Postmodern Counseling in Treating Addictive Disorder: From Obstacles to Optimism

Farhana Sabri, Ph.D*

Islamic Science University of Malaysia, Malaysia.

*Corresponding author

Farhana Sabri, Ph.D, Islamic Science University of Malaysia, Bandar Baru Nilai, 71800 N. Sembilan, Malaysia, Tel: +606-7988796.

Submitted: 10 Aug 2017; Accepted: 18 Aug 2017; Published: 25 Aug 2017

Abstract

Post-modernism orientation has started to gain attention in counseling services over the past two decades. The aims of this paper is to review the features of post-modernism counseling that includes examining its differences on several dimensions of counseling compared to traditional counseling. Attention is given to conceptual application of the features in addiction counseling. It is proposed that post-modernism orientation in counseling appears to be appropriate and useful for treating addictive disorder clients.

Introduction

Over the past two decades, post-modern approaches in counseling have gained recognition and increased use in counseling services. This includes in mental health settings, drug treatment program, and Employee Assistance Program (EAP) among others. Among the counseling approaches grouped in post-modernism are Solution-Focused Brief Therapy (SFBT) and Narrative Therapy. The appeal of these approaches is that they utilize social constructivism body of thinking as a basis in understanding a reality. It is said that a reality could be defined and constructed in many ways [1]. This paradigm of thinking views the reality of problems are something constructed in the consoling session through conversation (language) between a counselor and a client. Thus, if problems are constructed in the session, so does the solutions. This paradigm shifts in how clients are viewed, and thus influence how the case is conceptualized, counselor role, and client's engagement in counseling session.

When applied to addiction counseling, a post-modern counselor posits that drug addicts' being reluctant and defensive are something constructed in the session using language between the counselor and the client. Furthermore, the term "reluctant" and "defensive" in clients are merely the results of reality interpretation imposed by the counselor upon the clients who display "avoidant behaviors". Thus, this interpretation of reality is subjected to change.

This is different than traditional counseling, which takes cause-and-effect paradigm of thinking as a basis of viewing a reality [2]. Traditionally, a client reports a problem in counseling session depression, low self-esteem, anxiety, and the like-and the counselor's task is to explore and find the roots or causes of the problem and remove them. It is believed by removing the causes will bring relief (solutions). For example, in cognitive approaches, emotional problems may be caused by the individuals' dysfunctional thoughts or irrational thinking. Therefore, the role of the counselor is to replace those thoughts into more functional and rationally sound thoughts [3]. This paradigm of thinking can be seen in medical model in drug treatment. The model suggests that clients with substance abuse issues are patients and the

interventions include viewing oneself as an addict, providing diagnosis and psychological evaluation, and psycho education [4,5]. The 12-steps of Alcoholic Anonymous (AA) are consistent with the medical model, with an additional spiritual view of addiction and recovery. AA groups are commonly provided along with other interventions in the medical model of substance abuse treatment [6].

Unique Features Focus on meaning

Social constructivism body of thinking in postmodern counseling hold few unique features that differentiate them with traditional approaches in counseling. Focus on meaning is one of the features in postmodern counseling that proposes there is no pre-fixed to all problems presented in the counseling session. For example, depression and anxiety are not necessarily caused by dysfunctional thoughts or irrational thinking. Rather, depression and anxiety and its solutions are inevitably constructed by the individuals as in how they perceived their reality of life. However, this is not assumed that these emotional problems are less significant. This simply means that this cause and effect assumption can be considered as one way of looking at things. However, this is not essential to get these "problems" solved. Rather, the focus of the counseling session will be on the meaning constructed around the "problems". This is because the meaning of life is socially constructed by which individuals make their way through life [2].

Therapy as co-construction

Therapy as co-construction is also employed by SFBT, in which the unique features of post-modernism counseling can be seen in its notion of change and techniques. This feature basically means that a postmodern counselor adopts the not knowing stance in the counseling session [7]. The counselor does not have pre-fixed solutions to all "problems" and he/she should avoid making the tendency to impose values unto clients' solution. This unique feature allows the clients to construct their own reality that they perceived as solutions. To do this, the counselor has remained curious and open through the counseling session. When applied in substance abuse treatment, the reality of recovery is constructed by the clients themselves and the therapy

focuses on building solutions rather than focusing on problems [8].

Grant (2012) compared the effects of solution-focused and problemfocused coaching sessions on positive and negative affect, selfefficacy, and goal-setting behaviors among college students. A total of 225 subjects were involved in the study, in which 108 participants were randomly assigned to a problem-focused coaching session and 117 participants were assigned to solution-focused coaching session. The participants completed a set of measurements that consisted of the Positive and Negative Affect Scale, Self-efficacy Questions, and Goal Approach Scale before and after sessions. The results of the two groups were compared: suggested that solution-focused group had higher scores on positive affect, self-efficacy, and goal approach at post-test as compared to problem-focused group (p < .01). Solutionfocused group also showed lower negative affect scores at post-session as compared to problem-focused group, F (1, 223) = 4.36, p < .05). Grant (2012) concluded that solution-focused questions (e.g., miracle questions) were effective in enhancing the participants' desired goals and generated significantly more actions steps to achieve those goals.

