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The classic *Helping Skills* excels and improves with every edition! This new iteration brings more about cultural competence, case conceptualization, and clinician self-awareness. Hill and colleagues provide stellar training in foundational helping skills while simultaneously reflecting the complexity and beauty of the therapeutic enterprise.

–JOHN C. NORCROSS, PhD, ABPP, DISTINGUISHED PROFESSOR OF PSYCHOLOGY, UNIVERSITY OF SCRANTON, SCRANTON, PA; AUTHOR/EDITOR OF *PSYCHOTHERAPY RELATIONSHIPS THAT WORK* AND *PERSONALIZING PSYCHOTHERAPY*

As the delivery of mental health care is changing at the speed of light, acquiring helping skills remains a crucial key to effective practice. And while most classic books stay on a bookshelf, this one will be constantly in the hands of trainees, practitioners, and supervisors.

–LOUIS G. CASTONGUAY, PhD, LIBERAL ARTS PROFESSOR OF PSYCHOLOGY, THE PENNSYLVANIA STATE UNIVERSITY, UNIVERSITY PARK, PA

The most helpful book about psychotherapeutic helping keeps getting better. The authors have not only discussed in depth the importance and integration of three significant, common goals of therapy—exploration, insight, and action—but have done so in an exemplary "experience near" fashion, providing multiple clinical examples, questions, cultural perspectives, research evidence, and reflections that will surely improve the ability and self-awareness of all those learning to do this increasingly important work.

–BARRY A. FARBER, PhD, PROFESSOR, PROGRAM IN CLINICAL PSYCHOLOGY, TEACHERS COLLEGE, COLUMBIA UNIVERSITY, NEW YORK, NY

Helping Skills is an invaluable resource for those training students in basic counseling skills, whether at the undergraduate or graduate level. Drs. Hill, Chui, and Gerstenblith, well-regarded experts in this area, effectively integrate conceptual and empirical literature while remaining keenly attuned to the ever-evolving professional demands of those working in the mental health field. Hill and colleagues also offer highly accessible examples, illustrations, and practical activities to demonstrate effective use of the skills.

–SARAH KNOX, PhD, PROFESSOR, COUNSELOR EDUCATION AND COUNSELING PSYCHOLOGY, MARQUETTE UNIVERSITY, MILWAUKEE, WI

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My students love learning helping skills! This book brings exploration, insight, and action to the next level as goals and intentions rather than stages. The helping skills model is more versatile than ever and includes thoughtful attunement to cultural competence, humility, and critical consciousness. Students will appreciate the focus on therapeutic change processes and skills. Instructors will prize the focus on therapist self-awareness, ethics, and the therapeutic relationship. The learning activities and invitations for self-reflection will appeal to everyone. The authors' research has demonstrated the value of learning by doing, and this book makes learning come alive.

–HEIDI A. ZETZER, PhD, TEACHING PROFESSOR, DEPARTMENT OF COUNSELING, CLINICAL, & SCHOOL PSYCHOLOGY, UNIVERSITY OF CALIFORNIA, SANTA BARBARA

Helping Skills is the indispensable text for teaching clinical skills to any helping professional. Hill's transtheoretical model seamlessly integrates current empirical evidence with clear, practical guidance for delivering effective helping skills at every level of training. Students love the readability of this text, and the sixth edition's addition of self-reflection exercises further enhances the learning experience, preparing students to become skilled and ethical helpers.

–MELISSA GOATES JONES, PhD, ASSOCIATE PROFESSOR OF PSYCHOLOGY, CLINICAL PSYCHOLOGY PROGRAM, BRIGHAM YOUNG UNIVERSITY, PROVO, UT

Helping Skills, Sixth Edition is an essential resource for budding professionals in the counseling field, offering a wealth of updated interactive features that enhance learning. Through a rich blend of updated case examples, self-reflection exercises, and role-play activities, this edition embraces a broad spectrum of diversity and provides a practical, hands-on approach to developing effective helping skills. With its innovative shift from a stage-based to a goal-based model and incorporation of the latest empirical research, this text expertly guides students in tailoring interventions to meet the unique needs of their clients.

–TONY ROUSMANIERE, PsyD, PRESIDENT AND PROGRAM DIRECTOR, MARRIAGE AND FAMILY THERAPY PROGRAM, SENTIO UNIVERSITY, LOS ANGELES, CA

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This book just gets better and better with every edition! It provides a beautiful blending of theory and skills, just as psychotherapy requires such a seamless integration in practice. The authors invite students of all levels to engage in the exciting process of becoming a helper through critical reflection, intentional practice, and an openness to the complexity that is counseling and psychotherapy.

–ELIZABETH NUTT WILLIAMS, PhD, PROFESSOR OF PSYCHOLOGY,
ST. MARY'S COLLEGE OF MARYLAND, ST. MARY'S CITY;
FELLOW OF THE AMERICAN PSYCHOLOGICAL ASSOCIATION

Hill is a master at distilling decades of psychotherapy research into concepts and skills that are understandable for beginner to intermediate students of counseling. The wide-ranging applicability of her common factors approach, backed by her deep knowledge of the field, is why I use this text with undergraduate psychology majors, doctoral students, and students in allied health care professions. It is remarkable how much each level of learner benefits from this one text.

–DEBORAH POLLACK, PhD, ASSOCIATE PROFESSOR OF PSYCHOLOGY,
UTICA UNIVERSITY, UTICA, NY; CLINICAL ASSISTANT PROFESSOR,
SUNY UPSTATE MEDICAL UNIVERSITY, SYRACUSE, NY

Engaging, comprehensive, and accessible, *Helping Skills* integrates theory, research, and clinical examples to stimulate beginning helpers' development. This field-tested, evidence-based approach empowers helpers to grow through scaffolded role-plays, challenging questions, and reflective exercises. It is the preeminent method of skills training in counseling and psychotherapy.

–JANET L. MUSE-BURKE, PhD, PROFESSOR, DEPARTMENT OF PSYCHOLOGY AND COUNSELING,
MARYWOOD UNIVERSITY, SCRANTON, PA

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PREFACE: OVERVIEW OF THE HELPING SKILLS MODEL AND UPDATES TO THE SIXTH EDITION

My (C. E. H.'s) interest in training helpers started in my first year of graduate training with my initial course in helping skills. The course changed the direction of my life, giving me confidence in helping others, and I have been teaching, researching, and writing about helping skills since that time.

