

From shared roots to fruitful collaboration: How counselling psychology can benefit from (re)connecting with positive psychology

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***Content & focus:** Counselling psychology has its origins in a positive orientation towards life-long development, growth and prevention rather than pathology and cure. With the positive psychology movement it shares its roots in humanistic psychology, and while US counselling psychology has embraced positive psychology explicitly, UK counselling psychology has been more reluctant to engage with this framework. This paper reviews the relationship between counselling psychology and positive psychology, tracing the roots of counselling psychology and its engagement with positive psychology as well as some of the barriers to fruitful interaction. We offer suggestions for how counselling psychology could beneficially (re)connect with positive psychology ideas and practices.*

***Conclusions:** By reconnecting with its positive roots and engaging with the ideas and the research of the positive psychology movement, counselling psychology could develop more balanced and strength-oriented ways of working, rekindling its original commitment towards human flourishing and actualisation.*

***Keywords:** counselling psychology values, growth, humanistic psychology, positive psychology, prevention, strengths*

‘I believe it will have become evident why, for me, adjectives such as happy, contented, blissful, enjoyable, do not seem quite appropriate to any general description of this process I have called the good life, even though the person in this process would experience each one of these feelings at appropriate times. But the adjectives which seem more generally fitting are adjectives such as enriching, exciting, rewarding, challenging, meaningful. This process of the good life is not, I am convinced, a life for the faint-hearted. It involves the stretching and growing of becoming more and more of one's potentialities. It involves the courage to be. It means launching oneself fully into the stream of life.’

Carl Rogers - On Becoming a Person: A Therapist's View of Psychotherapy (1961, pp. 195-196)

This paper explores the relationship between the professional discipline of counselling psychology and positive psychology as a paradigm and movement within

wider psychology. It argues that counselling psychology and positive psychology are fundamentally and historically connected but that counselling psychology has become more aligned with the medical model in recent decades, resulting in a profession that is often more concerned with relieving distress and ‘treating symptoms’ than with building on strengths and facilitating growth. This article seeks to suggest ways of reconnecting with the ‘positive’ roots of counselling psychology and to build bridges between the discipline in its current form and positive psychology with its growing theoretical, empirical and practical basis. It is suggested that this could breathe new life into a discipline that has moved away from its original *raison d’être*.

The positive roots of counselling psychology

It could be said that counselling psychology has had a strong ‘positive’ underpinning from the start, whether we consider its origins in the United States, where it was formed in 1946, or whether we look closer to home at the beginnings of the UK discipline of counselling psychology in the 1970s and 80s up until its official inauguration as a full professional division of the British Psychological Society in 1994. In the US, the positive origins of the discipline can be detected in the very names that were first chosen, namely the Division of Personnel and Guidance Psychologists and then the Division of Counseling and Guidance, before it finally became the Division of Counseling Psychology in 1955. The early names indicate that the discipline’s origins lie in vocational guidance (Meara & Myers, 1999), which, amongst other things, seeks to identify people’s talents and strengths in order to facilitate optimal career choices. However, from the start the discipline was not only concerned with vocational aptitude and talent but also with the person in context, specialising in providing general guidance in life, similar to what would now be called coaching psychology. From a process perspective, encouraging clients to talk freely about their feelings, values, beliefs and wishes formed an important part of the approach that was taken (Tyler, 1992), resulting in a discipline that focused its research and practice interests on ‘the total person and the environmental contexts within which persons find themselves’ (Meara & Myers, 1999, p. 34).

The development of Carl Rogers’ approach to counselling, rooted in a belief in a universal tendency within people towards actualisation, and its integration into the

work with veterans carried out by the emerging ‘counselling psychologists’ could be seen as a further indication of the positive focus that constituted an integral feature of the discipline (Joseph, 2015). Highlighting development throughout the lifespan and ‘personal growth’ became important areas for counselling psychology in the second half of the 20th century. In addition, the discipline was strongly influenced by political developments such as the Civil Rights Movement and second-wave feminism. Against this background, a significant aspect of the positive focus could be seen in the concentration on person-environment fit rather than on changing people’s personality structures in order to fit them to a particular environment. This non-pathological and contextualised view of the person became one of the core and lasting features of the discipline, prioritising a concern with prevention rather than cure and embracing diversity and multiculturalism within a social justice values base (Hage, 2003).

