

# Counseling Clinical Case Excerpts Of The Unknown

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## ABSTRACT

In educating human service practitioners, client cases are a staple in the pedagogy of practicing and acquiring counseling skills. Part of the learning is attunement to the client's presenting problem, processing of feelings, assessment and intervention. While identification of feelings is a core skill, the unknown factor within a client's situation can be overlooked especially in situations where there is no concrete answer. An unknown outcome can be challenging for the client as well as the naïve practitioner. Excerpts, that highlight an unknown factor, can serve to assist practitioners in their recognition of this unique feeling, and acquiring the intervention skills that will help the client to regulate their emotions through tolerance.

**Key Words:** counseling, unknown, case studies, empathy, tolerance

## 1. INTRODUCTION

Within counseling courses, curriculum offers specific empathy skills which support the concept of "starting where the client is" (Heller & Northcut, 2002, p.197). The practitioner is instructed to provide empathy, as the leading response, for the feelings the client is experiencing, rather than soliciting advice and solutions (Rogers, 1957; 1980). The latter can occur, especially if the client's situation contains elements of an unknown factor for which s/he seeks resolution. In fact the naïve practitioner may overlook tenets learned in lectures, texts and role-play exercises and not realize that empathy for the "unknown" is the option. When practitioners focus on solutions, rather than the feelings associated with the unknown, clients may believe they have not been "heard"; nor are they taught the skills to manage and regulate their challenging, and often overwhelming feelings of the unknown. Therefore case studies that highlight an unknown factor, rather than those geared toward basic empathy practice, or case management, are essential instilling in practitioners with the skills to decipher important and significant latent feelings generated by this intense and often ignored feeling.

## 2. DEFINING THE UNKNOWN

Perhaps the most difficult feeling, for humans to experience, is the unknown since an outstanding resolution can be difficult to tolerate (Morrow, 2007). Spiritual leaders have stated love and fear are the only emotions that exist (Kurus, 2002; Walsch, 2010) with "the oldest and strongest kind of fear is fear of the

unknown" (Lovecraft, 1927). This includes: Fear of losing someone, their love through rejection; fear of being powerless where one feels unsafe and vulnerable; fear of losing control of oneself and losing it to others; fear of not being seen as valuable by being overlooked or unappreciated (Hubpages, 2012). It occurs in many situations, from the beginning of life, when an infant cries, unknowing if the desire for nourishment will be satisfied, since differentiation between the world and self has yet to occur (Freud, 1957) -to the individual with a health concern that may challenge one's mortality. Unknowns can be whether one will be accepted to college, promoted, or ever fall in love. Whether a separated couple will reunite, a relative will eventually stop using drugs, or an upcoming court session will provide justice.

## 3. ATTEMPTS TO REGULATE THE UNKNOWN

At times humans become frustrated in their quest to create an emotional balance when it is not achieved in a preferred time. The ability to maintain patience, with an unresolved outcome, may be a challenge if the situation is fraught with emotions and dynamics that fuel ones impatience, including the actual delay of a decision. The unresolved, and the duration, are separate entities yet intertwined with unknown elements that are important for the practitioner to address. "Frustration cannot be defined by either the stimuli or the responses considered separately, but rather by the interaction of these two systems" (Henderson Britt & Janu, 1940, p.454). The client has not one, but two unknowns to regulate: 1. The unknown of ones preferred desires and hopes; 2. The duration of anticipation. Often people say: "I can accept whatever the outcome, what I can't tolerate is the waiting....if I know the outcome then I know what I am dealing with, but the waiting is unbearable." In essence humans have difficulty with the space created between the onset of the situation and the interval for resolution.

