, we have gone through our graduate counseling program and a doctoral program in counselor educator and supervision, finished our licensure processes, and became counselor educators and licensed supervisors. There is still so much for us to learn. So much so that we ask ourselves, "Do we even know enough about anything to write a book?" Although we would love to usher you into our book with confidence, please know that this book isn't about giving you confidence. Instead, we are trying to invite you to think about who and how you are within the work we do together. To do so, we'll share ourselves, our journey, our failures, and our successes with you in each chapter.

A chief motivation in writing this book is the dissonance we sometimes feel around our identity as counselors of color and the invisible culture of Whiteness within the “how to do counseling” space. This invisible culture doesn’t just hurt counselors of color but also hurts White counselors who may not identify with the traditional way of doing counseling. When we say “the invisible culture of Whiteness,” we mean that when you think of an effective counselor, you don’t imagine them wearing Jordans.

That is the problem. This invisible culture whispers, “Be more like us and less like you,” until many counselors forget who they are. This subtle message is reinforced in research, writing, education, art, and film and television. The image most counselors have of what a counselor looks like when they enter the field does harm to a counselor’s development of self-efficacy. Now, we are not saying this book will undo decades of whitewashing in the counseling field. We just want to invite you to consider that counselors can be tweedless, uncouth, imperfect parents who cuss, laugh, and cry through sessions, listening to *A Tribe Called Quest* while wearing sneakers.

This book is written for two populations: (a) students enrolled in prepracticum, practicum, and internship courses and (b) new professionals seeking clinical licensure. Learning to do counseling is complicated. There is so much information and only a fraction of it is tested through comprehensive exams and national licensure exams. Over the course of 12 chapters, we hope to simultaneously condense and focus all that information while sparking reflection regarding your counselor identity and style.

The chapters in this book are chosen in an attempt to scaffold clinical information. The book starts by introducing readers to doing counseling. As we move through different types of therapy, we focus on helping you integrate counselor training directly into practice. We spend a considerable amount of time discussing the therapeutic relationship. Specifically, we focus on meeting the clients, building the therapeutic relationship, managing the process, and trusting that therapeutic process. We then introduce more complex skills including, but not limited to, integrating theoretical orientations into therapy, moving clients through their treatment plan from session to session, and ending therapy with positive outcomes. We also cover the work counselors do after the session is over. Then our discussion shifts to more contemporary issues in therapy, such as taking advantage of supervision, doing multicultural counseling, and, finally, doing distance counseling. We include a continual case example that we work through in most of the chapters to help us concretize many of the concepts and ideas we discuss within the chapter.

Chapter 1: An Introduction to Doing Counseling

The word “counsel” comes from the Old French *counsel* and Latin *consilium*, meaning consultation, advice, deliberation, or thought. Doing counseling requires us to do all of these things and more throughout our work with clients. Doing counseling requires us to listen to both our thoughts and emotions. To listen means to attend closely to what is being shared. The skill here involves staying with the client rather than jumping in readily with advice or problem-solving; it introduces readers to the idea of attending to clients as a way of doing counseling. In the chapter, we define counseling and the principles that guide our work. We pool information from therapeutic outcome research to explore counseling done well and not well. We then discuss using the self as a therapeutic tool, a concept that we will explore in more depth in later chapters. The chapter ends with a discussion of ways counseling is done and how it is done ethically.

Chapter 2: Doing Different Types of Sessions

After introducing readers to doing counseling well, ethically, and with principles and perspective, we want to outline the different types of sessions students and new professionals will find themselves conducting. We often hear practicum and internship students as well as new professionals say, “I have an intake session today” or “I had to do a crisis session last week.” Our goal in this chapter is to prepare readers to walk into these different types of sessions with confidence. We will identify some common types of sessions: intake, general therapy, treatment planning, assessment, individual, couples, family, child, crisis, and termination. We will discuss the purpose and major objectives for counselors in these sessions, the client’s experience, and important details counselors should consider when conducting these sessions. This chapter will highlight the voice of Dr. Judith Preston as she discusses ways to do crisis counseling sessions.

