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'Active Counselling for Social Development'

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IAC, 2017.

THE CONFERENCE WAS PRECEDED BY NINE WORKSHOPS LED BY PRACTITIONERS IN THEIR FIELDS OF EXPERTISE WITH THE FOLLOWING TITLES:

1. The Psychodynamic approach: Case conceptualization, the unconscious, and technique Workshop Integrating.
2. Spirituality and Religion into Counselling: Practical Applications for a Globalized Profession Workshop.
3. Resilient Therapy Intervention.
4. How to use Photographs Therapeutically in Counselling
5. The 'business' of being a Counselor or the fear to practice the profession – An Exposition.
6. Move it, we all can dance.
7. “An easy key to learn”: creativity to make a better use of our resources.
8. Collaborative Experience in Counseling.
9. Once upon a time... there were Princesses - Knocking Female Myths

KEYNOTE SPEAKERS WERE:

- Sue Webb (New Zealand) Title: Being a Pakeha Counsellor: Post-colonialism, social justice and sustainability in Aotearoa New Zealand.
- Lic. Andrés Sánchez Bodas (Argentina) Title: 30 YEARS OF COUNSELING IN ARGENTINA: Reasons for its foundation – present and future.
- Ms Esnaty Obetile, (President, and Botswana Association for Counselling) Title: Counselling in Africa and Botswana.
- Mr Dominic Nsona, (President, Malawi Association of Counsellors) Title: Counselling in Africa and Malawi.
- Clr Alejandro Corbalan (Presidente – Argentine Association of Counselors) Title: “PROSOCIALITY AND PERSONAL DEVELOPMENT, Attitudes that foster coexistence in peace and the evolution of peoples.

THE ROUND TABLES WERE:

- The Counselling Practitioners' Round Table (Plenary) Title: Counseling on the front lines: Breaking barriers of gender, equality, and social progress. (four presenters on-line from Africa, USA and UK).
- The Ethics Round Table (Plenary) Title: Universal Ethical Principles: An Exploration. (presenters from Argentina, New Zealand, Canada, USA, Turkey, Botswana)
- IAC Peace and Social Justice Roundtable (Plenary) Title: Living Peace and Social Justice in Society: What it means for counsellors around the world.
- The IAC Students' Roundtable (Parallel Session) Title: Chairs: International Counselling.
- International Research Roundtable (Parallel Session) Title: Gender Issues in Research: A Global Perspective.
- IAC Indigenous Roundtable (Parallel Session) Title: Reconciling Representation: Exploring Indigenous identity through personal reflection.

THERE WERE SEVEN WORKING GROUPS. Recommendations to UNESCO appear at the end of each Working group report.

WORKING GROUP 1 – DOMESTIC VIOLENCE – ITS IMPACT ON WOMEN AND SOCIETIES

GENERALLY

Chair: Counsellor Héctor Rasgido

Rapporteur: Counsellor Damián Cardoso

Interpreter: Clr. Héctor Rasgido

First Presentation Ms Heidi Mitton (Colombia-Canadá)

She works at the International Peace Brigade in Colombia, psychosocial agency that assists the civilian population affected by political violence. This violence is exercised by the state, military forces, rebels, drug dealers. It is difficult to delimit sides and the civilian population is involved in everybody against everybody violence. This situation takes place in the last 50

years and throughout that period many victimizers were also victims. Despite signing peace treaties, violence continues. It affects the most vulnerable sectors of society: poor, women, and children. This violence is intended to destroy the social structure and so manipulate the population's behaviour. Violence on some people spreads and infects the whole community. Examples of aggressions: torture, extrajudicial executions, illegal detentions, sexual violence, disappearance of persons, displacement of persons, etc.

As a result, survivors show: Disabling anguish, nightmares, fear, guilt, impact on their physical health, depression, isolation, aggression, etc. as well as in their relationships can be observed: stigma and distrust of its social environment, their identity is altered.

She highlights the importance of counselling as an agent of social change. It emphasizes the need to focus not only on individual suffering but also to broaden the gaze to the social context where it occurs. Furthermore, she argues that it is necessary to work in interdisciplinary ways and from human rights. The counselor working in these areas is exposed to the same risks as the local population.