When I began teaching helping skills courses, I felt frustrated in trying to find the right textbook that embodied my philosophy of helping and addressed the needs of my students. Few, if any, helping skills texts integrate the importance of affect, cognition, and behavior in the process of change. Some texts concentrate on feelings while disregarding the role of challenge and action in facilitating critical life changes, whereas others highlight insight at the expense of affective exploration and behavior change. Several popular texts focus solely on a problem-solving approach, which neglects the critical role of affect in helping clients express and understand problems in their lives. Other books do not provide the crucial theoretical and empirical foundation for helping skills. And yet other books do not stress self-awareness, cultural attunement, clinical intuition, and the need to conceptualize clients. To address these limitations, we used knowledge garnered from our experiences as students, teachers, therapists, supervisors, and researchers to write a book about helping skills focused on exploring thoughts and feelings, gaining new insights, and moving toward positive behavior changes, all within the context of theory, empathy, self-awareness, cultural humility, clinical intuition, and case conceptualization.

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BRIEF OVERVIEW OF THE HELPING SKILLS MODEL

This text introduces an integrated model that is grounded in practice, theory, and research. Grounding the model in practice and theory is important in order to take advantage of the work of accomplished clinicians and theoreticians who have articulated a rich theoretical knowledge base. Rogers, Sigmund Freud, Bowlby, Milton Erikson, Mahler, Skinner, Ellis, Beck, and others have provided brilliant insights into the nature of human beings, the mechanisms of change in counseling and psychotherapy, and the techniques for assisting individuals to achieve their potential and accomplish their goals. We also ground the model in research, as the theories need to be tested to verify their validity and to continually adapt and improve our understanding of what works.

The three goals of the helping skills model are facilitating

- exploration,
- insight, and
- action.

Exploration is based on client-centered theory (e.g., Rogers, 1942, 1951, 1957, 1959). Psychoanalytic and interpersonal theories (e.g., S. Freud, 1940/1949; Teyber, 2006; Yalom, 1980) form the foundation for insight. Action is based on behavioral and cognitive theories (e.g., Beck, 1976; Ellis, 1962; Goldfried & Davison, 1994; Kazdin, 2013; Watson & Tharp, 2013). We integrate these major theories into our model because all have proven to be effective in helping clients (see Wampold & Imel, 2015).

The helping process can be conceptualized as involving moment-by-moment interaction sequences. Helpers have intentions for how they choose to work with clients. These intentions are based on what they know about clients and what they hope to accomplish with clients at a given time. With these intentions in mind, helpers select verbal and nonverbal skills with which to intervene. In turn, clients react to the skills in ways that influence how they then behave toward and respond to helpers. Thus, helping involves not only the overt behaviors but also the cognitive processes of helpers (i.e., intentions) and clients (i.e., reactions). Awareness of intentions assists helpers in selecting effective skills. In addition, attention to the clients' reactions to the helpers' skills can aid helpers in planning subsequent skills.

GOALS FOR THIS BOOK

We have several goals for this book. After reading it, students should be able to articulate the principles of an integrated model of helping skills as well as the theoretical and research foundations underlying this model. They should demonstrate an understanding of the interactional sequences of helping, including the intentions that helpers have for interventions with clients, the helping skills associated with these intentions, the possible reactions and behaviors likely to be demonstrated by clients, and the means through which helpers

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evaluate the skills they use. In addition, students should gain a better understanding of themselves in relation to becoming helpers, including how their cultural identities inform who they are as helpers and how they interact with clients, their thoughts about and motivations for helping, and their strengths and areas for continued growth. Finally, we hope to instill enthusiasm for the process of helping others—an enterprise that can provide countless challenges and rewards.

TARGET AUDIENCE FOR THIS BOOK

This book has been used extensively in both undergraduate- and graduate-level classes. The majority of students at the undergraduate level are in psychology or education classes, and most pursue careers in mental health professions (e.g., social workers, psychologists), medical professions (e.g., doctors, nurses, dentists), law, business, human relations, and clergy. At the graduate level, most students are in master's or doctoral programs in counseling, clinical, or school psychology; counseling education; or social work. *Helping Skills* has also been used in training peer counselors and medical residents, and it has been translated and used around the world, so it can be adapted to many situations, cultures, and careers. Many of our students have said that everyone should learn the helping skills (especially the exploration skills) to improve their interpersonal relationships, so they are not just skills used in helping settings but also in everyday life. Because most people seek help first from friends, family, and clergy, it seems important to teach these skills widely.

When master's degree, doctoral degree, or medical students use our book, we recommend supplementing it with other primary readings. In this way, students can gain more in-depth knowledge about the theories and applications. We also strongly recommend that students undertake their own personal psychotherapy to learn more about themselves and experience firsthand what it is like to be a client, which in turn will give them new insight into helping others.

WHAT THIS TEXT DOES NOT PROVIDE

It is beyond the scope of this book to provide information about counseling children, families, or clients who have serious emotional or psychological difficulties. Although the helping skills taught in this book are crucial and form the foundation for work with all these groups, helpers will need specialized training before they are qualified to work in those contexts. In addition, this book provides only the basic foundations for learning therapeutic skills and all those who hope to practice counseling and psychotherapy will need additional training.

Furthermore, we do not address assessment and diagnosis of psychological problems or identify characteristics of psychopathology, which are two important topics that require additional training after developing a working

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knowledge of basic helping skills. All helpers, even those working with healthier populations, should be able to recognize serious psychological disorders to aid them in making appropriate referrals and work only with clients whom they have been trained to assist.

CHANGES IN THE SIXTH EDITION

The major change in the sixth edition is the addition of two coauthors: Harold Chui and Judith A. Gerstenblith. I (C. E. H.) am delighted to have them on board because they have different cultural identities than I do, such as age, race/ethnicity, gender, and religion/spirituality. They bring new insights and experiences to the forefront and help us to continue evolving as we think about helping skills.

A major shift from the first five editions involves changing from thinking of helping skills in terms of a three-stage model to thinking of it as a model with three goals (facilitating exploration, insight, and action). A stage model implies that movement is linear across the three stages, whereas in our experience, there is fluidity among the three goals. Our experience (although more research is needed to verify) is that exploration occurs throughout treatment, whereas insight and action are needed only at specific times. Thus, exploration is the basic stance throughout the helping process with occasional bursts of insight and action. To aid helpers in moving more flexibly among exploration, insight, and action, we discuss goals/intentions (e.g., to support, to promote awareness, to facilitate change) with several associated skills for each goal.

Also included in this edition are multiple new pedagogical features, including

- updated introductory examples with reflection questions at the beginning of each chapter;
- learning objectives;
- self-reflection exercises that encourage students to consider their goals, values, and perspectives as aspiring helpers;
- solo and group activities, including helper–client role-plays, that allow students to practice essential helping skills;
- updated research summaries;
- revised reflection questions at the end of each chapter; and
- an updated glossary of key terms.