Although US counselling psychology is regarded as one of the main influences on the development of counselling psychology in the UK, the discipline’s origins here can be seen to be quite distinct, shaped by the specific context within which the profession was first conceived and has developed since. Similarly, a positive underpinning can be identified here as characterising the discipline from the start, albeit rooted more outspokenly in humanistic psychology and psychotherapy rather than in a specific professional practice such as vocational counselling and coaching psychology. In fact, the beginnings of counselling psychology in the UK were characterised by a conflict between the developing discipline, which originated in counselling and psychotherapy work outside of academic institutions and psychology departments, and parts of the then psychology establishment, which offered ‘fierce resistance’ (Lane & Corrie, 2006, p. 12) to the profession’s commitment to reflective practice, personal therapy and supervision and regarded these as not an acceptable part of ‘a scientifically-based professional practice’, as recalled by Woolfe (2012, p. 74).

Furthermore, the particularly British version of the positive roots of counselling psychology need to be seen as stemming from a time of political unrest. Against the background of the 1960s and 1970s, the interests that gave rise to the discipline were intimately connected with a widening interest in greater democratisation throughout society and a concern for the fostering of human potential. Thus, a section of psychology students of that generation took up more critical positions towards

established institutional structures and ideologies, taking an interest, for example, in the ‘anti-psychiatry’ movement (BPS, 2000-2013), and became particularly interested in humanistic psychology, phenomenology and Rogerian counselling. As a result, rather than being a development from within academia as in the USA, counselling psychology in the UK constituted the re-integration of what had previously been a non-academic practice back into the folds of academic psychology.

The profession’s groundedness in a humanistic values base in the UK has meant that its focus has been on well-being and growth, which has involved taking up a non-pathologising and developmental stance with regard to clients. The positive psychology movement of recent decades can equally be traced back to humanistic psychology with regard to its origins, which suggests that philosophically, counselling psychology and positive psychology are both rooted in what could broadly be termed the humanistic-existential-phenomenological paradigm (Robbins, 2015). The phenomenological tradition has been particularly strong in UK counselling psychology, and growing out of its emphasis on training in more than one theoretical model, more recently the discipline has embraced a pluralistic perspective (Cooper & McLeod, 2011; McAteer, 2010). This can be viewed as continuing the political resistance that UK counselling psychology has been associated with as an opponent of a government-promoted ‘one size fits all’ approach.

Taking a combined look at the origins and history of Anglo-American counselling psychology, some common strands can thus be identified, namely in the humanistic and Rogerian heritage, which provided the values base and the name, and in particular in the shared concern with well-being and growth rather than pathology.

Counselling psychology’s engagement with positive psychology

As such, we believe that the concerns of positive psychology are close to the heart of counselling psychology. While mainly rooted in 20th century humanistic psychology, at the turn of the millennium the positive psychology movement started out with its own distinct identity as ‘a science of positive subjective experience, positive individual traits and positive institutions’ (Seligman & Csikszentmihalyi, 2000, p. 5). Seeking to counter the dominant concern of 20th century psychology with mental

illness rather than well-being and quality living, the new movement put attributes and values such as ‘hope, wisdom, creativity, future mindedness, courage, spirituality, responsibility and perseverance’ (p.5) back on the agenda of psychological science. We would argue that researching such qualities would also serve the counselling psychology agenda, with regard to both its scientific orientation and its humanistic values base, and a significant amount of collaboration between the two fields could be expected.