Differences on Several Dimensions of Counseling Compared to Traditional Counseling

Traditional addiction counseling in substance abuse treatment became accustomed with the assessment of clients' past life with the assumption of solutions could only be developed by understanding the roots of the problem. Therefore, the focus of counseling interventions tends to be surrounded on investigating "why" the clients have continued to 'relapse' back to substance use. Consequently, the conversation in the counseling session may centralized on client's failures in the past and this limits new conversation towards developing potential solutions. For instance, medical model of addiction, which is based on the notion that addiction is a disease that can be treated into remission by decreasing addiction symptoms. The model suggests clients with substance abuse issues are patients, and the interventions include viewing oneself as an addict, providing diagnosis and psychological evaluation, and psychoeducation [4].

Another example of traditional addiction counseling approach in substance abuse treatment is social model of substance abuse. The model focuses on the destructive behavior and poor socialization skills of substance abusers. The model suggests those deficits were learned, and thus, maintaining sobriety was the responsibility of the abusers [3]. Therefore, an effective way to aim at the deficits is by providing cognitive behavioral therapy that emphasizes confrontational techniques. That is, individuals with substance abuse issues are to blame for their addiction and thus, labeling substance abusers as "addicts" is required as part of treatment [5]. The repeated conversation in the counseling session on roots of the problems and clients' failures can often be self-fulfilling prophecy. Blaming clients for their past failure often lead to developing a mind-set about the clients being resistant, reluctant, and defensive. As a result, the client's action will be regarded in that fashion regardless of their efforts and behavior.

Post-modern approaches are different from traditional approaches of addiction counseling that are problem-focused. The post-modern approach uses a social constructionist philosophy which states that reality could be defined and constructed in many ways [1]. This philosophy is employed by SFBT in substance abuse treatment; that is, the reality of recovery is constructed by the clients themselves and the therapy focuses on building solutions rather than focusing on problems. A SFBT counselor believes that when clients are frequently

asked about their problems and symptoms, they tend to be trapped in the problem-saturated story of their life. This prevents clients from seeing the fact that they do have some strength themselves [9].

In SFBT, substance abuse clients are viewed from strengths and potential perspectives rather than deficits and resistance. Clients are empowered with their own abilities to make change. Solution-focused approach in addiction is action-oriented, with little attention given to the clients' past [5]. Current and future successes are more important. Soliciting the details of changes in the future serve as a mechanism of change in SFBT as it creates a catalyst for change in clients and leads to developing hope. Indirectly, this approach can renew a client's sense of self-worth, particularly for clients who have been stigmatized and traumatized in connection with substance abuse issues. The idea of social constructivism calls for support to further investigate the use of post-modern ideas in addiction counseling. The underlying theoretical rationale of SFBT, such as being a brief therapy and a focus on strength, can be part of an effective and cost-efficient strategy to treat clients with addictive disorder.

Conclusion

SFBT has gained increased use in treating addictive disorder. Viewing clients from post-modern understanding could benefit clients with addictive disorder. Valuing clients' choice in determining the goals and solutions, instead of the therapist dictating the course of therapy, seems to be an ideal approach to incorporate in the psychotherapy approach in substance abuse treatment. Post-modern counselors could help their clients find meanings to attach to the solutions and utilize those meaning as strengths in the course of therapy.

References

- 1. Anderson H (1997) Conversation, Language and Possibilities: A Post-Modern Approach to Therapy. New York: Basic Books.
- 2. Gergen KJ (2009) An Invitation to Social Construction (2nd ed.). Thousand Oaks: SAGE Publication Inc.
- 3. Room J, Kaskutas L, Piroth KV (1998) Brief overview of the social model approach. Contemporary Drug Problems. 25: 649.
- 4. Substance Abuse and Mental Health Services Administration (1997). A guide to substance abuse services for primary care clinicians: treatment improvement protocol series 24. Rockville: HHS Publication.
- Mott S, Gysin T (2003) Post-Modern Ideas in Substance Abuse Treatment. Journal of Social Work Practice in the Addictions 3: 3-19.
- 6. Galanter M (2007) Spirituality and recovery in 12-step programs: An empirical model. Journal of Substance Abuse Treatment 33: 265-272.
- 7. Anderson H, Goolishian HA (1992) The client is the expert: A not-knowing approach to therapy. In S. McNamee & K. J. Gergen (Eds.), Therapy as Social Construction. Newbury Park, CA: Sage 25-39.
- 8. Pichot T, Smock SA (2009) Solution-focused substance abuse treatment. New York: Taylor & Francis Group.
- 9. Berg IK, De Jong P (1996) Solution-building conversations: co-constructing a sense of competence with clients. Families in Society 77: 376-391.

Copyright: ©2017 Farhana Sabri. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.