Chapter 3: Pre-session Preparation

Now that readers know the different types of sessions they may conduct, we next discuss pre-session preparation strategies. Many counselors have pre-session rituals just as baseball players do before they step into the hitter’s box. In this chapter, we will discuss strategies to use when preparing to attend a session, highlighting

the importance of preparing for sessions. Also, contacting clients over the phone or email is explained. Readers can learn about the tiny important details that get lost in preparing for the more obvious therapeutic focal points, such as knowing what to wear and how to act, deciding on sitting placements, taking notes in session, developing an ambiance, and preparing the room for a session. This chapter also includes plans for approaching a session, strategies for managing emotions and improving therapeutic timing, and suggestions on how to prepare for termination during the early sessions. Finally, we will discuss perhaps one of the more sobering experiences of counselors-in-training and new professionals: no-shows and why they happen.

Chapter 4: Meeting the Client

Our job as counselors is to meet our clients where they are, although this is easier said than done. Meeting the client takes a great deal of vulnerability, safety, connection, and intentionality. This chapter will guide readers through some of the complex processes involved in meeting the client. We will cover the topic of building a therapeutic relationship with clients, which involves the skills of reflecting feeling, content, and meaning. Also discussed are ways to foster vulnerability within clients, ensuring safety, enabling change, personalizing their problem, diagnosing, and using assessments when meeting the client. This chapter will highlight the voice of Dr. Dave Howard as he discusses vulnerability within the therapeutic relationship.

Chapter 5: Managing the Therapeutic Process

Once the client is met well and a therapeutic alliance is fostered, counselors must manage the therapeutic process. This is often a critical area of interest for our students and new professional colleagues. This chapter pools information from the existing literature and our personal experience to walk readers through ways to manage the therapeutic process. Discussed in this chapter are topics such as seeing the field, mapping the territory, and first- and second-order change. We will then focus on the different phases of the therapeutic process—initial, working, and closing phase—to help readers see the process as something tangible they can touch and feel in session. This perception of the process can help readers learn to manage it. This chapter will highlight the voice of Dr. Jason Martin as he discusses ways to manage the therapeutic process.

Chapter 6: Trusting the Process

The phrase “trust the process” is both enlightening and discouraging. Students and new professionals struggle, as we do, to trust the unknown aspects of the therapeutic process. The ambiguity of the therapeutic process can be frustrating at times. Learning to trust that some meaningful work is going to occur through this ambiguity is a significant challenge for students, new professionals, and veteran therapists alike. While the previous chapter might help the process become less ambiguous, this chapter will guide readers through some strategies that may make trusting the process less frustrating. We will first define the therapeutic process and then focus on the topics of trust in therapy, the self of the therapist, neurophysiology, transference and countertransference, emotions, resistance, and facing failure or rejection as a counselor.

Chapter 7: Developing Your Style

A counselor’s theoretical orientation acts as a compass in session, pointing counselors in the direction of healthy functioning. An understanding of a guiding theory in session gives counselors the freedom to flex techniques to meet the needs of clients. Managing and trusting the therapeutic process is helped with this understanding. This chapter will guide readers to find or better understand how to use their theoretical orientation. We begin the chapter by defining a theoretical orientation and why it is important to the therapeutic process. Also in this chapter is a discussion about the relationship between the person of the counselor and their theoretical orientation, including topics such as life philosophy, personality, style, and eclecticism and integration.

Chapter 8: Therapeutic Progress: Stringing Sessions Together

One of the most invalidating feelings, regardless of a counselor’s experience level, is how therapy sessions can seem disjointed, with each session feeling like a completely different, isolated experience. This sensation sparks the question, “Am I making a difference?” So far, we have guided readers through meeting the client, managing and trusting the process, and integrating their theoretical orientation into the session. This chapter focuses on using that knowledge to make counseling work for clients, which entails connecting therapy sessions together and tracking therapeutic progress. We will cover

topics such as why measuring progress matters, evaluating sessions, increasing hope, reversing negative spirals, facilitating change, and matching the parallel process in therapeutic progress.

Chapter 9: Postsession Tasks

Counselors-in-training and new professionals are sometimes just happy to have survived a session. There is also an element of survival after session that involves paperwork and processing. This chapter focuses on life after the session. No one becomes a counselor because of the paperwork, but it is a part of doing counseling. We will guide readers through the postsession process, which includes debriefing, writing treatment notes, developing or fine-tuning a treatment plan, and engaging in self-care. This chapter will highlight the voice of Dr. Eric Brown as he discusses restorative practices counselors can do between sessions.