Evidence for connections, overlaps and interactions between counselling psychology and positive psychology are first and foremost to be found in the United States. Here positive psychology is not only viewed as an essential part of the identity of counselling psychology, but counselling psychologists even claim that the discipline had such an orientation long before positive psychology as we know it today was formed (Mollen, Ethington, & Ridley, 2006), focusing on building strengths and developing personal and social resources. Key figures and milestones in the development of the discipline in the first half of the twentieth century include Frank Parson’s focus on strengths and healthy functioning in educational and vocational counseling (from 1908 onwards) and the development of goal-oriented student counselling by F.G. Williamson (in the 1930s). Later, the emergence of the humanistic approach to psychology and the work of Rogers (1951) were central for the advancement and identity of the young discipline. Considering the humanistic roots of counselling psychology, Shlien commented (originally writing in 1956): ‘In the past, mental health has been a ‘residual’ concept – the absence of disease. We need to do more than describe improvement in terms of say ‘anxiety reduction’. We need to say what the person can do as health is achieved. As the emphasis on pathology lessens, there have been a few recent efforts toward positive conceptualizations of mental health. Notable among these are Carl Rogers’ ‘fully Functioning Person’, A. Maslow’s ‘Self-Realizing Persons’...’ (Shlien, 2003, p. 17). This quote is an early illustration of the discipline’s focus on resources, well-being and flourishing and the fact that counselling psychology originally had a decidedly preventative rather than curative function.

Acknowledging the connection between counselling psychology and positive psychology more recently, a major contribution of *The Counseling Psychologist* in

2006 focused entirely on this paradigm. It featured a content analysis of counselling psychology publications with a positive focus (Lopez et al., 2006), which concluded that a host of themes had been studied by counselling psychologists in the past fifty years which could be classified as emphasising the positive, for example achievement, adjustment, actualisation, coping, empathy, self-efficacy and a range of positive therapist or client characteristics and resources, process variables as well as values and ethics. The authors pointed out that most of these positive themes differed considerably from the positive constructs that had been put forward for study by the founders of positive psychology Seligman and Csikszentmihalyi (2000). Instead, it was suggested that there was less focus on seeming universals of happiness and well-being, a feature of Seligman's approach that has received much criticism (e.g. Downey & Chang, 2014; Linley, 2006), and more attention on individual and culturally specific values and strengths. In this latter regard, US counselling psychology with its emphasis on diversity has been particularly influential, integrating cross-cultural aspects into its positive focus. As an example, there has been a call for greater acknowledgement of the cultural assets of people of colour in the US, and research into collectivistic values and community resources has been recommended (Constantine & Sue, 2006). Counselling psychology has played no small part in the development of a multiculturally sensitive positive psychology, and its significance in this regard was also acknowledged in the recently published *Perspectives on the Intersection of Multiculturalism and Positive Psychology*, edited by Teramoto Pedrotti and Edwards (2014).

By contrast, examining the relationship between counselling psychology in the UK and positive psychology, there is a dearth of publications by counselling psychologists dealing explicitly with the topic. Over the years, there has perhaps been a handful of articles in counselling psychology publications such as *Counselling Psychology Review* which have embraced a positive psychology agenda and which have drawn on positive psychology scholarship (e.g. Hutchinson & Lema, 2009; Nelson, 2009), but the relationship of such a stance with the discipline of counselling psychology as conceived of in the UK has not been debated. An exception to this occurred when Emmy van Deurzen provided a strong critique of positive psychology in her book *Psychotherapy and the Quest for Happiness* (2009). She particularly raised concerns about a 'quick fix' mentality in psychotherapy, which, in the

relentless pursuit of an idealised state of happiness, may seek to eliminate difficult emotions rather than enable clients to tolerate negative emotions and cope with life's inevitable adversities. While her criticism may well be justified with regard to some of the early expressions and intentions of positive psychology, there has been much development in recent years which signals a step change in the field that has foregrounded factors resilience and fortitude as well as values-based living. A prominent example of this new development is constituted by a volume authored by Ivtzan, Lomas, Hefferon and Worth entitled *Second Wave Positive Psychology: Embracing the Dark Side of Life* (in press), to be published in September 2015. In the practice field, this development has been most apparent in the emergence and growing popularity of mindfulness-based third-wave CBT approaches, for example acceptance and commitment therapy (ACT) and compassion-focused therapy (CFT). However, it should not be forgotten that one of counselling psychology's core therapeutic approaches, person-centred therapy, which enables clients to open to the whole range of their experience, positive or negative, is and has always been steeped in a positive psychology values base. Indeed, there is growing recognition that this model can be regarded as a positive therapy (Joseph, 2015).