Another major change is adding new empirical evidence. We have continued to conduct research studies on the skills, and the findings allow us to rethink our current knowledge. For example, learning that on average the effects of reflections of feelings, questions, and interpretations are minimal at best (see Hill & Norcross, 2023) has enabled us to reexamine our thinking about the use of the skills. Rather than claiming that each skill has specific effects, we focus more on how each client reacts to the various skills at different moments. Thus, therapists need more training to be responsive to individual client needs rather than assume that all skills are equally helpful with all clients.

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Relatedly, we have conducted more research on training, and it has been quite informative. We have learned, for example, that it is hard to predict who will benefit from training, suggesting that perhaps anyone who is motivated to learn can benefit from training (Hill et al., 2016). We also found that students maintain their skills five years after taking a helping skills course, especially if they continue using the skills in their professional work (Hill et al., 2020). In addition, we have found that the student cohort in the helping skills lab (Chui et al., 2021; Keum et al., 2018) and who the trainer is (Ahn et al., 2021) make a difference. We have also tried to identify additional potential outcomes of training, including ethnocultural empathy (Lu et al., 2020).

We have also provided more coverage of culture throughout the volume. Although there is not much research specifically related to culture and individual helping skills, we know a lot in general about culture and its influence on people, so we tried to incorporate more of this. Accordingly, we have also updated examples to be more inclusive of a wider range of identities of helpers and clients. Note that examples in the book either are based on real people (with names and other identifying characteristics changed to protect their identities) or are completely fictitious.

The section on ethics has been moved from Chapter 1 back to its place as a separate chapter (as in the fourth edition) because of the need to teach ethics early on in training. We moved the section on action skills back to a separate chapter (as in the third edition) so that we could focus more on these separate skills. References are updated throughout, and we added more current empirical evidence. Finally, as always, we have endeavored to clarify and offer examples to illustrate ideas as much as possible.

We have also continued to receive extensive feedback from students and helping skills instructors about what they find helpful. The model is living and breathing in that we continually find ways to adapt and improve it, incorporating research, clinical experiences, and feedback.

RESOURCES

As with the previous editions, this sixth edition of *Helping Skills* offers web-based instructor and student resources (https://www.apa.org/pubs/books/helping-skills-sixth-edition). The instructor resources include a transition guide from the fifth edition to the sixth edition; sample syllabi for undergraduate- and graduate-level courses; PowerPoint lecture slides for each chapter, tables, figures, and exhibits from the book; and a test bank with a set of multiple-choice, short-answer, and essay questions for each chapter. The student resources include chapter summaries, a practice quiz for every chapter, additional practice exercises, a dozen web forms that are referred to throughout this text to assist students in evaluating their helping skills and helper–client sessions, an emotion words checklist—a downloadable version of this edition's Exhibit 9.1—that students have found helpful to have a printed version for easy reference, 15 possible labs that contain exercises and reflection questions, and a helping sessions packet for the labs.

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In addition, three videos are currently available to demonstrate the model. *Helping Skills in Practice: A Three-Stage Model* was created to illustrate exploration, insight, and action with a client struggling with concerns related to childhood, eating, and self-esteem. *Dream Work in Practice* was created to illustrate exploration, insight, and action with a client who had a troubling recurrent dream. *Meaning in Life: A Case Study* was created to illustrate how to work with meaning in life from the perspective of the helping skills model. All three videos are available from the American Psychological Association (https://www.apa.org/pubs/videos/index). In addition, we are very excited to be making a new video, *Helping Skills in Therapy* (Hill et al., in press), for the sixth edition. Look for more information forthcoming about it.

SUPPORTING STUDENTS' DEVELOPMENT AS HELPERS

Finally, we sought to write a book that both supports students' development as helpers and provides challenges to facilitate the development of helping skills. Becoming an effective helper is an exciting and challenging process. For some, this undertaking can be life-changing. Many students are fascinated by the process of becoming helpers, and they pose thoughtful questions as they struggle to learn the skills, develop confidence in their ability to assist others, and learn about themselves. Because the focus of this book is on helpers (not clients), we pose many questions that relate to the helpers' development and concomitant feelings and thoughts.

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1

Introduction to Helping

Nothing in life is achieved without effort, daring to take risks, and often some suffering.
—ERICH FROMM

Angeli was a stellar student and athlete.[1] She was president of her high school class and had been accepted into an elite university in the United States. By any standard, she was an exceptional and talented individual with much promise. However, after arriving at college, Angeli began to feel sad. Much to the dismay of her family, teachers, and friends, she lost interest in interacting with others, studying for her classes, and attending track practice. Angeli's track coach encouraged her to meet with Steve, who helped Angeli explore her feelings and gain understanding of the issues underlying her sadness and inactivity. The helping relationship enabled her to express, struggle with, understand, and work through the feelings of inadequacy, loneliness, and loss that emerged when she left home for college.

Reflection Questions

- When you have felt sad; what were the reasons?
- What helped you begin to feel better?

[1]*Note:* All examples in the book either are based on real people (with names changed to protect their identities) or are completely fictitious.

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Helping Skills: Facilitating Exploration, Insight, and Action, by Clara E. Hill, Harold Chui, and Judith A. Gerstenblith
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LEARNING OBJECTIVES

- To learn the definition of helping and distinguish it from counseling and psychotherapy
- To understand more about why some people aspire to become helpers
- To learn about the structure of this book

As you read about Angeli and think about what it would be like to be her helper, you may have contradictory thoughts and feelings. You may feel confident that you could help someone like Angeli because you have supported friends and family members struggling with similar problems. But you may also feel anxious about how to specifically help her explore her feelings, understand the changes she is experiencing, and increase her motivation.

If you are interested in learning more about the skills that could help you work with someone like Angeli, you have come to the right place. The first purpose of this book is to provide you with a theoretical framework that you can use to approach the helping process. The second purpose is to teach you specific helping skills to use in sessions with clients like Angeli to help them explore, gain insight, and make changes in their lives. The third purpose is to help you begin to think like a helper, so that you can be intentional with your skill use and adjust your responses based on client reactions. The fourth purpose is to help you become more aware of your own thoughts, feelings, and behaviors, and how these might impact clients.

In this chapter, we define helping and review its effectiveness. We then describe what leads people to seek help. Then, we talk about the importance of practicing the skills to become a better helper. Finally, we describe the organization of the book and discuss how it can best be used.

Welcome aboard! We hope you enjoy learning and using helping skills as much as we have.

WHAT IS HELPING?

Helping is a broad and generic term that includes the assistance provided by a variety of individuals, such as friends, family members, counselors, psychotherapists, mental health professionals, and human service providers. Although there are many kinds of assistance that can be provided (e.g., instrumental help, such as driving someone to the airport), in this book, we focus primarily on verbal skills related to listening and encouraging exploration of social-emotional concerns.