Chapter 10: Clinical Supervision

An essential element of doing counseling is receiving supervision. Counselors-in-training and new professionals will work with more experienced clinicians to support them on many of the topics discussed in this book. However, supervision is not always a warm experience rich in growth and development. This chapter not only introduces readers to supervision but also discusses the reality of this experience. We will focus on topics such as supervision styles and relationships, the delivery method of supervision, the fears of live supervision, and ways to get the most out of supervision.

Chapter 11: Doing Multicultural and Antiracist Counseling

This chapter is dedicated to the cultural aspects and elements involved in doing counseling. These aspects are essential to doing counseling well, but they can be overlooked in session. We will attempt to balance the presentation of information with the facilitation of introspection. Topics discussed in this chapter include cultural humility, cultural competence, cultural attunement, cultural insensitivity, multicultural ruptures, social justice, spirituality and religion, and many more topics counselors-in-training and new professionals face when doing counseling.

Chapter 12: Doing Distance Counseling

The landscape of counseling has changed. The global COVID-19 pandemic pushed counselors—some kicking and screaming—into new avenues of their practice, including distance counseling. Although the therapeutic environment has changed, many of the core dynamics have stayed the same. Build a strong relationship and therapy has a chance to be successful. Obviously, this is easier said than done when webcams sometimes have less than 20/20 vision and not every client has a professional microphone and soundproof booths. Noticing and attending to nuanced aspects of the therapeutic process is more difficult now. Doing counseling is harder in some ways and easier in others. This chapter focuses on counseling from a distance. We will spend some time discussing topics like ethics, the therapeutic environment, technology, the therapeutic relationship, communicating with clients online, overcoming the many obstacles distance counseling presents, and the dos and don'ts of distance counseling.

Epilogue: Putting It Together

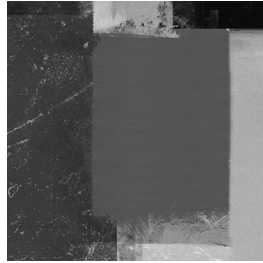
While this book will provide many readers comfort as they learn to do therapy, it may cause some readers to feel overwhelmed with the complexity of doing counseling. This epilogue will pull out the essential elements of the chapters and focus on the key takeaways from the book.



Acknowledgments

Doing Counseling: Developing Your Clinical Skills and Style is the result of a team effort. Not only is it a product of our effort, but our guest contributors and reviewers have brought their influence into the development of this book. Special appreciation goes to Carolyn Baker, the publisher at the American Counseling Association, and Nancy Driver, the digital and print development editor. Carolyn and Nancy encouraged us along the way and contributed their expertise by reviewing the entire manuscript, providing insightful comments and suggestions, and offering support and guidance through the evolution of this project. We appreciate their patience as we went through a lot this year—experienced the birth of a child and a natural disaster, which slowed down our writing process. We want to recognize and express our gratitude to our four guest contributors for their inspiring and honest personal stories about their experiences when doing counseling: Dr. Dave Howard, Dr. Eric Brown, Dr. Jason Martin, and Dr. Judith Preston.

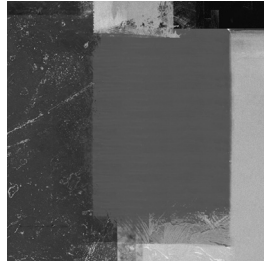
We would certainly not be able to do this without the support of our families. Our wives—Lindsay, married to Jude, and Megan, married to Julius—are a constant source of support in our lives. Our sister, Dr. Jasmine Austin, who recently wrote her first book, keeps us motivated and laughing. Our children, who keep us grounded and focused on our purposes. And lastly, our parents Lorraine and Jude, who were our first counselors. They taught us how to express ourselves. It is true to say that much of what we share in this book, while it exists in literature and research, are things our parents first taught us. Thank you does not begin to cover our appreciation to many of the individuals acknowledged here.



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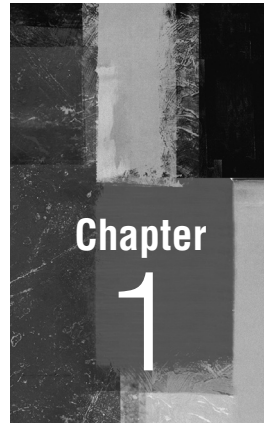
About the Guest Contributors

Eric Brown, PhD, is an assistant professor in the Department of Counseling and Special Education at DePaul University. He is also in private practice.

