Personal Consultancy: An integrative approach to one-to-one talking practices

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Abstract

Despite a proliferation of ‘one-to-one’ taking practices that include counselling, psychotherapy and coaching, the existing approaches do not seem to be fully adequate, starting from their very names to, more importantly, the help that they can offer to clients. Broadly speaking, counselling and psychotherapy are mostly remedial, and usually lack more ‘positive’ or pro-active elements. Coaching, on the other hand, can be charged with not addressing deeper, underlying issues, and consequently being superficial. Personal consultancy approach allows practitioners to integrate the depth perspective, offered by counselling and psychotherapy, with an opportunity to make constructive, practical changes, associated with coaching. This is possible because all of these practices, in fact, use similar skills, and their domains already overlap to a large extent. In building its framework three essential elements of ‘one-to-one’ practices are considered first: the client, the consultant and the interaction (relationship) between them. On this basis four stages of the personal consultancy process are suggested: authentic listening, re-balancing, generating and supporting. The paper will expand on them, discussing the appropriate attitudes, methods, and techniques that can be used at each stage, in order to assist the process.

Keywords: Personal consultancy, coaching, counselling, psychotherapy, integrative

What Personal Consultancy is

Personal consultancy is an attempt to provide a general framework for ‘one-to-one’ (or ‘helping by talking’) practices. Starting from their very names, the existing approaches seem to be confusing and not fully adequate, especially to clients who have not had previous experience with them. For example, one thing that counsellors do not do is counsel, which is difficult to explain to new clients. The term psychotherapy, on the other hand, has a connotation of deficiency, implying that there is something wrong with a ‘patient’ and a need for a remedial intervention, akin to the work of physicians. This often puts off potential clients and undermines developmental work that psychotherapists do. Coaching may also leave a wrong impression with its name because of its association with sport coaching, which is highly directive and instructional, something that coaches largely tend to avoid.

The names, of course, are not the only problem. Although there is ever increasing evidence that one-to-one practices can be beneficial, there is often a sense of incompleteness of the process among practitioners and clients alike. Counsellors, for instance, customarily take a reactive role (Whitmore, 1997). No doubt this has many benefits, but it also easily leads to ‘passivity’, which can be a cause of frustration for clients. In our experience, the most frequent reason why clients decide to leave or change their counsellors is that “they do nothing”. This is not to underestimate the skills required to provide so-called active listening that may seem effortless from the outside. Only, for many clients this may not be enough.
On the other hand, some other approaches, such as cognitive-behavioural therapy, NLP, and coaching are usually far more proactive, but perhaps at the expense of paying insufficient attention to deeper, underlying issues. In particular, coaching, that is still in the process of developing its conceptual and evaluative basis (Peltier, 2001) is vulnerable in this respect. The briefness of currently unregulated coaching courses can produce newly baked professionals that cling onto techniques and tools (e.g. wheel of life, value elicitation, matching and mirroring) to see them through a session. Not only may this not be conducive to a genuine interaction, but some of these techniques even contradict what we know from psychology research. For example, a number of training courses in life coaching emphasise an explicit commitment from clients to undertake an action, often by asking them to sign a commitment form, or by attaching an external reward to a desired behaviour. Not only may this not be conducive to a genuine interaction, but some of these techniques even contradict what we know from psychology research. For example, a number of training courses in life coaching emphasise an explicit commitment from clients to undertake an action, often by asking them to sign a commitment form, or by attaching an external reward to a desired behaviour. Whilst this may be effective in the short-term, research warns us about the long-term costs of relying on extrinsic motivation that can undermine personal agency (Ryan and Deci, 2000). Probably the biggest danger lies in the echoes of some largely discredited behaviourist ideas, such as that changing the behaviour will automatically change thoughts and emotions, making their way into the coaching manuals1. Pointing out possible and actual shortfalls should not, by any means, cast doubt on the good work put in by various individuals and organisations towards establishing ethical and professional standards in coaching (Palmer and Whybrow, 2005). Nor should the above undermine the value of proactive practices that can provide a more focused approach and scaffoldings for personal development and improvement of already functional individuals. Again, as in the previous case, our intention is only to highlight their incompleteness. Concentrating on action and producing measurable outcomes fast will not be fully beneficial if the underlying issues and conflicts, as well as the validity of clients’ goals, are not examined and if a natural dynamic of change is ignored.