Barriers to adopting positive psychology principles and practices

One reason why counselling psychologists in the UK may have had less inclination to engage with positive psychological ideas could perhaps be due to perceived tensions between positive psychology and humanistic psychology. Positive psychology positioned itself initially within a positivist paradigm and criticised humanistic psychology for not being scientific enough, an accusation that was shown to be ill-founded by Rennie (2012), who pointed to the strong empirical traditions of humanistic psychology in quantitative and qualitative research. Nevertheless, positive psychology distanced itself markedly from humanistic psychology at that point, which may have alienated humanistically orientated counselling psychologists. In turn, positive psychology was criticised by humanistic psychology for being narrow-minded, overly simplistic and reductionistic (Friedman, 2008; Friedman & Robbins, 2012; Lazarus, 2003; Schneider, 2011; Tennen & Affleck, 2003). As argued above, much of this critique is no longer applicable due to positive psychology having

become broader and more mature in recent years, although some tensions remain (Downey & Chang, 2014; Robbins, 2015).

Yet, the problem of non-engagement is not only due to theoretical or ideological (mis)understandings. In recent decades counselling psychology practice seems to have drifted away from its initial focus on health and well-being, paired with a non-pathologising and developmental stance to clients, towards a stronger focus on disease and distress (Hage, 2003). It is no exaggeration to speak of an increasing medicalisation of the discipline on both sides of the Atlantic. A 1981 survey of the professional roles of counselling psychologists in the US (Goldschmitt, Tipton & Wiggins, 1981) showed that the majority of members were involved in short-term goal-directed counselling, although a trend was noted for younger members of the division to be more frequently involved in depth psychotherapy, a role traditionally fulfilled by psychiatrists and clinical psychologists. The movement towards 'remedial' rather than preventative work has been explained as connected with the greater prestige that is attached to medical work (Tyler, 1992) and with increasing competition in the market place, with insurances and the public in general more willing to pay for clinically-orientated work rather than prevention and personal improvement (Meara & Myers, 1999). Nowadays counselling psychologists work across a variety of settings and across all levels of severity. Similar to the situation in the USA, UK counselling psychologists initially focused mainly on the so-called 'worried well' rather than the 'mentally ill' (Orlans & Van Scoyoc, 2009), and private practices constituted the majority of practice settings along with university counselling services and other non-statutory agencies and organisations, with only some working in medical healthcare settings. This situation has changed significantly, and the National Health Service (NHS) has become the largest employer of counselling psychologists in the UK, who now often occupy the same roles as clinical psychologists, taking up the same positions at all levels of seniority (BPS, 2013). Furthermore, the dominance of cognitive-behavioural and psychodynamic therapy approaches and the underuse of humanistic approaches in healthcare settings has often had the unfortunate side effect of promoting a greater concern with problems rather than solutions and with symptom reduction rather than human flourishing.

It could be said then that the traditional resource orientation has been watered down by an increased focus on deficits and allegiance to the medical model, which promises to bring a greater prestige (Tyler, 1992), and employment opportunities (Meara & Myers, 1999). This practice shift has had implications for the identity of the profession, leading Gelso and Woodhouse (2003) to the conclusion that ‘despite counselling psychology’s long history of attention to human strengths and positive development, the empirical study of therapies that focus on the positive, as well as positive aspects of traditional therapies, have been sadly neglected’ (pp. 195-196). It seems counselling psychology has become so focused on working with distress that it has at least partly lost sight of its traditional strength and growth orientation.