Humans naturally attempt to decrease distressful feelings and the unknown is no exception. They long for resolutions, answers, and solid facts to avoid tolerating negative feelings. They can experience mental states as an interference, or pause that needs to be quickly resolved, rather than attempting to regulate the emotion. The infamous pleasure principle theory explains how humans strive to find balance when physical and/or emotional discomfort arises (Freud, 1955). For example, if one is experiencing intense feelings behaviors, are productive or unproductive, are implemented to lessen the uneasiness. When feelings of the unknown surface, familiar pleasure seeking coping skills may not diminish the disturbance. Instead an advanced edict of regulating one's emotions, over the actual

sense of powerlessness, is needed to negate the underlying anxiety. If successful, aspects of pleasure, or normalcy, are sustained.

the client's observable emotions, they believe it lacks the internal cognitive components of a situation. They suggest the practitioner be knowledgeable in honing their craft via their multiple mental capacities, which are interrelated when a practitioner pays attention to client conversation. This includes multitasking a series of selective attention-where the practitioner quietly processes one aspect of the conversation while purposely ignoring others; divided attention-to be able to pay attention to two different aspects of the presenting material; and sustained attention, or the ability to maintain attention of components for an extended duration; attention switching, where the practitioner alters the focus to process more salient matters. Within these skills the practitioner learns to sustain and divide attention and is not diverted by their personal, internal, dialogue. If not, they can become sidetracked by being "caught up" in the story the client is presenting rather than listening for important latent content, which is the essence of the presenting problem. In fact, being non-judgmental, not over reacting, focusing, assessing non-verbal language, and not becoming seduced in solutions to the problem, can help the practitioner to withstand multiple distractions and diversions. The practitioner can then focus on the core of the distress, rather than the narrative. This is especially important if the practitioner is to uncover and identify the unknown that lies within.

The natural process is for the client to utilize the counseling sessions to describe their life situations. Expression of feelings, wishes and projections follow. The practitioner listens and responds by clarifying and summarizing (Nystul, 2006) what the client is presenting through responses that are related to the client's needs and goals (Elliott, Bohart, Watson, & Greenberg, 2011). They "put themselves in the client's shoes" and conjure, within, the feelings that the client might be experiencing (Donahue, 1997). Practitioners provide empathy, which is the suspension of judgment and bias (Clark, 2010). To understand the client's world, the practitioner tolerates the difficult feelings that arise in the client as well as in themselves—rather than avoiding or over identifying with the client's situations (e.g., crying in the session; disclosing personal information etc.)" (p.4). If the practitioner sets in motion endurance for the client's distress, the practitioner will have a greater chance of clarity and internal cognition; thus easily recognizing if a client is troubled at an unknown outcome. They disclose, or ask, what the client might be feeling and continue this inner experience technique throughout the session (Vivino, Thompson, Hill, & Ladany, 2009). If frustration seems to remain, the practitioner can begin to assess whether the unknown is at the core. Practitioners can decipher, by paying attention to their internal reactions to the client's level of emotions, as well as the client's responses to the empathy that have already been provided. With the former, the practitioner may realize they are asking a myriad of questions for which a viable answer to the client's distress has yet to be discovered. The practitioner feels spent from suggesting a number of interventions and comes close to the core with various replies; "Well it seems like you'll just have to wait on this one"; "This is complicated". Others may all together skim the issue, including steering the discussion to a different topic. But if the practitioner allows themselves to recognize there is no solution, and changing the subject is not clinically professional, a feeling of powerlessness can emerge. This is an important

#### 4. COUNSELING THE UNKNOWN

Greason & Cashwell (2009) suggest specific tenets for learning skills that are clinical in nature and parallel to uncovering the emotion of the unknown. While they support education that guides practitioners to respond to dynamic. The practitioner is now cued, or "induced" with the client's feeling of the unknown. The practitioner distinguishes the unknown as the fundamental feeling, and has the insight that all other feelings are secondary. The practitioner then uses their intuitive skill to help the client identify the sense of powerlessness associated with the unknown and begins appropriate interventions.

