FEM3107/PEM 3501
Semester Pertama, 2010-2011

ASAS PENASIHATAN DAN KAUNSELING
(BASIC ADVISING AND COUNSELLING)
Selamat datang ke bilik kaunseling

ikhas daripada Penbimbing Rakan Sehaya

Cikgu... saya ada byk masalah la.. mcm mana ni !!!

kena jumpa cikgu kaunseling ni.. hmm..
No worries, mate.

Cheers, mate.
Why learn counselling skills?

Can we not learn?

What difference will it be?

Student Advising

Dr. Dassow advising a group of students.
<table>
<thead>
<tr>
<th>Problem/Year</th>
<th>2000</th>
<th>2001</th>
<th>2002</th>
<th>Total</th>
<th>Percent</th>
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</thead>
<tbody>
<tr>
<td>Academic</td>
<td>196</td>
<td>261</td>
<td>71</td>
<td>528</td>
<td>35.0</td>
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<tr>
<td>Personal</td>
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<td>55</td>
<td>33</td>
<td>147</td>
<td>10.0</td>
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<tr>
<td>Career</td>
<td>24</td>
<td>35</td>
<td>57</td>
<td>116</td>
<td>8.0</td>
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<tr>
<td>Social</td>
<td>18</td>
<td>29</td>
<td>50</td>
<td>97</td>
<td>7.0</td>
</tr>
<tr>
<td>Financial</td>
<td>12</td>
<td>25</td>
<td>72</td>
<td>109</td>
<td>7.0</td>
</tr>
<tr>
<td>Family</td>
<td>25</td>
<td>34</td>
<td>52</td>
<td>111</td>
<td>7.0</td>
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<tr>
<td>Health</td>
<td>5</td>
<td>12</td>
<td>70</td>
<td>87</td>
<td>6.0</td>
</tr>
<tr>
<td>Moral/religious</td>
<td>8</td>
<td>30</td>
<td>25</td>
<td>63</td>
<td>4.0</td>
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<tr>
<td>Entertainment</td>
<td>0</td>
<td>6</td>
<td>54</td>
<td>60</td>
<td>4.0</td>
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<tr>
<td>Sexual</td>
<td>2</td>
<td>11</td>
<td>19</td>
<td>32</td>
<td>2.0</td>
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<tr>
<td>Teaching</td>
<td>3</td>
<td>2</td>
<td>16</td>
<td>21</td>
<td>1.0</td>
</tr>
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<td>TOTAL</td>
<td>471</td>
<td>500</td>
<td>519</td>
<td>1490</td>
<td>100</td>
</tr>
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</table>
Learning objectives

- To state model of helping and it’s differences
- To describe modality of helping and it’s differences
MODEL OF HELPING

MORAL

MEDICAL

COMPENSATORY

ENLIGHTENMENT
Model of helping

- Brickman et al. (1982) have introduced four model or orientations of helping.

- Provides an insight to understand client’s reaction to helping as a function whether the he or she feels responsible for the origin of his or her problem and/or for finding a solution to the problem (Cohn, 1983).
Moral model

- attributing high responsibility to the client for both the problem and the solution.
- Those who work hard are rewarded and those who are not are punished or simply people get what they deserved.
- The philosophy of this model is that if one gets oneself into trouble, it is one’s responsibility to get oneself out of the problem.
"Yes, I'm fully qualified, yes, I'm single, yes, I'm busy after work."
Medical model

- Opposite of the moral model because the client is **not attributed responsibility for the problem or the solution**. Factors external to and beyond the control of the individual lead to illness and misfortune, as well as to the cure.
- Client as ill and unable to find solutions.
- The need for expert helper
Compensatory model

- a hybrid of both the moral and the medical model
- Client is **not responsible for the problem but responsible for the solution.**
- Individual in this model feel that they need to compensate for the handicaps or other misfortunes they have received through no fault of their own.
- Help is needed to compensate for their problems
- Clients are deprived or victims of circumstances
Enlightenment model

- Is the opposite of the compensatory model as individual are held **responsible for the problem but not the solution.**
- They become enlightened to the nature of their problem and to the action deemed necessary to overcome the concern. They however need to perceive that they are responsible for the origin of the problem.

However, problems were caused primarily by their impulse and behaviour and control of these problems are outside their power.

Solution lies outside of clients.
Gladding (2004) - approaches

- **The developmental approach**
  - Problem is based on the developmental task of life.
  - Some behaviors that are appropriate at one stage of life may not be seen as healthy at another stage of life.
  - Gives more emphasis on prevention and education.
Gladding (2004) - approaches

- The medical model
  - The medical model uses treatment plan that is based on the Diagnostics and Statistical Manual of Mental Disorder (DSM).
  - Clients are diagnosed based on systematic procedure and treatment plans are developed to help them.
Where are we as helper?

- Guidance and Counselling using model?
- What model?

Mental health model
- Medical model
- Psychosocial model (developmental)
## Comparison (Danek, 1987)

<table>
<thead>
<tr>
<th>MH Counseling</th>
<th>Medical Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling</td>
<td>Medicine</td>
</tr>
<tr>
<td>Human Development</td>
<td>Psycho-pathology</td>
</tr>
<tr>
<td>Problems of living</td>
<td>Mental Illness</td>
</tr>
<tr>
<td>Client</td>
<td>Patient</td>
</tr>
<tr>
<td>Client’s ability to cope</td>
<td>Patient is cured</td>
</tr>
<tr>
<td>Develop assets &amp; skills</td>
<td>Eliminate pathology</td>
</tr>
</tbody>
</table>
Mental health

- refers to a human individual's emotional and psychological well-being.

- A state of emotional and psychological well-being in which an individual is able to use his or her cognitive and emotional capabilities, function in society, and meet the ordinary demands of everyday life.
World Health Organization definition of mental health

- include subjective well-being, perceived self-efficacy, autonomy, competence, intergenerational dependence, and self-actualization of one's intellectual and emotional potential, among others.
Some concepts

- Facilitating
- Improvement
- Growth
- Modify
- Enrich
- Attitudes
- Motives
- Responses
- functioning
These pains you feel are messengers. Listen to them.

~ Jellal ed-Din Rumi (1207-1273)
Conclusion

- Helping can be explained using model or approaches

- There are four helping modalities: advising, guidance, counseling and psychotherapy