Within the broad construct of helping are the narrower fields of counseling and psychotherapy, which are reserved for people who engage in further education and credentialing to become mental health professionals. Similarly, Wampold and Imel (2015) defined **psychotherapy** as a

> primarily interpersonal treatment that is a) based on psychological principles; b) involves a trained therapist and a client who is seeking help for a mental disorder,

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> problem, or complaint; c) is intended by the therapist to be remedial for the client disorder, problem, or complaint; and d) is adapted or individualized for the particular client and [their] disorder, problem, or complaint. (p. 37)

In this book, helping refers to one person assisting another in exploring feelings, gaining insight, and making changes in their life. Throughout this book, the term **helper** refers to the individual offering assistance, and the term **client** refers to the person asking for help. Helpers and clients work together to achieve the desired outcomes, with helpers guiding the process and clients deciding what, when, and how they want to change. Note that this process is not the same as a physically sick person going to a medical doctor and hoping to be cured by the expert, but rather it is a **collaboration** between a client, who is the expert on themselves and has the agency to change, and the helper, who listens and attempts to help the client with a problem in living.

When we write in this book about trainees who are learning helping skills in an academic class by practicing with each other or with volunteer clients, we refer to the process as helping. In contrast, when we talk about clients seeking help from trained and licensed professionals, we use the terms **counseling** (or **counselor**) and psychotherapy (or therapist, **psychotherapist**, or **counselor**). In the United States, counselors tend to be people trained and licensed at the master's degree level (e.g., school counseling), whereas psychotherapists tend to be people trained and licensed at either the master's degree (e.g., clinical social work, mental health) or doctoral degree (e.g., clinical, counseling, or school psychology) levels. It should, however, be noted that licensing requirements differ across regions, and students interested in entering different professions should consult with their local accreditation bodies.

Counseling and psychotherapy are also sometimes differentiated by length of treatment, such that counseling often has fewer sessions than does psychotherapy. Clients also sometimes differ, in that counseling is more often used with relatively higher-functioning individuals who have issues with adjustment during life transitions (e.g., graduation, loss of a loved one), whereas psychotherapy is more often used with those who have longer-standing unresolved conflicts or psychopathology. We note that research has not shown differences in outcome related to type of degree or level of training (Wampold & Imel, 2015), so these terms and distinctions often reflect turf wars rather than demonstrated competencies.

Helping tends to differ from everyday conversation with friends. Whereas conversations with friends ideally involve both people equally sharing their problems and listening (50–50), helping typically involves one person sharing their problems and the other person listening and supporting (more like 80–20). But interestingly, many of the communication skills learned early in life with friends and family are also used in helping relationships. So, you can build on what you have learned in your personal relationships to help you refine your skills and become more aware of your impact so that you can be more effective in helping relationships (and hopefully in personal relationships too).

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IS PSYCHOTHERAPY EFFECTIVE?

We know of no literature on the effectiveness of helping as just defined. In this next section, we instead rely on data related to the effectiveness of psychotherapy. Researchers have overwhelmingly concluded that psychotherapy is generally helpful. Most clients improve by the end of psychotherapy. Specifically, Wampold and Imel (2015), in their review of the literature, found that the average client in psychotherapy was psychologically healthier after treatment than were 79% of untreated individuals (when there was random assignment of clients to treatment versus a wait-list control). In addition, neuroimaging research has shown the positive effects of psychotherapy (psychodynamic, interpersonal, and cognitive behavior therapy) on brain function (Barsaglini et al., 2014). Wampold and Imel concluded that "the efficacy of psychotherapy now has been firmly established and is no longer a subject of debate" (p. 82).

Once researchers established that psychotherapy in general was helpful, they began to examine the relative effectiveness of different types of therapy. To date, hundreds of studies have compared different types of treatment (e.g., client-centered, psychodynamic, cognitive behavior, experiential), but no one type of bona fide therapy has been found to be more effective than others (Wampold & Imel, 2015). In other words, as long as a therapy is a sanctioned form of treatment rather than a fringe or nonmainstream form of treatment, these results apply. Similarly, no differences have been found between individual and group treatments (Burlingame & Strauss, 2021). The findings from this area of research have been humorously summarized using the dodo bird verdict from *Alice's Adventures in Wonderland:* "Everyone has won and all must have prizes" (Carroll, 1865/1962, p. 412).

It is probably hard to understand how therapies that are so different can all lead to similar outcomes. Many reasons have been proposed for the lack of differences in outcome across approaches. Currently, the most popular explanation is that factors involved in all types of mainstream approaches (i.e., common factors) lead to positive outcomes. Frank and Frank (1991) discussed six factors that are common across psychotherapies: the therapeutic relationship, instillation of hope, new learning experiences, emotional arousal, enhancement of mastery or self-efficacy, and opportunities to practice what one learns in therapy in life outside. Thus, although therapists from different orientations espouse different philosophies and use somewhat different skills, the most important factors may be what therapists do in common.

Another explanation for the lack of differences among psychotherapeutic approaches is that client and therapist factors as well as the therapeutic relationship explain more of the variance than do treatment types (Castonguay & Hill, 2017; Norcross & Lambert, 2019; Wampold & Imel, 2015). Thus, who the clients and therapists are and how therapists and clients collaborate with one another may be more important than the approach used (e.g., Is the client motivated? Is the therapist empathic? Is the therapeutic relationship good enough?). Importantly, each therapist and client is different so therapy is different for each pairing.

Another explanation is that because mind and body are completely intertwined, a change that begins at one level (e.g., emotions) branches out to other

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BOX 1.1 | **RESEARCH HIGHLIGHT: EFFECTS OF HELPING SKILLS TRAINING**

In studying the effects of helping skills training, Hill, Roffman, et al. (2008) asked two main questions: Do students actually learn the helping skills? What predicts who benefits most from training?

In this study, undergraduate students in semester-long helping skills classes (involving weekly 2-hour lecture/skills demonstrations along with weekly 2-hour labs where students practiced skills). After each weekly lab session, they rated their confidence in being able to use the skills. At the beginning and toward the end of the semester, student helpers completed 20-minute helping sessions with classmates as volunteer clients; both helpers and clients rated the helpfulness of sessions afterward. At the end of the semester, students reported their current self-efficacy for using the skills as well as retrospectively rated their self-efficacy before the course.

Students reported increasing levels of confidence while learning exploration skills, but decreasing confidence while learning insight skills, and increasing confidence while learning action skills. In the second as compared with the first helping session, helpers used more exploration skills, were more empathic, spoke less, and were rated as having better sessions.

levels (e.g., behaviors), and vice versa. Whether change starts with emotions, thoughts, or behaviors, it may not make much difference. For example, experiential therapy might heal through allowing deep immersion into feelings, which then leads the client to change thoughts and behaviors. By contrast, cognitive behavior therapy might begin with changes in thoughts and behaviors, which in turn lead to a change in emotions.