Various attempts to find a way to strictly demarcate the boundaries between different one-to-one talking practices (Kampa-Kokesch and Anderson, 2001) do not make things better. Counselling, psychotherapy and coaching are often artificially separated by a temporal perspective (apparently, counselling and psychotherapy deal with the past, while coaching with the present and future), or by specifying a client group (working with normal vs. clinically pathological population, which are themselves fuzzy and controversial categories). Therapy as a remedial activity is sometimes contrasted with the performance improvement objective of coaching (Carroll, 2003). Does it mean, we wonder, that counsellors who are doing developmental work on a regular basis should be told off for not sticking to the “remedial”?

The truth is that all these practices rely heavily on similar skills and their domains overlap to a large extent. Summerfield admits that “…a good coach may be constantly switching between coaching and counselling during a single session’ (Summerfield, 2002, p.37). We believe that getting rid of ideological baggage associated with the above approaches (and their subdivisions) and combining their strengths in a meaningful way would be beneficial for practitioners and clients alike. Personal consultancy is an attempt to do so, by creating a new integrative approach to working with clients. The term consultancy is defined as a meeting which is held to discuss something and to decide what should be done about it – this, in our view, describes one-to-one talking practices better than other terms. Personal signifies that it is about focusing on the person and personal matters (that, of course, may include social and professional issues). The aim of personal consultancy is to help clients solve their internal conflicts or problems, and also to facilitate personal development and improvement. Therefore, it also focuses on clients’ strengths and enhancing their quality of life. This process is described in the following model.

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1 See, for example, ‘Rapid Results’ Coach Training DVDs of the Coaching Academy, 2004.
The model

In an attempt to minimise ideological bias, the model starts from the basic elements that are necessary beyond doubt. It is proposed that there are three such elements: the client, the consultant and the interaction (relationship) between them. These three elements can provide the three dimensions of the process, which can be graphically presented in the following way:

![Diagram](image_url)

**Figure 1:**

The *vertical axis* relates to the consultant and encompasses two basic modes:
- a) Being with the client - a non-directive, reactive, defused mode.
- b) Doing with the client - a more directive, proactive, focused mode.

The *horizontal axis* relates to the client and encompasses two basic domains:
- a) The domain of existing emotional, cognitive and behavioural patterns (that can include the present and the past).
- b) The domain of desired, strived for patterns (that can include the present and the future).

The *diagonal axis* refers to the level of interaction:
- a) The depth focuses on the intra psychic, inner world of the client, emphasised in the psychoanalytic approach, for example.
- b) The surface focuses on the client’s reality (the external manifestations and events) and behaviour, emphasised, for instance, in the cognitive-behavioural approach.

The relationship

Some practices pay only perfunctory attention to the relationship between a practitioner and a client, and others, on the other hand, consider it to be the most important (even the only important) aspect. As always, the truth is likely to be somewhere in the middle. ‘How’ (the relationship) is very important, but not always sufficient on its own. In the worst case, the client can enjoy the relationship with the practitioner to the point of self-indulgence, which would not contribute to a contractive change. In the model above, it is proposed that the scope of the interaction is defined by the depth-surface axis (which, of course, does not mean that this is the only important thing in the interaction). These terms do not have value connotation. We do not consider that depth, for instance, is intrinsically superior to
the surface. It is not always appropriate or necessary to go into depth, but also it is sometimes futile to stay on the surface. Practitioners need to be comfortable with both.

There are many characteristics of the practitioner that can contribute to the good relationship: being genuine, reliable, trustworthy, conscientious, acting with acceptance and integrity. However, the bottom line is that the relationship is a tacit component of the process that mostly depends on the practitioner’s experience, talents and sensitivity, so little can be said about it. ‘Techniques’, such as mirroring, for example, seem to be more of a hindrance than a help, because they inevitably lead to losing spontaneity, an essential ingredient in a good relationship.

The stages of the process

The other two axes deal with ‘what’ (the content) rather than ‘how’ (although, of course, this is not and does not need to be a sharp distinction). They provide four quadrants that can be identified with the stages of the consulting process, as represented in the diagram below.