Those who are intolerant of uncertainty, and worry, tend to overestimate events that may not necessarily occur (Dugas, Freeston & Ladouceur, 1997). In treatment it is suggested the practitioner challenge these faulty perceptions and interpretations through cognitive reappraisal, where the client learns to regulate their emotions by altering the way they think about the situation (Gross, 1998). Dugas et al (1997) also advocates cognitive exposure, such as discussing with the client what the worst case scenario would look like. This can aid in the client's tolerance for uncertainty by unmasking, and then processing, the situation. Through this exercise the client realizes they can tolerate, or regulate, the associated emotional arousal.

Educating clients to reality test which feelings they do and do not have control over is essential for optimal coping in such situations. The Serenity Prayer, used by many self-help fellowships, guides this intervention: "God, Grant me the serenity to accept the things I cannot change. The courage to change the things I can and the wisdom to know the difference" (Niebuhr, 1943). The practitioner can present to the client the differences between wanting the resolution, or in some cases the reality that it may never be obtained. From this, clients can identify what type of situation they wish to control, followed by an assessment as to whether or not they have the power to do so. The reality of things they cannot change may entice an acceptance and a step towards integrating energy and efforts within, rather than ruminating on the external presenting problem. The client finally acknowledges the unknown as an arrested state; thus the formation of an altered, palpable emotion emerges and elicits frustration tolerance competence (Davis, Levine, Lench, & Quas, 2010). In addition, the inner peace that was originally wished by an outcome has a chance to exist *parallel to the unknown*. The client can now begin to establish some sort of emotional balance, even if it is just to tolerate the unknown.

In an attempt to teach practitioners to recognize the underlying feeling of the unknown, self-designed exercises with an unknown factor can assist. This includes practitioners recalling their own unknown experience, by reminiscing about a situation for which they did not have control over the outcome and resolution timetable:

#### 5. PARTICIPANTE CASE STUDY EXERCISE

##### Instructions:

1. Identify a past or current personal (not a client case) situation in your life when you did not have control over the outcome. Describe all details in 2-3 paragraphs and include what you wished the outcome would be.
2. Describe the worst outcome you imagined?

3. Indicate who, or what, was responsible for the ultimate outcome, since it was not you.
4. How long did you have to wait for the outcome to occur (or are you still waiting)?
5. Make a short list of the feelings and thoughts that surfaced as you wait/waited for the outcome.
6. How difficult was it to tolerate and manage your feelings of the unknown outcome?  
Very Difficult                      Somewhat Difficult  
Hardly Difficult
7. Circle the items on the short list of feelings (in #5) and thoughts that relate to the unknown aspect of the situation.
8. Next: Each participant will share their case with another participant who will listen and provide empathy *only* for the feelings and thoughts related to aspects of the unknown factor(s).

**Instructor/Post Exercise Discussion:**

1. How easy/difficult was it for the listener to not give advice and solutions?
2. How did the listener provide empathy for the unknown factor of the situation?
3. How can focus on an unknown, unresolved, factor be considered a valid intervention?
4. How can practitioners hone their skills to better assess the existence of an unknown factor when it is usually well hidden in the client's presenting problem?

**6. CONCLUSIONS**

Excerpts from practice that include client examples where there is a desire to change something, yet cannot, are essential for pedagogy that strives to present true to life counseling situations. Ironically, just like the infant who does not know if or when his/her needs will be met, adult's feelings of the unknown can also be a challenge when the focus is finding an answer when none exists. It is important for the practitioner to point out this tiresome effort and instead help the client increase their ability to tolerate the feeling of the unknown. This can be difficult to achieve, but the first phase for the practitioner is to assist the client in acknowledging its existence, process the impact, and then begin to guide the client towards cognitive coping skills that support tolerance. Professional development can complement this learning by conferencing cases for which the unknown is the core issue, followed by practitioner interventions that are coupled with the objective of an inner peace, co-existing with the unknown factor.

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