Yet another explanation is that our research is still in a rather primitive state and that our tools for examining the process and outcome of therapy are not sophisticated enough to pick up the differences between approaches, levels of experience, or type of training. Ideally, we will advance in our methodologies so that we can more adequately investigate the mechanisms of change for different types of clients and that will help us develop more personalized treatments.

WHEN DO PEOPLE SEEK HELP FROM OTHERS?

Two factors seem to be necessary for people to seek help (Aguirre Velasco et al., 2020; Gross & McMullen, 1983; Gulliver et al., 2010). First, people must become aware that they are in pain or facing a difficult situation and must perceive their feelings or situations as being problematic. Obviously, the perception of pain varies from person to person, such that what is unbearable for one person may be tolerable for another person. Second, the pain must be greater than the perceived barriers to seeking help. Some barriers involve practical considerations, such as the time or money required to obtain help, whereas others are emotional

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and include fears about exploring problems deeply or concerns about stigma related to seeking help.

Many people hesitate to seek professional help (Gross & McMullen, 1983) because they feel embarrassed or ashamed about asking for assistance or believe that seeking help constitutes emotional weakness or inadequacy (Shapiro, 1984). Some Americans, for example, believe that individuals should rely solely on themselves and that all problems should be solved individually. Because it does not fit gender-norm stereotypes, many men do not seek help (Pederson & Vogel, 2007). There are many ethnic communities, communities of color, youth, and people working in the military and health professions who do not seek help because of stigma (Clement et al., 2015). Similarly, some people are concerned that they will be labeled mentally ill and subjected to negative stereotypes associated with this label (Clement et al., 2015; Hill et al., 2012; D. Sue et al., 1994).

Some people are concerned about talking with others because they feel that no one else can possibly understand their situation (e.g., Thomas thought that no outsider could understand his experience growing up in a religious cult). Others fear a punitive response or a value judgment regarding their thoughts, feelings, or actions (e.g., Candace felt that she would be judged for having had two abortions). Some clients may be hesitant to seek therapy because they are concerned that the stigma associated with receiving therapy could have negative ramifications for obtaining insurance or employment in the future.

For example, Sunny came to her first session of psychotherapy because she was experiencing multiple stressors: her mother had committed suicide 3 years earlier, her sister had been diagnosed with depression, she was failing her courses (previously, she had been an A student), and her first serious boyfriend had broken up with her. For some time, Sunny had felt that she should handle her problems by herself because she feared what others might think of her if they knew that she was seeing a therapist. Moreover, she was on a limited budget and was reluctant to pay for therapy. However, Sunny had begun to feel that she could no longer cope with her problems by herself. Her brother had gone to a therapist and felt better, so she thought that maybe a therapist could help her. Eventually, Sunny sought help because she was in pain and believed that the potential benefits associated with therapy (e.g., emotional support, assistance with coping) outweighed the costs (e.g., financial expense, perceived stigma).

Support from friends and family can sometimes provide the encouragement individuals need to contact trained mental health professionals (Aguirre Velasco et al., 2020; Gourash, 1978). For example, Joe was reluctant to seek help after his wife of 40 years died. His friends and children encouraged him to attend a support group for adults who had lost their partners. Although initially reluctant, Joe was so upset about his loss that he agreed to participate in the group sessions if his daughters would accompany him. The support his family and friends provided enabled Joe to access the help he needed.

Helpers can work to change negative attitudes about seeking professional psychological assistance in our society by seeking help themselves and encouraging others to seek help when needed. We can also work to initiate and support legislation for additional mental health benefits and educate the public by

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publicizing information about mental health treatments. Finally, we can do research to discover more about the facilitators and barriers to seeking help and the process and outcome of helping endeavors and disseminate these research findings to the public.

ON BECOMING A HELPER: COMPONENTS OF BEING AN EFFECTIVE HELPER

"Wannabe helpers" often have an inclination toward helping early in life. They might have taken on a helping role as a child or during their teenage years. Friends and family might have sought them out because they were good listeners. They usually have emotional intelligence, a passion for helping others, and intellectual curiosity about people. In their role of helping others, they often have learned communication skills that enable them to be trustworthy. These early experiences are an excellent starting point for becoming a helper.

This natural inclination can be augmented by learning and practicing helping skills until they become an integral part of oneself, even when those skills may initially feel awkward and forced. Many effective helpers have compelling stories about their initial attempts at assisting others. For example, when Sionag first started studying helping skills, her father was undergoing heart surgery. She spoke with him every day and asked him how he was feeling. After weeks of this, he asked her whether she really wanted to know how he was feeling. "Finally!" she thought, "He'll share his innermost feelings with me." Her father said he was feeling as though he liked her a lot more before she began studying helping skills.

Your friends and family may have similar reactions as you begin to learn helping skills. This feedback may initially be discouraging, but it may help to know that most effective helpers practice these skills for many years before comfortably integrating them into their interactions with clients. In fact, some helpers discover that during the process of becoming a helper, their skills and confidence seem to get worse before they get better. This down-and-up pattern makes sense given that trainees learn that not all their old communication styles work, and they feel temporarily awkward until the new patterns become integrated into their own personal style. Similarly, Goldfried (2012) talked about how, when learning a new behavior, people move from **unconscious incompetence** (i.e., they are not aware of what they do not know or cannot do) to **conscious incompetence** (i.e., they become aware that they are not very good at the skills, and thus their confidence dips) to **conscious competence** (i.e., they become skilled but behave in a self-conscious manner) to **unconscious competence** (i.e., the skills recede into the background, and they have increased self-efficacy).

In addition to the natural inclination and knowledge of skills, helpers must be willing to look inward and strive for self-awareness about how they come across to others. A subset of self-awareness is cultural awareness, such that we are aware of our biases and expectations based on cultural values and experiences. In Chapter 3, we describe self-awareness as both a trait (i.e., self-knowledge and self-insight about general personality characteristics or motivations) and a state

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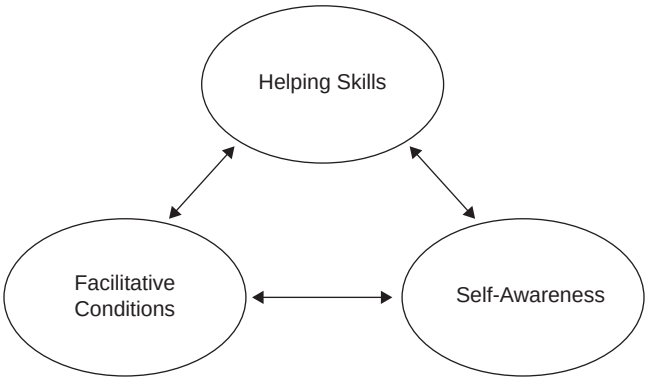
FIGURE 1.1. Components Needed for Effective Helping



(i.e., an in-the-moment understanding of what one is feeling and perceiving). In Chapter 4, we focus on cultural awareness, given the importance of culture in terms of influencing the formation of our worldviews. Self-awareness, including cultural awareness, is crucial so that helpers know what is going on inside themselves and can then determine whether their reactions to clients are due to the clients or to their own internal reactions. Otherwise, helpers might act out on impulses and reactions of which they are unaware and unintentionally harm clients. Hence, self-awareness is a foundation for effective interventions.