Dave Howard, PhD, LMFT-S, is a retired army chaplain and retired professor at the University of Mary Hardin-Baylor. He currently mentors chaplains and spends time with his family.

Jason Martin, PhD, LMFT-S, LPC-S, is an associate professor in the counseling program at the University of Mary Hardin-Baylor and serves as the clinic director of the Community Life Center in the Cru Community Clinic, Belton, Texas.

Judith Preston, PhD, LPC-S, is a private practitioner and supervisor in Chesapeake, Virginia.



An Introduction to Doing Counseling

Spoiler alert: Graduate school and prelicensure experiences are not meant to fully prepare you for everything it takes to do counseling well. There are still times in session now with an individual or a group, couple, or family that have us wondering if we actually know anything about the counseling profession. It is a very humbling profession in that, when you think you have seen everything, just wait an hour.

This book is an attempt to plug the gaps between education and experience. The chapters are filled with some of the lessons we have learned along the way and experiences that have shaped our journey. We have failed so that hopefully you don't have to. We urge you not to take anything in this book as the gospel truth for how you must practice. Instead, interact with the information as if we are walking alongside you, just trying to learn more about how to do this counseling thing well together. Chew on the topics a bit. Filter them through your culture and ways of being before you decide what is true and not true for you. In each chapter, we want you to say something like, "Ah, that's cool, and here is how I would adapt it to fit my style."

What Is Counseling?

Let's start at the beginning. What is counseling? It can be hard to define all of what counseling is. This difficulty did not stop researchers from trying. In "20/20: A Vision for the Future of Counseling,"

counseling was defined as “a professional relationship that empowers diverse individuals, families, and groups to accomplish mental health, wellness, education, and career goals” (Kaplan et al., 2014, p. 369). On some level, yes—and no, sort of, maybe, yes that sort of captures it if you squint your eyes a little and hold your breath.

This definition certainly captures the function of counseling, but not the soul of what we do. To us, this definition feels like it was crafted by a bunch of old tenured professors and their lawyers to appease some board of trustees. Of course, we know this definition was the result of serious research completed by a multiethnic and multigenerational group of researchers and participants, not just old tenured professors. Nonetheless, just reading the definition leaves the taste of library books and tweed in our mouths. You may read it differently, and if it works for you, go with it.

The soul of counseling’s definition is in the connection. Counseling is 50 to 90 minutes in a room with another individual, couple, family, or group just trying to figure stuff out. Sure, there is structure, research, assessment, process, interventions, and more. But strip all that away and you find people moving deeper and deeper into genuine connection with each other, their partner(s), family member(s), or community; to a healthier version of self or their relationships, their symptoms, or their substance abuse and its impact; to the present, past, or future; or to grief, anxiety, depression, honesty, you name it. Counseling is relationships. Now, empowerment, education, wellness, and mental health might be the result of this deeper relationship. We encourage you to define what counseling is for you. Make sure you are not defining the result of counseling but what it actually is for you.

When done well, counseling is this unpredictable, terrifyingly awesome experience that leaves everyone in attendance changed and a little sweaty. Some of our best counseling sessions were unplanned, time-warping, exhausting endeavors guided by theory, duct tape, and a prayer. The image of the calm, wizened, fireplace-warmed counselor, sitting with elbow patches firmly placed on a Chesterfield chair, is often a misrepresentation of counseling. While there is absolutely nothing wrong with elbow patches, do you boo, counseling is being done differently today. Yes, “business on top and pajama pants on the bottom” different.

In addition to dressing up for the web camera, counselors are doing therapy in weird, great, and unexpected ways. Counselors are doing therapy in prisons where clients are on the other side of a locked prison door. There is a counselor right now taking their clients on an ice climbing adventure where they will camp and

process their military posttraumatic stress disorder tonight. Another counselor is just finishing a reflective horseback ride with a family and is beginning to process their communication styles surrounded by horses in a pasture. Another counselor is fishing in a boat with their client who's processing childhood trauma.

We don't want you to foreclose on an idea of counseling as this stale and uncool career for objective tacticians. There is so much more to the way counseling can be done. In this chapter, we will introduce counseling and many related parts of the clinical experience. We don't know what types of counseling homes you were raised in, so this chapter is our way of reviewing what you know, will know, and have forgotten. We hope that by the end of the chapter, a foundation will have been laid for you as you continue to read more complex parts of counseling in the book.

What Are We Actually Doing in There?

