

Jeremy Gillentine—September 12, 2024

COUC710-- Discussion Two: Yalom, chapters 3-4 Discussion Thread: Group Cohesiveness & Integration of Factors

My Question:

The ACA Code of Ethics Preamble says in number 2 under “The following are core professional principles of the counseling profession” “...that honoring diversity and embracing a multicultural approach in support of the worth, dignity, potential, and uniqueness of people within their social and cultural contexts...”.

In the story of Meena in chapter 4 (Yalom & Leszcz, 2020, pg. 117), Meena talks about feeling like a foreigner when in the U.S. and is thought of as being westernized when she returns home to India. Meena goes on to say after a gulp, “I’m in love with a former classmate who loves me back,” she said. “But I’ve always rebuffed him because of what people there would say. This group has encouraged me to pay attention to my own desires and I’ve now decided to follow my heart. I know now that life is short and should not be squandered because of what I fear others think.”

Later Yalom & Leszcz (2020, pg. 123) state, “Thus, one way that self-understanding promotes change is by encouraging individuals to recognize, integrate, and then give free expression to previously obscured parts of themselves. When we deny or stifle parts of ourselves, we pay a heavy price: we feel a deep, puzzling, amorphous sense of restriction. When we are able to reclaim these disavowed parts, we experience a wholeness and sense of liberation”.

**Question:**

Using Meena's example as a guide for thought, is it appropriate for persons from collectivist cultures to attend a group that is slanted towards western individualism? If no, why not? If yes, why? Are there any additional prescreening that should occur to be in alignment with the APA Code of Ethics (2014) when you suspect a variation in the cultural values of potential participants? Should the group leader have inquired about Meena's expectation of backlash due to the cultural impact of her decision?

### **Reference**

American Counseling Association. (2014). *2014 ACA code of ethics*. <https://www.counseling.org/docs/default-source/default-document-library/ethics/2014-aca-code-of-ethics.pdf>

Yalom, I. D.; Leszcz, M. (2020). *The Theory and Practice of Group Psychotherapy* (6<sup>th</sup> ed.) (p. 124). Basic Books. Kindle Edition.

### **Kelley Ryals Question asked September 3, 6:55 PM**

On page 131 of Yalom's text, he lists five existential factors that have not been addressed up to this point in the book. In his book Yalom and Leszcz (2020) listed recognition that life is unfair and unjust, there is no escape from some of life's pain and/or death, that we must face life alone, facing basic issues of life and death without being caught up in trivialities, and finally, that we must take responsibility for the way we live, regardless of support received from others. This question arises purely from seeing this information through a biblical lens. In light of the factors

that Yalom listed, at what point do we, as counselors, introduce the topic of "a higher power," or do we not?

When faced with those factors, I cannot imagine dealing with them without my belief in God and his mercies.

Jeremy Gillentine—September 12, 2024—Response #1

I agree with your final thought! I often wonder how people cope when they simply believe when you die you cease to exist. I say that I am a Christian in my advertisements. I also have a section in my intake documents that states I am a Christian (more specifically that it is not simply a place I go or things I do but who I am). I give them 2 check boxes to state they would like Christian principles included or would prefer I do my best to stick to counseling principles. I share that I am pleased to help them from either perspective. When people check to please include Christian principles, I begin our first session with a 1-10 scaling question to gauge their level of interest.

If they checked “counseling principles only”, and we came to these questions, if I felt they were satisfied I would probably not ask. However, if they still seemed unsettled and because they came in already aware of my belief system, I would likely be compelled to ask if they would like to hear some thoughts on the subject from the Christian Worldview perspective. This is not to convert them, but simply to open another perspective for consideration. The ACA Code of Ethics A.4.b. states that we are to avoid imposing our values, attitudes, beliefs, and behaviors. Rosmarin et. al., (2011) speak of introducing spirituality into a group setting as an introduction of the potential “...relevance of spiritual beliefs...and how to incorporate these into treatment...” and not intended to convert anyone. If I am seeking my clients’ best interest and not

proselytizing or being offensive to my client, It can be appropriate to share a varying perspective for the to gain the good and leave the negative as with any other concepts.

### References

American Counseling Association. (2014). *2014 ACA code of ethics*. <https://www.counseling.org/docs/default-source/default-document-library/ethics/2014-aca-code-of-ethics.pdf>

Rosmarin, D. H., Auerbach, R. P., Bigda-Peyton, J. S., Björgvinsson, T., & Levendusky, P. G. (2011). Integrating spirituality into cognitive behavioral therapy in an acute psychiatric setting: A pilot study. *Journal of Cognitive Psychotherapy*, 25(4), 287-303. <https://doi.org/10.1891/0889-8391.25.4.287>

### **Karina Blest Question asked September 10, 2:20 PM**

In chapter 3, Yalom cites research articles suggesting the positive rapport built with the therapist during the therapeutic process is a highly impactful element in terms of soliciting change in group members (2020). If a strong relationship with the therapist is one of the greatest factors in personal growth, how can a clinician determine when individual therapy will be more beneficial for the client in comparison to a group setting?

Jeremy Gillentine—September 12, 2024—Response #2

This is generally a subjective determination that is based on the therapist interpretation of the client's personality and general presentation. There are so many factors that could be considered but who is to say with certainty which ones are more important than others. A client may not typically jive well with others. This may be the catalyst that causes one therapist to encourage individual counseling where another counselor may encourage the group for the same person.

Norcross & Wampold (2011) indicate that we should have the client's best interest in mind, know that relationships are key in therapeutic change (whether you believe relationship is the door to begin change or a continually developing process), and there is no need for competition between science and relationship for both are necessary.

Choosing between group or individual counseling may be a balancing act by recommending a client attend some groups to see if that is beneficial with the plan B of converting to individual counseling or vice versa. Romanovsky (2014) indicates that there are potential benefits of being in group that, because of the dynamics of a group, allows for the practicing of certain life skills. However, there will be some who are "troubled by even thinking about sharing their intimate life details with strangers." These may need to reconsider whether group is appropriate for them. It comes down to a judgement call and co-decision process between the client, the therapist, and the nature of the group being considered. There are clear benefits that can be gained from both individual and group counseling setting and should be considered when making decisions of which may be more beneficial at the present time.

## **References**

Norcross, J. C., & Wampold, B. E. (2011). Evidence-based therapy relationships: Research conclusions and clinical practices. *Psychotherapy (Chicago, Ill.)*, 48(1), 98-102. <https://doi.org/10.1037/a0022161>

Romanovsky, I. (2014). *Choosing therapy: A guide to getting what you need* (1st ed.). Rowman & Littlefield Publishers, Inc.