Similarly, having a facilitative attitude toward clients is a necessary foundation of effective helping. A facilitative attitude includes empathy, warmth, genuineness, compassion, and a lack of judgment (see also Chapter 2). These facilitative conditions are not something that helpers possess generally but rather something that helpers feel in the moment toward a specific person.

In summary, based on natural inclinations and upbringing, some people are more oriented than others toward becoming helpers. These people then work to gain general self-knowledge about who they are as individuals and as helpers, and they work to become more skilled as helpers. Then, in sessions with clients, they work to become aware of their feelings and perceptions, and they strive to have a facilitative attitude toward clients (see Figure 1.1).

In other words, it is not enough just to know the skills, because skills implemented without self-awareness and a facilitative attitude would be noxious and unhelpful. Likewise, having just self-awareness and a facilitative attitude would be nice, but helpers also need to have skills to communicate and intervene effectively with clients. Thus, helpers need to have the skills in their repertoire to help clients, be self-aware so as not to inappropriately act out on their own needs and harm clients, and genuinely care about clients and convey empathy.

THE PROCESS OF LEARNING TO BE A HELPER

We have evidence that helping skills training is effective (Knox & Hill, 2021) in enabling students to learn the skills and become better helpers (see Box 1.1 for an example of a study about the effectiveness of helping skills training).

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Once researchers determined that training in general is effective, they moved to examining the effective components of training, relying on Bandura's (1969, 1997) theory about four elements that help people learn skills:

1. instruction
2. modeling
3. practice
4. feedback

Thus, people who want to learn helping skills need to gain some knowledge about the skills so that they know what they are and the underlying theory behind them (instruction), observe others who are helpful and see what they do (modeling), try out the skills in a variety of settings (practice), and receive feedback about what they are doing and what they can do better. Indeed, in a review of the helping skills training literature, Hill and Knox (2021) found evidence for the effectiveness of these four elements for helping skills training. As an example, in a series of studies of undergraduate helping skills classes (Chui et al., 2014; Hill, Spangler, Chui, & Jackson, 2014; Hill, Spangler, Jackson, & Chui, 2014; Jackson et al., 2014; Spangler et al., 2014), students consistently found that reading about helping skills, participating in lectures about the skills, observing therapists implementing the skills, practicing the skills, and receiving feedback about their performance were all helpful. They consistently, however, added that practice was the most helpful part of training. So, let's focus more on practice.

Practicing Helping Skills

Many students have said that when they read the textbook, the skills sound easy, but when they try to use the skills, they realize how difficult it is to use them effectively. Acquiring extensive knowledge about helping, although important (please do read the book!), is only the first step in your journey toward helping others. While reading the book, you need to try to apply what you have learned by practicing the skills (Knox & Hill, 2021).

It is important to take practice seriously. One student in a doctoral-level helping skills class said that in her master's-level class, the students did not take the practice seriously. There was a lot of nervous laughter, students felt awkward, and the instructor did not monitor them to make sure they were practicing effectively. Clearly, this was not effective practice (which entails the client talking about real problems and the helper seriously listening and trying to help). Every problem is important and deserves respect and attention.

After practice, it is important to reflect on what you learned through the practice. How did it feel to use the skill? How did the client respond? What worked? What did not work? How could you do it better the next time? The following sections describe the ways in which you can use this book to maximize your growth as a helper.

Individual Practice Exercises

Practice exercises provide helpers with the opportunity to think about and formulate responses to hypothetical client situations before practicing the skills in

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the lab setting. There are practice exercises included in each skills chapter in this book. Also, you can download additional practice exercises from the student resources section of the *Helping Skills* (6th ed.) webpage (https://www.apa.org/pubs/books/helping-skills-sixth-edition).

Group Practice Exercises

As mentioned previously, practicing helping skills with classmates is an extremely beneficial component of learning. The webpage for this book contains downloadable lab exercises (in the student resources section) so that beginning helpers can practice helping skills in dyads or small groups. These labs are ones that we have used over the years in both undergraduate- and graduate-level helping skills classes, so they have been tested and found to work (of course, instructors can modify labs to fit their own preferences and situations).

During labs, helpers practice the skills with peers who act as clients presenting real or role-played problems. Observers take careful notes and attend to the helper's ability to deliver a particular skill, so that they can provide feedback to the helper. Although observers are often also trainees new to the skills, not acting in the helper or client role frees them from having to respond spontaneously and allows them to think through the helping interaction from a different perspective. Experienced helpers can also be recruited as lab leader assistants to observe trainees' helping interactions and provide feedback. At the end of each lab session, students can think about their roles as helper, client, and observer, and their ongoing development as helpers.

Disclosure During Lab Exercises

The success of the lab experiences depends partly on the participants' willingness to reveal information about personal topics. Discussing personal topics is beneficial for two reasons. First, helpers have difficulty learning what is effective when clients are not responding genuinely. Second, clients often are unable to provide useful feedback to helpers about what is helpful and how the interventions feel if they are not discussing real problems; they are often more involved in making up their situation (and even feelings) in response to the helper's exploration than immersing themselves in the immediate experience.

As clients, however, we suggest that students disclose only about easy, safe topics. Disclosing about deep topics is inadvisable, even if you are comfortable with such disclosures, because your classmates may not be comfortable trying to help you, and it takes the focus away from the helper learning helping skills to the helper's anxiety about dealing with a difficult situation. At times, students might start talking about an issue they think is safe but then they become uncomfortable, either because of the depth of the topic or because they do not feel comfortable with the helper. We stress that students always have the right (without negative impact on their grade) to choose not to explore a particular issue further.

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At this point, it may be helpful to note that the *Ethical Principles of Psychologists and Code of Conduct* (American Psychological Association, 2017a, Standard 7.04) indicates that

> Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others. (p. 9)

This guideline was established to educate people about the perils of requiring disclosure. Although we recommend easy, safe, nondeep disclosure because it typically facilitates the training process, we urge both instructors and students to be alert for possible negative effects. If students are not willing to disclose personal information, it is better to role-play a hypothetical client. Students should not reveal whether the problem is role-played or real; in this way, no one ever knows whether the person is actually disclosing or whether the problem is role-played, thus preserving **confidentiality**.

