

MODELS OF PASTORAL COUNSELING

IPS 517

Fall, 2009

T 1:00 pm - 3:30 pm

WTC – CMUN –rm 223

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Office Hours: Before and after class; or by appointment

COURSE DESCRIPTION

Models of counseling act like paradigms that inform therapists about what is important to focus on in their clients and what is healing, restorative, and growth-inducing in therapy. Each model says something about what normal and abnormal functioning looks like and how therapy helps a person move from unhealthy to healthy functioning. Pastoral counseling draws on both psychological and spiritual traditions to create a psychologically informed spirituality and a spiritually based psychology. This survey course will explore representative paradigms from three broad traditions in Western psychology along with the spiritual dimensions of these approaches: psychoanalytic (which includes the models of drive, ego, object-relations, and self), behavioral-cognitive, and humanistic-existential-transpersonal. We will also look at multi-cultural, feminist, and integrative counseling approaches.

We will reflect on: Who do you think you are (as a pastoral counselor)? What do you think you're doing? Who do you think you're doing it with? What makes you think it works? What is pastoral about what you're doing? Exploring our personal metaphors can help us clarify how we want to practice pastoral counseling.

The progression of this course will follow in a general way the levels of therapeutic intervention suggested by William Pinsoff. We start at the surface and work our way down as necessary. We begin with the least intrusive intervention and if that doesn't work, drop down to the next level of intervention -- all the way to the most profound depths of the psyche.

Therapy begins with the attitude of empathic listening to foster a therapeutic working relationship. Roger's *person-centered model* is a good place to start and it's a reliable place to return to when you get lost. Go back to one: what is the client's subjective experience? Roger's approach provides a safe environment to explore, experience, and express one's true self.

Though it is beyond the purview of this course, a preliminary base line is *biology*. Are there any genetic, neurological, or biochemical causes to account for the person's present situation? When was the last time they had a physical? Any changes in medication? Any age related biological changes? A minor change in one's biochemical processes can add years to or take years off of therapy.

When physical causes are ruled out, the next level of intervention is *behavioral*. Will a simple change in behavior alter the individual's situation? Here we'll look at learning/behavioral approaches to therapy: classical conditioning, operant conditioning, and social learning or modeling. We'll also use Egan's model of problem-focused goal-oriented intervention.

If behavioral intervention doesn't bring about the desired change, then we go to the level of *cognitive intervention*. Perhaps the person's cognitions, perceptions, assumptions, attitudes, etc. are interfering with their ability to bring about behavior change. Here we'll look at the cognitive theories of Beck, Ellis, and Young to uncover and modify maladaptive schemas.

If interventions at the cognitive level are not effective, then there might be some deeper intrapsychic or interpersonal dynamics at play. Here we enter the *psychoanalytic tradition* with its four paradigms: drive, ego, object relations, and self.

We'll look at Freud's *id/drive model* of psycho-sexual development and intrapsychic conflict along with his understanding of transference/countertransference.

Then we'll consider the approach of the *ego psychologies* – especially Erikson's psycho-sexual-social developmental model.

We'll see what the *object-relations* theorists add from their interpersonal developmental perspective and how they consider transference/countertransference.

Finally, within the psychodynamic tradition, we'll look at Kohut's *self psychology* model with his understanding of development, interpersonal dynamics, and transference.

Next we'll explore the *Gestalt* approach which has one foot in the psychoanalytic tradition and the other foot in the existential tradition. We'll learn some techniques for bringing the past into the present.

At the core of the person are found four "givens" of life that the *existential tradition* honors: death, freedom, isolation, and meaning. This approach posits that at the root of all pathology lie the avoidance of death, the escape from freedom, the condition of existential isolation and groundlessness, and the experience of meaninglessness. Any of these human dilemmas may be the source of the person's dysphoria.

And finally, we'll look at some *multi-cultural* and *integrative approaches* to psychotherapy. Since no therapy model is comprehensive enough to encompass all issues, attempts have been made to bring together the best of these different theories through the modes of technical eclecticism, common-factor approaches, theoretical integration, and assimilative integration, among others.

COURSE SCHEDULE

Aug. 25	Introduction to Models of Counseling and Psychotherapy; Biological Model	TPCP 1,2,3; IO/OI 1; SOP 1
Sept. 01	Person-Centered Model	TPCP 7; SOP 9
Sept. 08	Behavioral Model and Reality Therapy	TPCP: 9, 11
Sept. 15	Cognitive Model	TPCP 10; SOP 4
Sept. 22	Postmodern Approaches	TPCP 13
Sept. 29	Psychoanalytic Model	TPCP 4; IO/OI 2, 3; SOP 2, 5
Oct. 06	Mid Term Break	
Oct. 13	Ego Model	IO/OI 4, 5
Oct. 20	Object Relations Model	IO/OI 6, 8, 9; SOP 7
Oct. 27	Object Relations Model	IO/OI 6, 8, 9; SOP 7
Nov. 03	Self Model	IO/OI 7
Nov. 10	Gestalt Model	TPCP 8
Nov. 17	Existential Model	TPCP 6; SOP 6
Nov. 24	Feminist Model and Multi-Cultural Approaches	TPCP 12; SOP 8, 10, 11, 12, 13
Dec. 01	Integrative Models	TPCP 15; SOP 8, 10, 11, 12, 13

COURSE TEXTS

Required

Berzoff, J., Melano Flanagan, L, Hertz, P. (2008). *Inside out and outside in.* (2nd ed). Northvale, N.J.: Aronson. ISBN 0-7657-0342-4 [**IO/OI**]

Corey, G. (2009). *Theory and practice of counseling and psychotherapy.* (8th ed). Belmont, CA: Thomson/Brooks-Cole. ISBN 0-495-10208-3 [**TPCP**]

Sperry, L. & Shafranske, E. (2005). *Spiritually oriented psychotherapy.* Washington, D.C.: American Psychological Association. ISBN 1-59147-188-5 [**SOP**]

COURSE REQUIREMENTS

- 1) Regular class attendance, class preparation by reading the required materials, and class participation are expected. Two or more missed classes will result in a reduction of grade.
- 2) For selected models, learners will write a 4 page paper summarizing what that theory says about *healthy functioning*, *unhealthy functioning*, and *therapeutic intervention*. Learners will then give their reflection on the *pastoral implications* of the model.

Three summary papers are due before the mid-term break and three are due after the mid-term break.

Learners will write a paper on the Person Centered model (due 9/1); one paper on either the Behavioral, Reality Therapy, Cognitive, or Postmodern model (due 9/15); and one paper on the Psychoanalytic model (due 9/29).

Learners will then write a summary paper on either the Ego, Object Relations, or Self model (due 11/3); a paper on either the Gestalt or Existential model (due 11/17); and a paper on either the Feminist model or some Integrative model (due 12/1).

Late papers will be reduced one letter grade. [Type-setting: use Times New Roman Font, 12 point type, 1 or 1½ line spacing, and leave no more than 1 inch margin on top, bottom, and sides.]

HEALTHY FUNCTIONING	UNHEALTHY FUNCTIONING	THERAPEUTIC INTERVENTION	PASTORAL IMPLICATIONS
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PSYCHOANALYTIC MODEL
EGO MODEL
OBJECT RELATIONS MODEL
SELF MODEL
REALITY THERAPY MODEL
BEHAVIORAL MODEL
COGNITIVE MODEL
POSTMODERN MODEL
PERSON-CENTERED MODEL
EXISTENTIAL MODEL
GESTALT MODEL
MULTI-CULTURAL, FEMINIST
INTEGRATIVE MODEL