If your answer to the question is "helping," just imagine us throwing our hands up in the air. If we are the helpers, does that make our clients the helpless? That was a trick question. The answer to what we are actually doing in counseling is nothing. Well, we are mostly just trying to get out of the client's way, which isn't nothing. But you have to do nothing to do that. It will all make sense around Chapter 12. Trust the process.

While doing counseling, "doing nothing" looks like us simply sitting there and listening. We occasionally tell the client or clients what we heard. Sometimes, we offer some professional and personal insights depending on our theoretical orientation. Then we eventually get around to summarizing what we heard and its significance for the client. We chat about a goal or two and how the content relates to the goals. We may then do a couple of interventions to facilitate the client's ability to meet those goals. Then we have a talk about how to maintain growth and insight after they have met the goals. Then we terminate them. That's all that good counseling is—listening, reflecting, summarizing on repeat. Welp, thanks for reading our book. We look forward to seeing you at the next American Counseling Association (ACA) conference.

Obviously, it is more complicated under the surface. We will get to the complicated things, but first, we will introduce and discuss some of the primary counseling skills and professional competencies needed to develop into an effective counselor. Using these skills well will give you the tools to move a client through the therapeutic process we discuss in later chapters. We know, reading through

them might feel a bit overwhelming or monotonous. We also know for certain that effective counselors do these microskills expertly.

Nonverbal Skills

What are you saying to others when you are not saying a word? We all have a resting face that we need to be aware of when listening. Nonverbal skills include eye contact, tone of voice, body posture and position, distance from the client, what we wear in session, and the office décor. Everything you say without saying it is important. Think of that look your mom gives you when you are acting a fool in church. That quick glance, so sharp it cuts the kinetic energy right from your body. Even if you did not grow up in church, you know the look. Tangentially, I (Jude) recently discovered I can do that look now on my little boys when they are not playing nice. It's like a drug. I use it now in sessions when couples are arguing. Get yourself the look.

Encouragers

How do you get others to know you are listening without saying, "I'm listening"? Encouragers are minimal and invite the clients to share more. Think of a time when you were talking to someone deeply. Somewhere during the conversation there was a pregnant pause. Maybe the person knew what they were about to share would change everything. To get that person to continue, you might mumble something like a stretched out "mmhmm." You might also do this when you are on the phone with a friend, family member, or colleague who needs to talk, but you have about three pots on the stove and a kid in each arm. To let them know you are listening, you might say something like, "For real" or "Wow." These encouragers are natural gap fillers in a conversation, but they are purposeful.

Questions

Asking the appropriate open- and closed-ended questions is an art. Sometimes counselors can ask a nonverbal question with the right look or tilt of the head. The important thing to consider during a session is whether a question is necessary. Some questions could be flipped into a statement. Other questions could be distracting and change the course of the session. If you can answer a question yourself, then it can probably just be a feeling, content, or meaning reflection. Take a chance and throw out that reflection instead of asking a question. The worst that can happen is a client saying they don't know, or you were wrong.

For example, the question “How does that make you feel?” is such a cliché. If the client knew how they felt, they probably would not come in to see a counselor. Most counselors will reflect back to the client what they think the client is feeling based on a host of telltale signs. You may think, “Well, what if I am wrong?” In these cases, clients will just correct you and move on. On the other hand, if you are correct, the therapeutic relationship grows that much stronger with every correct reflection or attempt at a reflection you make.

The standard advice is to avoid “why” questions because some say that the why can come across as judgmental. However, asking a why question while using the appropriate facial expressions and tone of voice can register as genuineness. There is a slippery slope to why questions; you want to avoid seeming like a detective when asking why questions. It takes a keen awareness of therapeutic timing to use questions as guide rails for the process.

Reflecting Content

Here is a rambling window into our life that may or may not pertain to the topic in this section. If you ever get the chance to defend a dissertation, do it. It is exhausting, but so worth the effort. Anyway, after the defense, you will pass and become Dr. So-and-So. There is no confetti. Everyone sort of just shakes your hand and goes on about their day as if your life did not just change forever. Then you call to tell everyone you know: family, friends, tailor, cobbler, mechanic, and whoever else you consider your people. It’s great, but by the second person, you start cutting corners for the sake of time. By the third person, you are adding bits that didn’t even happen just to keep it interesting. Seriously, instead of sharing everything you experienced, you pick out highlights or themes and share those.