Exhibit 1.1 lists topics that students have discussed in labs. Although a topic may be "safe" for many people, it may not be comfortable for an individual

EXHIBIT 1.1

Topics for Volunteer Clients to Talk About in the Labs

Ideal topics	Possible topics	Topics to avoid
Academic issues (e.g., studying, test anxiety)	Alcohol and drug use (but not abuse)	Fears about going crazy
Anxieties about learning helping skills	Autonomy–independence	Homicidal thoughts
Hobbies	Existential concerns (e.g., Who am I? What is the meaning of life, death?)	Politics
Major or career; future plans	Financial difficulties	Self-harm
Minor medical conditions	High school experiences	Serious family disputes
Nontraumatic childhood memories	Minor family problems	Serious medical conditions
Pets	Minor relationship concerns	Serious problems in romantic relationships
Problems at work	Moral dilemmas	Sex
Public-speaking anxiety	Physical appearance	Shameful feelings
Romantic relationships		Substance abuse
Roommate issues		Suicidal thoughts
Technology		Torture
		Traumas (e.g., sexual or physical abuse, rape, child abuse)

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student, so we encourage trainees to think about what they are willing to discuss. Students may want to refer to this list throughout the semester when a topic is needed for the lab exercises.

Confidentiality During Lab Exercises

Information shared in practice sessions is personal and should be treated in a confidential manner. Helpers should never disclose such information, especially without the permission of the client. Specifically, helpers should only discuss the material presented in helping sessions with their supervisors and classmates, and then only when it relates to developing their helping skills. When clients feel safe and trust their helpers, they typically respond by sharing personal information and becoming less guarded about their thoughts and feelings. Confidentiality of shared information thus provides a foundation for respectful interactions between clients and helpers (see an extended discussion of ethics in Chapter 5).

Benefits of Being a Volunteer Client

The primary focus of the lab experiences is on the helper learning the helping skills. However, students often report that it is beneficial to talk about their concerns when they participate in the client role. The experience of being a client often provides a firsthand exposure as to how it feels to be on the receiving end of the various helping skills. Moreover, students often develop empathy for their clients after having experienced what is involved in being a client. Being a client allows students to gain respect for the courage it takes for clients to share concerns with helpers. In addition, beginning helpers often report that watching their helpers demonstrate the helping skills teaches them about effective (and ineffective) helping techniques.

We stress, though, that being a client in practice helping sessions should not be used as a substitute for seeking counseling or therapy. Students experiencing personal distress should seek help from a trained and qualified counselor or therapist. University counseling centers or health services often provide counseling services for students at little or no cost and offer an excellent opportunity for students to learn more about themselves and address salient issues.

Problems Related to Practicing Skills With Friends During the Labs

Another important issue involves the recognition that problems can occur when practicing helping skills with classmates who are acquaintances or friends. During helping sessions, instructors can encourage students to pair up with partners who do not know each other. If this is not possible, it is a good idea for helpers to pretend that they know nothing about their friend and respond only to what the client overtly reveals during the helping session. Although it is challenging to discount relevant information, students in our classes have found it easier to be professional and use the skills if they consider only information provided in the practice helping session. For example, Nancy was practicing her helping skills with her friend, Katrina, who was bemoaning the fact that her partner had not called her in 2 weeks. Although Nancy knew

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that Katrina's partner had not called because Katrina had dated someone else, she focused only on Katrina's expressed feelings related to not having contact with her partner.

Providing Feedback to Peers

Providing feedback is an essential component of training (Knox & Hill, 2021). Helpers appreciate authentically positive feedback because it provides encouragement that they are on the right track. However, they also need and want feedback that helps them improve their helping skills, especially when they are unaware of the effects of their behaviors. Students often feel cheated if they consistently receive only positive feedback, yet also feel wounded if they receive too many critical comments.

Claiborn et al. (2002) recommended providing positive feedback first and then providing one piece of constructive feedback or giving sandwich feedback (positive–negative–positive). It is easier to change if you feel like you are doing something well, and it is less overwhelming and more feasible to focus on making one change at a time rather than trying to fix everything at once. In addition, feedback should be stated in behavioral terms (e.g., "You were looking away a lot and playing with your hair") rather than in broad and nonspecific terms (e.g., "You did not connect with the client"). Clear, concrete feedback gives helpers specific ideas for how to change. For example, the observer might say,

> You used good attending and listening skills; I particularly liked that you had good, steady eye contact, leaned forward while you were listening, and did not interrupt. One thing I noticed that you might think about, though, is that you asked a lot of questions in one speaking turn, making it hard for the client to know which one to respond to.

The best source of feedback is the client who experienced the helper's interventions firsthand and experienced the impact of these interventions. The next best feedback is from observers who have watched the practice session. It can also be beneficial for helpers to hear that people have different responses to the same intervention, thus emphasizing that there is no one right way to intervene.

Example of One Student's Experience in Helping Skills Lab

For her personal statement for graduate school, one student wrote about her experiences in her helping skills lab and gave permission to reprint it here. She provides an eloquent description of what a good lab experience can be:

> I explored my interest in the mental health field in depth during Basic Helping Skills, an upper-level psychology course at the University of Maryland, which delved into the theories and research in the field of counseling and psychotherapy. Every week, we would hone new abilities, such as phrasing open questions, developing insight and exploration skills, and integrating cultural awareness. During lab meetings, we would put the lessons into practice, taking turns role-playing as the therapist or the client—one student would present a difficult situation that they were currently dealing with, and the rest of the group would take turns guiding the student through the therapeutic process.

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BOX 1.2 | **A MOMENT OF REFLECTION: DEVELOPING YOUR THEORY OF DEVELOPMENT AND CHANGE**

We have all developed ideas (theories) about human nature. Prior to spending too much time learning what others have theorized, it is good to reflect on your own thoughts.

Write about what you think causes suffering and then write about what promotes healing. Consider biology, genetics, parenting, social support, culture, worldviews, and environmental stressors in your writing.

As I continued building on the skills from previous sessions, I developed an understanding of the trust and vulnerability required to fully develop a strong therapeutic alliance, even in these didactic, informal sessions. Helping Skills came to me at a critical point in my life; my grandfather passed away halfway through my college career, and my father quit his job due to health complications, so my grades had begun to reflect my lack of well-being during that time. When it came to my turn in the "hot seat," I was overwhelmed by how kindly I was received, and how rewarding it was to be vulnerable and to let out all of my emotions. Following that experience, I fully immersed myself into our simulated sessions and treated each individual as if we were in therapy together, rather than undergraduate students taking the same course. During one of our last lab meetings of the semester, one student delved into his relationship with his abusive mother, as well as his difficulties balancing school, a job, and acting as a father figure to his much younger siblings. I could feel myself operating in a flow as I listened and responded to his story, and as a group we felt the incredible energy of teamwork and shared empathy. Suddenly, he burst into heaving sobs, and explained that he had never felt so accepted and supported in his life. Helping Skills enabled me to analyze myself so that I could grow, but my classmate's cathartic response to our words convinced me that what I was doing was innately right. I decided helping others explore their inner selves and reduce suffering was a path that fits my strengths and temperament.

