

# MENTAL HEALTH COUNSELING: AN EMERGING PROFESSION

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**Abstract:** *Mental health counseling is a well-developed profession in the West. Besides working with mental health, academic, relationship, health related issues, mental health counselor's work on promoting health and self-growth of the clients. They are employed in different settings and their nature of work differs from setting to setting. Their core work continues to be in the domains of emotions and behavioral aspect of health.*

*In the West, there are governing bodies, councils and accreditation programs which decide the regulation of running of counseling programs by different universities or institutes. India still does not have regulatory body which monitors the running of mental health programs in different academic set up and institutions. There is a strong need that such council is made by the Government of India which can look after the regulation of such programs.*

*This paper will discuss the above mentioned issues and also focus on the different settings where mental health counselors work. The paper also briefly discusses some of the techniques employed by the mental health counselors to work with their clients.*

**Key words:** *Mental health, mental health counseling*

## INTRODUCTION

Counseling is a way of talking and helping people to explore and think about things that may be worrying them. Counseling can also help people if they are not sure what to do by giving them some time to think through possible ideas. A key part of the way that counselors work is they will not judge, criticize, interrogate or make decisions for the person they are seeing. Their aim is to listen, support and help people to decide what will work for them.

Mental health is a key part of our overall well-being. The World Health Organization (WHO) states that there is no health without mental health. It is the source of our collective and individual ability as people to reach our full potential. Mental health refers to the way in which we are aware of our own abilities and can cope relatively well with the ups and downs of life. Someone with good emotional well-being is capable of working productively and making a contribution to his or her community.

The World Health Organization (WHO, 2001) has defined mental health as a "state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community." Mental Health Counselling (MHC) can be understood as "an aggregate of the specific educational, scientific, and professional contributions of the disciplines of education, psychology, and counselling" (Spruill & Fong, 1990, pp. 20-21). From early on, mental health counsellors have defined their work as "an interdisciplinary multifaceted, holistic process of (1) the promotion of healthy lifestyles, (2) identification of individual stressors and personal levels of functioning, and (3) preservation or restoration of mental health". Mental health counsellors are concerned with health and with the wide variety of circumstances, socially and individually, that can impair or inhibit the functioning of a person's life. Mental health counselling is designed to contribute to the vitality and vigor and to the soundness in body, mind, spirit, and social connection that sustains well-being, and so is considered, by our society, to be health.

MHC has identified itself as a profession in which the person is conceptualized both developmentally and holistically with attention to contextual influences on persons' lives. This approach involves both systemic and individual perspectives. On the one hand, from the systems perspective, clients are embedded within and influenced by their family, societal, historical, cultural, and socioeconomic context, which means that community resources and interdisciplinary approaches can be useful in treatment. Simultaneously, the individual can be viewed as being the gestalt of multiple domains – emotional, physical, social, vocational, and spiritual – that coalesce and culminate in a more or less healthy life style. As part of the health care industry, mental health counsellors focus on a wellness, holistic mental health philosophy, regardless of whether the clients' issues are more reflective of developmental struggles or more reflective of clinical pathology. That is, the profession endorses a philosophy that is focused more on strengths and wellness, as springing from the multiple synthesized domains of the person, and focused less on curing some kind of mental illness.

Jahoda (1958) elaborated on this by separating mental health into three domains. First, mental health involves "self-realization" in that individuals are allowed to fully exploit their potential. Second, mental health includes "a sense of mastery" by the individual over their environment and, thirdly, positive mental health means "autonomy", as in individuals having the ability to identify, confront and solve problems.

Mental health counseling has been found to help young people experiencing a wide range of difficulties including feeling depressed or anxious about wide range of issues that a client's finds valuable for himself, low self-esteem, family breakup, marriage conflicts, being bullied at teenage, self-harm, stress an individual is unable to get rid of drug abuse, anger, job dissatisfaction, and career problems.