‘Back to the roots’ – how counselling psychology can learn from the positive psychology movement

In response to this shift, there have been voices in recent years calling for counselling psychology to reaffirm its identity and re-orient its practice to the positive roots of the profession (e.g. Mollen et al., 2006; Robitschek & Woodson, 2006). Building on these voices, we have argued that in order to re-focus counselling psychology onto its roots in the humanistic paradigm and its traditional focus on the cultivation of strengths rather than the cure of deficits, it would be helpful to engage in an extended dialogue with the positive psychology movement (Vossler, Steffen & Joseph, 2015). As described earlier, whilst both have shared roots in the humanistic paradigm, so far the discipline of counselling psychology has ‘not embrace[d] positive psychology as clearly as we profess’ (Robitschek & Spring, 2013, p. 339). An increased collaboration between the two fields will help to build bridges of understanding (Joseph & Murphy, 2013) and offer counselling psychology the chance to re-examine its fundamental assumptions as well as contribute to ‘a positive psychology that matters’ by furthering ‘socially significant strength-based research and practice’ (Lopez & Magyar-Moe, 2006, p. 323). In the following, we will explore how the profession of counselling psychology can benefit from the new impetus offered by the positive psychology movement in reflecting on its practice and training curriculum.

Although positive psychology is still a relatively new movement, there are several notable examples of counselling psychology practice inspired by positive psychology

research and concepts. One example is the concept of, and related positive psychology research on, posttraumatic growth (Tedeschi & Calhoun, 1996) that has stimulated clinical work in the UK and elsewhere (Tedeschi & Calhoun, 2015;). Posttraumatic growth refers to the idea that individuals can experience positive changes as a result of their attempts to overcome traumatic life events (Tedeschi & Calhoun, 2015). The concept has been employed and integrated into counselling psychology practice by, for example, Hutchinson and Lema (2009). Drawing on a positive psychology framework in their work with trauma, the authors question the dominant negative and pathological narratives of the effects of trauma (with labels like ‘victims’ and ‘damaged’). They explore therapeutic ways to promote strengths and competencies and create rich and meaningful stories with clients in the aftermath of traumatic events. Similarly, Steffen and Coyle (2011) describe posttraumatic growth processes as a consequence of spiritual and religious meaning-making in the context of sense-of-presence experiences in bereavement, and Joseph (2011) offers extensive practical guidance on promoting posttraumatic growth in a therapeutic setting.

Another exemplary area is the promotion and cultivation of positive emotions, such as humor, serenity, trust, and compassion, in counselling psychology practice. For example, in their preventative work with children which is based on Fredrickson’s (2003, 2005) ‘broaden and build’ theory, Hutchinson and Pretelt (2010) aim to create opportunities for the experience of positive emotions in the context of a primary school-based group work program. Experiencing these emotions in everyday life has the potential to increase resilience by helping ‘people cope with adversity and improve the possibility of emotional wellbeing and coping better in the future’ (Fredrickson, 2005, p. 22). Positive emotional experiences can ideally trigger a reflexive ‘upward spiral’, with growing personal resources leading to increased opportunities for the experience of positive emotions and vice versa (Kok, Catalino & Fredrickson, 2008).

One of the positive emotions drawn from the positive psychology paradigm that has been utilised in counselling psychology practice is gratitude, with different conceptualisations ranging from a long-term disposition to temporary feeling of appreciation (Bono, Emmons & McCullough, 2004; Bono, Krakauer & Froh, 2015).

Positive psychology research suggests that people with a grateful disposition appreciate smaller pleasures as well as the contribution they receive from others (Watkins, Woodward, Stone & Kolts, 2003), and that a grateful mood has the potential to improve well-being (directly via a causal link or indirectly as a buffer against negative states/emotions; Emmons & McCullough, 2003; Watkins et al., 2003). Nelson (2009) concludes on the basis of the gratitude research that counselling psychologists should emphasise the notion of ‘build what’s strong’ as a supplement to the traditional ‘fix what’s wrong’ approach (p. 46) and employ interventions to promote and encourage positive emotional experiences like gratitude. However, there is a lack of studies evaluating gratitude interventions in counselling psychology practice, and it remains questionable whether gratitude programmes are compatible with more traditional person-centered approaches often employed by counselling psychologists when working, for example, with bereavement and crisis (Nelson, 2009) unless they are employed in ways consistent with person-centred theory (Joseph, 2015).