OVERVIEW OF THIS BOOK

Organization

Part I of this book provides a foundation for the helping skills model, which is introduced in Chapter 1. In Chapter 2, we describe the model and the process of helping. We discuss self-awareness in Chapter 3 and cultural awareness in Chapter 4. In Chapter 5, we discuss ethics for helping.

Parts II, III, and IV present the exploration, insight, and action goals and skills, respectively. Each part begins with an overview chapter that highlights the theoretical foundation and outlines the goals of that element of the helping process. The chapters that follow focus on specific skills to accomplish those

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goals. In the last chapter of each part, we address how to integrate skills and manage clinical issues.

Finally, Part V involves integrating the exploration, insight, and action skills in sessions with clients. Issues that arise in helping sessions (e.g., beginning a session, termination) are also discussed. The Glossary at the end provides definitions for terms introduced throughout the text.

Case Examples and Helper–Client Dialogues

Many examples are used throughout the book to illustrate key points. Chapters 1 through 20 begin with a case example that provides insights into some of the issues covered by that chapter. Each of the opening examples ends with a set of reflection questions to help you think about how you, as a helper, might approach that scenario. Shorter examples are also interspersed throughout the chapters. Some examples are based on real people (names and demographics have been changed to protect their identities); other examples were created to illustrate a given point. Several chapters also include sample helper–client dialogues to give you a better idea of how certain helping skills are incorporated into a real session.

Self-Reflection and Practice Exercises

Throughout the book, we have added two recurring features to help guide you on your journey of self-discovery as a helper. The first is a set of self-reflection exercises titled "A Moment of Reflection" to help you examine your values, perspectives, and goals as a helper, as well as what unique ideas you bring to the helping process. The second are practical, hands-on activities titled "Helping Skills in Practice" that consist of solo exercises you can do on your own to practice the skills and group activities that allow you to role-play helping skills with one or more classmates. In addition, in the web forms in the supplementary materials for this book, we provide ideas for lab exercises. We provide all these to help you practice the skills, given that practice is how you will really learn to use them.

Research Highlights

In most of the chapters, we present in highlighted text boxes a summary of some research findings related to the topic. These findings illustrate what we know empirically about the skills and how to apply the skills based on research. We encourage readers to review these research summaries carefully and think about the evidence. In addition, given that the establishment of an empirical foundation for helping skills and helping skills training is in its infancy, we encourage readers to build on these studies and conduct research so that we can have more evidence about helping skills, training, and helping/counseling/psychotherapy.

What Do You Think?

Several questions are provided at the end of each chapter to stimulate your thinking about the text material. We believe that it is important for students to

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reflect on and debate the issues raised in this book rather than simply accepting everything written here. There are few hard-and-fast truths or rules related to helping skills; rather, many of the issues are matters of taste, style, or art. You need to think for yourself about how you want to be as a helper. We encourage you to contemplate each question and discuss your answers with your classmates. You might also write notes in the margins about reactions and ideas that you have while reading the book to help you refine your thinking.

Video Demonstrations

Three videos demonstrating the helping skills model have been produced: *Helping Skills in Practice: A Three-Stage Model* (Hill & Carlson, 2009), which presents a broad overview of the model in practice; *Dream Work in Practice* (Hill, 2013), which applies the model to dream work; and *Meaning in Life: A Case Study* (Hill, 2019), which applies the model to working with meaning in life. Also, keep an eye out for the new video we are developing for this sixth edition, *Helping Skills in Therapy* (Hill et al., in press). These videos can be used as examples of implementing the helping skills model. Modeling has been shown to be an effective training tool (Knox & Hill, 2021), probably because it brings the written word to life. It is important to remember, however, that the videos only provide examples of how to use the skills. How you implement the skills will depend on your style and the needs of individual clients.

CONCLUDING COMMENTS

You are about to embark on or continue in what is hopefully an exciting and challenging lifelong journey in becoming a helper. Although learning helping skills takes time, knowledge, and practice, the rewards for refining helping skills in your personal and professional repertoire are plentiful. We hope to help you in your journey by focusing on the development of these skills while providing a theoretical and research foundation for the skills, as well as exercises to practice these skills.

Effective helping requires extensive practice, and even experienced helpers often return to the basics to review and refresh skills. To become a good helper, we urge you to continue practicing after this course. It takes many years and much practice to become an expert counselor or therapist (see also Hill et al., 2020; Orlinsky & Ronnestad, 2005; Skovholt & Jennings, 2004), so we encourage you to pursue professional training, and practice, practice, practice.

We want to end this section with a Korean doctoral student's metaphor to describe her experience of using this textbook to learn helping skills. She likened this book to a Korean bowl of *bibimbap,* a dish with various sautéed and seasoned vegetables and meats added to rice; everyone creates their own dish as they sit around the table. Each person at the table may construct a slightly different bowl of *bibimbap*, but all might be delicious. Similarly, as you go through each chapter of the book, you will throw different skills and ideas into your bowl of *bibimbap.* You may agree more with some skills and ideas than with others,

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and so you will throw more of these into your bowl (theory). You will skip ingredients that you do not like, but you might consider them more at some other time when you are again modifying your theory. At the end, you mix all the ingredients together, and you have the beginnings of a cohesive theory of helping. We suggest though, that you practice each skill thoroughly before you make your judgment about whether and how to incorporate it into your repertoire.

We hope this book assists you in learning helping skills and exploring your potential for, and interest in, becoming an effective helper. Good luck on this journey!

WHAT DO YOU THINK?

- Think of a time when you felt helped by someone. What did that person do that was helpful?
- Now remember a time when you needed help and the person you turned to was not helpful. What did they do to make this experience unhelpful?
- What would it take for you to seek professional help? Address the benefits and costs you associate with seeking assistance.
- Debate whether training is necessary to become an effective helper or whether it is an inborn (natural) trait such that only some people will ever be good helpers.

KEY TERMS

client, 5
collaboration, 5
confidentiality, 13
conscious competence, 9
conscious incompetence, 9
counseling, 5
counselor, 5
helper, 5
psychotherapist, 5
psychotherapy, 4
unconscious competence, 9
unconscious incompetence, 9

LEARN MORE

Students and instructors will find practice exercises, labs, and other resources for study and teaching on the book's webpage (https://www.apa.org/pubs/books/helping-skills-sixth-edition).