Demand for counseling is evident from the survey was conducted by Pratibha Masand (Oct 10, 2012) on ,Times of India with his topic entitled , "One in five Indians needs mental health counseling, reveals govt statistics". According to the statistical report put forth by her ,It is evident that 1/5 (i.e. 20%) individual's need mental health counselling at least once in their whole life & out of these 20% people ,6% need medication for mental problems.1% & 5-10% people suffers from mental health issues

Counselor needs not any kind of judgment, interrogation on the client but to explore underlying issue client is going through & attempt to work for its solution in a way client gets optimum satisfaction level. Counselor's focus is on growth & development of the client with communication skills that he/she has got with adequate training & experience. Counselor permits practitioner's to permit to make a difference in people's lives & to see the result in their own life time. Mental health counselor attempts to make us aware of our abilities may it be related to relationship, goal, career, sexual frustrations, loneliness, parental dependence-all subjects that are common among college & university students force the counselor to resolve them, once & for all, in his or her own life .The profession thus continually encourages its practitioner's to upgrades their personal potential.

Counselor motivates or makes a client well understand how we are all interconnected & how important it is to be for the sustenance of life .Counselor also guides & helps a client to get meaningful & purposeful life that allows depression to get away. It is the need of the time to choose counseling as a profession as large number of students need a counselors .It has been observed that students don't have vocational guidance & there is mostly a mismatch between vocational subjects chosen & aptitude of the students with the consequences of career frustration & suicidal attempts. A mental health counselor helps people cope with emotional and mental disorders. His or her clients may have drug and alcohol addiction, marital and family problems, difficulties caused by aging or may be dealing with stress and anxiety.

### MENTAL HEALTH COUNSELING LICENSING ISSUES IN INDIA

The word counseling is the most misunderstood word. Its use has been abused and misused in India. This causes lots of confusion among academicians, researchers, mental health professionals and health professionals about who is counselor and his/her role in different settings. Counseling as a profession is most closely associated with the discipline of psychology.

To practice as a mental health counselor in the West and other developed nations, people need to get a license from the state in which they want to work. In addition to one's master's degree and clinical training, they will also have to pass a written examination. Many states in the USA require people to pass the National Counselor Examination for Licensure and Certification (NCE), a test administered by the National Board of Certified Counselors (NBCC). In India, there is no licensing body which monitors the training issues of counselor. Anyone who is Post graduate or M.Phil or Doctorate in Psychology are often called hired by different organizations to work as counselors. The supervision of counseling as a process by the trained counselors is often ignored in India. This has significant clinical and social implications for unethical practices and opens the ways of misuse and abuse of the counseling profession. It has significant legal implications and also put the clients at risk for abuse. There is a strong need that Government agencies should make a council which can monitor who can and who can't practice as a counselor. Government should pass laws for action against those who does counseling practice without having proper training under a qualified counselor.

### SETTINGS WHERE MENTAL HEALTH COUNSELORS CAN WORK

Mental health counselors often work in diverse settings like schools, colleges, universities, hospitals, prisons, military, sports and NGOs. Counselors' works depend upon the setting they work in. In academic setting settings, they help students to deal with academic stress, teach them effective study skills, memory enhancement skills and similar issues. In hospital settings, they help the patients to cope with their disease, evaluating minor mental health issues and their management. They work with HIV/AIDS patients, cancer issues etc. In sports area, they help players to enhance internal motivation, being realistic and hopeful, avoid performance choking etc. In military settings, military personnels are trained by the counselors to cope with risky situations, deal with traumas and be resilient. Counselors also work in different NGOs helping the underprivileged and differentially abled people to deal their challenges effectively.

### TECHNIQUES USED BY MENTAL HEALTH COUNSELORS

Mental health counselors employed different techniques depending upon the nature of the client's problem. They use a gamut of techniques using behavioral, cognitive behavioral, humanistic, existential, psychodynamic and family base models. The section below discusses some of the techniques used by mental health counselors.