This is what effective reflecting feels like—hitting the highlights of a story already heard and told. Effective reflecting can sometimes happen with one to five words of summary that captures a theme of a client’s sharing without having to parrot everything the client said. Sometimes a client can share or a couple can argue for 5 to 50 minutes. This could be the first time in a long time that they have had an opportunity to share their experience.

To help follow the content as well as keep the reflections brief, we use the imagery of dropping an anchor during the conversation. Imagine that you are on a rowboat in session. The water is the content shared by the client. Essentially, you are floating on the surface of the content. Now the client might share something that seems like there could be some depth to it. Imagine dropping

a mental anchor in that spot. The client continues to talk, but you float around the anchor. When there seems to be a natural stopping point in the client's sharing, you can go back to that anchor and reflect what you heard. You can say something like, "Let me see if I follow you here. A bit ago, this stood out to me." The client acknowledges that you understand, and you pick up your anchor and float. The more you anchor, the more you might start to notice a pattern within the content.

Earlier in our careers as students and when obtaining licensure, we used the parrot approach. After the client shared, we would just repeat what the client said, word for word. We lost so many clients because we were not really adding anything to the conversation. It was especially frustrating for experienced clients who needed a bit more substantial contributions from their counselor. The challenge when reflecting content is trying to capture the essence of the content and present it in a way that helps the client connect the dots in their own story.

Reflecting Feeling

Think of feelings as the emotional content of the client's experience. Imagine that you are now dropping the anchors we discussed above when an emotion resonates with you as the client shares their story. Following and reflecting the emotional current of the content is the key to effective emotional reflection. The more you accurately reflect the feelings for the client, the closer you pull them toward you. We love it when a client says, "Oh man, that's exactly how I feel." This is especially rewarding when you reflect a feeling that the client did not identify themselves. You feel them drop deeper into reflection of their experience.

Depth Reflections

Next-level reflections move the client deeper and deeper into awareness. For example, sometimes clients come in and say they have anger issues. We would think about that anger as a symptom of a deeper unacknowledged or disowned emotion. So as we "drop anchors," we try to go deeper and deeper into that experience by reflecting the client's content, feelings, and the therapeutic process. You are trying to answer for yourself the question, "Why is this experience so significant to the client?"

Some counselors might argue that depth is the goal of therapy. As deep as the client can go, we follow. So, what is depth? Depth is that stuff underneath the surface of an issue. Think about when some soul-

less person eats with their mouth open, smacking and slurping away without a care in the world. You think, “Who hurt you?” You may also think, on the surface, eating with their mouth open is just how they became accustomed to eating. Maybe they eat with their mouths open because this is their first time ever eating in front of someone, so they just don’t know how others experience their mouth-open eating. But on a deeper level, in our core, we know it probably stems from a neglectful caregiver who did not experience how painful it is to hear every . . . single . . . bite. You might also think that because of these neglectful caregivers, the smackers might develop an avoidant attachment style, which causes them to create a complementary relationship style of pursuer-distancer in their romantic relationships. So, smacking while eating is a deep, unconscious effort to push everyone in their lives away while also pulling them into a fight.

Sorry, we really have a thing about smackers. We think you get our point though. Advanced reflections are all about combining feeling and content reflections to move the process deeper and deeper. To be able to do depth reflections, you will have to know a bit about theory and research related to your approach and the client’s specific issue. We hope you noticed that even when joking about smackers, we threw out some technical concepts to pull the relatively surface issue of smacking down into family-of-origin issues and attachment styles. Obviously, this mock example is not something we would actually focus on in therapy. However, depth reflections feel similar in that you take the client’s sharing down into the core hurt. Leaning on theory to pull the client into the depth of the issue helps this process.

Confrontation

The word *confrontation* has a harsh connotation. It sounds and feels like you are about to do something to someone. We often hear our students and supervisees say things like, “Well, I am confrontational, so I am gestalt.” Most new counselors’ introduction to confrontation is through the “Gloria tapes” of Fritz Perls (1965) demonstrating gestalt techniques with a patient name Gloria. If you know what you are looking for while viewing the Gloria tapes, you understand the work. But most will be fixated on Fritz’s style of confrontation. While Fritz has a style of confrontation, so does everyone else. We want to change the image of confrontation from Fritz blowing cigarette smoke in your face as you weep to a warm therapist encouraging you to stay with your pain, to be honest with yourself, to say the things you need to hear. Again, confrontation is not gestalt.