![Diagram of the stages of the process](image)

**Figure 2:**

**Authentic listening.** Listening, needless to say, is ubiquitous in one-to-one practices. However, we believe that listening, which we name authentic, deserves its own quadrant because of its unique emphasis: it is listening that is an end in itself, not a means to an end. The term authentic indicates the need for a genuine focus on what the other person is communicating, rather than applying techniques or procedures in order to leave an impression of listening. It is foremost about giving space to clients, letting them talk and express themselves (cognitively and emotionally). This, of course, does not mean being completely passive. A consultant needs to understand and gather information (through observation too, beside listening), which may involve clarifying certain issues by asking relevant questions, summarising what has been said, or categorising information into themes. Certain methods, such as free association, drawing or visualisation (e.g. to describe an emotion) may sometimes aid the process. Several attitudes can facilitate this stage: interest, (non-attached) involvement, respect (including self-respect), and empathy. However, being with the client requires taking a back seat, so a repertoire of techniques in this (as well as in the fourth quadrant) is, naturally, limited. Phenomenological reduction, (used, for example, in existential therapy) is suggested as a valuable tool. It consists of bracketing one’s own assumptions, judgements or expectations, in order to gain insights from experience rather than existing mental constructs (for further description, see for example, Young, 2000, p.75).
**Re-balancing** consists of helping clients to locate and resolve internal conflicts that could be cognitive, emotional, behavioural or complex (e.g. a conflict between one’s thoughts and feelings). It is achieved by helping a client to reveal his or her pre-assumptions, bring to the surface suppressed emotions, or examine the causes of undesirable reactions. This may involve analysis of material at hand (e.g. dreams), challenging (e.g. thoughts that support client’s negative patterns or an inaccurate conception of oneself), examining, exploring, uncovering or interpreting. Many techniques can assist this process. Examples on the cognitive level may include laddering (Dryden, 1990), or resolving contradictions by pointing at inconsistencies, incompleteness, incongruence with the facts, and incoherence (redundant beliefs). Resolving emotional conflicts can be aided by methods such as focusing (Gendlin, 1981), re-living the past experiences; systematic elimination (Popovic, 2005), or developing acceptance. Behavioural conflicts can be tackled by, for example, helping a client to set priorities or become more impartial. At this stage, positive aspects of the person can also be brought forward, by locating client’s strengths and competencies.

**Generating** focuses on personal change and achievement. In other words, on developing new more constructive patterns. On the cognitive side this may involve setting or clarifying goals; identifying and exploring options; choosing solutions; developing an action plan. On the affective side a consultant can help the client learn how to alter and control their affective states by using visualisation, relaxation, breathing exercises or meditation. Well known methods such as desensitisation, exposure or dis-identification can be utilised to modify one’s behaviour. Many coaches locate their services within this quadrant, largely skipping the previous stages. However, generating new patterns is more effective if the existing ones have been attended to.

**Supporting**. This stage is also about being with the client, and therefore the range of techniques is limited. On the cognitive level, a consultant can help a client identify support mechanisms (e.g. family members) and, on the other side of the coin, do a prediction check (of what can go wrong). On the affective level, a consultant can provide stability and acknowledgement (of difficulties). And on the behavioural level, encouragement (e.g. focusing on benefits) can help a client sustain motivation.

The consultancy process should ideally follow the pattern 1, 2, 1, 3, 1, 4, 1… Returning to authentic listening is essential. For example, it would be a mistake to point out certain inconsistencies in a client’s views (2) and then immediately jump to generating different options (3). The client may need time to absorb what has been discussed and the consultant needs to check if the new insights have been internalised before moving on, which requires listening first. Of course, not all these stages are always necessary. Sometimes a process may end with the stage 2, or certain specific practical issues may need only a brief visit to the same stage. Nevertheless, it is important not to lose sight of them all.

**Conclusion**

It can be only right that clients expect to get ‘value for money’ (or value for their time in the case of free consultancy) and this means the whole package. Few clients nowadays are interested in lengthy therapy that is supposed to reveal some hidden parts of their selves with little effect in real life. The assumption that when the depth is sorted out, the surface will take care of itself has never been proven in practice. On the other hand, clients soon become disillusioned by the short-term effects of practices that build on weak or non-existent foundations. Most clients want to explore their depths but also make constructive, practical changes. Personal consultancy is an attempt to provide a model broad enough to satisfy such requirements. Its integrative character is what distinguishes this one-to-one practice for counselling or coaching.
References

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