1. **Token economy:** It is a behavioral strategy to develop behaviors in clients which they are not doing like training behaviors like brushing, combing etc. A token economy program (TEP) is a system whereby clients earn tokens in exchange for engaging in designated target behaviors. Just as we use money to buy the things we want, clients in a TEP exchange their tokens for a variety of desirable backup reinforcers, including food, beverages, magazines, toiletries, CDs, potted plants, toys, crayons, school supplies, and other desirable goods. Clients in residential settings may be given the opportunity to purchase a private bedroom, room furnishings, or home passes. Persons in TEPs in correctional settings often spend tokens to buy the privilege to wear their own, rather than institutional, clothes. Because the operant conditioning principles on which TEPs are founded apply to all behavior, it is not surprising that TEPs have been developed to deal with a large variety of populations and target behaviors. They have been found to be effective in increasing exercise regimens in chronic pain patients; reducing cigarette smoking in psychiatric outpatients; improving outpatient therapy attendance and participation; reducing alcohol consumption and illicit drug usage in out-patient alcohol and substance abusers; increasing dietary compliance for individuals with diabetes or renal problems; promoting weight loss; improving word finding and decreasing misarticulations in aphasic patients; reducing temper tantrums, teasing, and other "acting out" by children in the home; eliminating thumb sucking; increasing self-care skills, social inter- action, and exercise in geriatric patients; reducing stut- tering; eliminating enuresis and encopresis; decreasing chronic nail biting; and improving marital satisfaction.
2. **Time out:** Time- out is a positive reinforcement procedure which is used in the management of disruptive behaviors like hitting others; throwing objects, temper tantrums etc. It was first used by Ferster (1958). In this procedure a child is removed from a reinforcing environment for a brief period of time (2-4 minutes) after he/she does some disruptive behavior. Time out is a negative punishment procedure because the child is removed from all sources of positive reinforcement contingent on the problem behavior and then that problem behavior decreases. The child is typically escorted to a nearby room or an area devoid of any access to reinforce. It really means time-out from any attention. It is a good substitute for punishments such as hitting and yelling. Time-out must be used for two things:
  1. If the child does something dangerous which might harm the child or others? For example, hitting someone, shouting as mentioned above;

2. If the child does not follow a direction you give after one warning. Time-out should be used. For example, if a child is going to hit someone, he/she should be said, "If you hit, you will have to take a time-out." One warning should be given. If the child stops going to hit, she/he should be praised immediately.
3. **Activity scheduling:** It provides structure and encourages involvement. Rating (on a scale of 0 to 10) the degree of mastery and pleasure experienced during each activity of the day achieves several things: Clients who believe their depression is at a constant level see mood fluctuations; those who believe they cannot accomplish or enjoy anything are contradicted by the evidence; and those who believe they are inactive because of an inherent defect are shown that activity involves some planning and is reinforcing in itself.
4. **Premack technique:** This is an operant based technique in which more desired activities are used to reinforce less desired behaviors. This is often as Grandma's rule. For example, if a child likes to watch cartoon program and does not like to wash clothes. As per Premack technique, first the less desired behaviors like washing clothes will be asked to perform before allowing him/her to watch cartoon. Less desirable activities are made contingent on more desirable activities.

### SUMMARY AND CONCLUSION

Over the 100 plus years since it emerged as a formal professional activity, counselling has proven itself to be both popular and effective. Individual counselling is by far the most widely researched and practiced, and it sets the general standard of efficacy and effectiveness by which other approaches can be assessed. With the popularity of individual counselling have come a burgeoning number of practitioners and counsellors representing various professional backgrounds and types of training. Moreover, there has been an exponential growth in the number of theories used to describe the psychotherapeutic process and to guide one's work. Research has demonstrated that some of these approaches are effective, but most psychotherapeutic practices do not rely on scientific research for justification. Clinician experience and impressions are the most frequently used yardsticks by which to judge when treatment is effective and is working. However, this situation seems to be changing, and contemporary political movements and health care programs are recognizing the need to identify which treatments are effective and which ones are not. This movement has introduced a number of changes in the field of psychology. It has brought increasing pressure on clinicians to justify their practices in terms of research endings, and this development has placed more emphasis on making research that is clinically applicable. As a result of changes in the health care environment, the disparities within the field of counselling & psychotherapy research as well as those between science and practice are becoming more apparent. New models are needed and are developing, both for making research more applicable and for applying research findings to the task of directing the course of treatment.

Trained mental health counsellors often work in the schools & colleges'. Central Board of Secondary Education (C.B.S.E) has also made it mandatory that all its affiliated schools should have counsellors. It, however, does not clarify who are entitled to work as counsellor's i.e. their training & supervision aspects have not been focussed. There is a need that government agencies should make a Council which regulates mental health training & supervision. It will help counselling to emerge as a profession in India.

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