With regard to the services in which counselling psychologists work, the recovery model, which is increasingly adopted in mental health settings in the UK and elsewhere, offers new avenues for applying positive psychology within counselling psychology practice (Resnick & Leddy, 2015). The recovery approach, which is grounded on positive principles such as hope, empowerment, healing and connection (Jacobson & Greenley, 2001) emphasises a person-centred perspective, promoting choice and self-determination and seeking to enable clients live meaningful lives *with* difficulties rather than needing to get rid of them first. It is incumbent on counselling psychologists working in such settings to take up the opportunities this approach offers and to take leadership in reclaiming some of the ground that was lost in recent years.

Ideas from positive psychology are not only stimulating counselling psychology practice, they can play a crucial role in implementing a stronger focus on strength and optimal human functioning in counselling psychology training curricula. As mentioned earlier, the medical dominance and the need to equip trainees for the work in a medicalised setting has influenced training provision in counselling psychology, with the main therapeutic approaches now taught (like psychodynamic and cognitive-behavioural therapy) having a rather deficit-oriented focus. It seems that many

counselling psychologists are no longer sufficiently educated in specific strength-based ways of working and are lacking ‘the specific behavioral skills to effectively display a strength-based, developmental paradigm of conceptualization and action’ (Gerstein, 2006, p. 278; see also, Bedi, Klubben & Barker, 2012). Hence, for a more positive counselling psychology practice there seems to be a need to assess and revise the educational strategies and underlying philosophy for training programmes (Gerstein, 2006) and to introduce strength-based assessment (Rashid, 2015).

To revert to a more strength-based focus, ideas and interventions based on positive psychological theory and research could be integrated in existing training curricula. For example, material on strength-based interventions could feature in modules on ‘human distress’, ‘mental health’ and ‘psychopathology’, and the philosophically-oriented concept of ‘the good life’ could be integrated into teaching on lifespan development. Training programmes could be revised to contain specific information on assessment and interventions from a positive psychological perspective (see e.g. Joseph & Worsley, 2005; Magyar-Moe, 2009; Worsley & Joseph, 2007). Trainees should be encouraged to develop a more balanced therapeutic approach with equal attention to both problems and strengths and resources (Joseph & Wood, 2010; Rashid, 2015; Scheel, Klenz Davis and Henderson, 2012). This is supported by research showing that ‘successful therapists’ are able to broaden the clients’ perspectives of themselves as well-functioning individuals by focusing first on strengths and resources before working with the presented problem, whilst ‘unsuccessful therapists’ tend to work with their clients’ strengths either too late in the sessions, or not at all (Gassman & Grawe, 2006).

Finally, in teaching traditional therapeutic approaches training programmes could put a stronger emphasis on the positive elements and ways to use and build on client resources that are common across all major therapeutic schools (Scheel et al., 2012, Vossler, 2012). Strength-oriented processes are inherent in cognitive-behavioural therapy (reinforcement and support) and humanistic-experiential approaches (working towards self-actualisation, congruence and self-acceptance), and promoting insight can be seen as the main positive element in psychoanalytic-psychodynamic approaches therapy (Gelso & Woodhouse, 2003). Techniques and interventions to amplify strengths and develop new and positive meanings can also be found in

solution-focused and systemic therapy, such as the ‘miracle question’ (de Shazer, 2005) and the ‘reframing’ of problematic behaviour and emotions (Vossler, 2010). Therapeutic techniques like these can, for example, be used, as a form of gratitude intervention, when identifying and building on potential positive changes and ways of functioning in the aftermath of trauma (Nolen-Hoeksema & Davis, 2005).

Conclusion

We have argued that contemporary counselling psychology does not pay sufficient attention to its lineage in humanistic psychology but has become dominated by a focus on pathology and cure at the expense of actualisation and human flourishing. Such ideas once associated with humanistic psychology have become part of the discourse of mainstream psychology because of the positive psychology movement. Over the last decade positive psychology has developed into a thriving subdiscipline which offers methods of intervention, assessment, and theory for the promotion of human flourishing. Counselling psychology benefits from positive psychology in reconnecting with its original core values and assumptions about human nature.

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