Example of used strategies are: focus on the dignity and security of the victim; strengthen resistance and resilience factors; accompany and inform the survivors to make claims to break the silence; inform the survivor about contextual reality beyond their immediate environment by identifying strategies to protect themselves (Cartography); in each case evaluate the correct incidence of the different factors that affect the victim, look for the balance between the individual and contextual aspects.

UNESCO Recommendations:

1. The group discussion concludes the need to promote State policies to increase activity of counsellors in these areas because of the continuity of political violence, the vast regions and populations that it involves, and the depth of the affected social structure.
2. It is also suggested to promote State policies to deepen security measures to protect the counselors working in these areas.

Second Presentation Counsellor Lía Abeijón (Argentina)

She carried out his work as a counselor attending cases of domestic violence within the Argentine army. It is the first intervention of counselling within that force on this issue. It was necessary to open a path on a topic which was not openly discussed within an organization with very rigid hierarchical structures. The work was carried out within an interdisciplinary team also integrated by a lawyer, a social assistant and a psychologist. Within this team and from Counselling, the victims were given a listening space, opposed to the rest of the team's professionals who only asked asking for data and documentation.

She stressed the importance of treating the victim very gently during the first interview since, at that moment; a very invasive professional intervention may cause her to desist from the complaint.

In the context of such working Protocol, the army provides the victim with the possibility that attacker is removed from their home, the victim is given an amount of money as a food regime discounted from the aggressor's salary, and he is withdrawn from his service weapon.

She emphasized her observation of low self-esteem in both the victim and the aggressor, which would allow another look at this sick link, different from the socially stereotyped concept. The group discussion concludes that this aspect opens up new possibilities to heal the link.

UNESCO Recommendations:

It is suggested to promote State policies that deepen the proper help for these situations, since to date are insufficient.

Third presentation Ms Ifeoma R Eze (Botswana)

Unfortunately it was not possible to count on Ms Eze's attendance. Despite that, the presenter sent a PowerPoint file that was translated and presented to the working group by the chair of the group.

It's a study on femicide among students of the universities of Botswana and Namibia, perpetrated by their couple partners. In the absence of studies on the subject, was a qualitative survey among students from these universities. According to the perception of the polled students, the study confirms that those cases are on the rise and are a real danger.

UNESCO Recommendations:

Group discussion came to the conclusion of the need to promote advanced studies on this subject from which could be obtained information that would permit an efficient social intervention.

GROUP 2 – COUNSELLING IN EDUCATION

Chair: Dr. David Paterson

Rapporteur: Barbara McCullum

Interpreter: Clr. Graciela Menini

The Counselling in Education group had four excellent presentations which involved the theme of leadership and systemic change from differing perspectives.

Dr. Blythe Shepard of Canada, spoke of the work being done to develop a competency framework for the supervision of counsellors. Clinical supervision is a crucial component in the training of counsellors. Until quite recently, little formal and systematic didactic and experiential training of clinical supervisors in counselling and psychotherapy occurred in Canada. There appears to have been an assumption that the combination of graduate training in counselling/psychotherapy and a handful of years of subsequent professional practice in the field represents sufficient preparation for the role of a clinical supervisor. This learning through exposure model fails to consider that the primary focus of a supervisee is on the successful development and demonstration of counselling and psychotherapy concepts and skills versus those associated with clinical supervision.

The status of clinical supervision as a specialty practice is evolving from emerging to established, as is our understanding of supervisory relationships and processes and what is meant by competent supervisors.

If supervision training is not available it is incumbent upon counsellor educators to promote the idea that a practitioner must become their own supervisor i.e. they must cultivate self-witnessing skills and take responsibility to ensure that this is a standard part of their ongoing professional development.

Dr. Hector Rios from the United States spoke of counsellor educators who are tasked with designing field experiences i.e. practicum/internships that assist prospective counsellors to connect theory and practice in meaningful ways. This allows counselling professionals to provide to the public and stakeholders evidence that their practices are producing results or creating change.

In conducting “Action Research”, students engage with unique aspects of their field experience while learning to identify problems or difficulties, formulate goals, determine interventions, and evaluate the results of their actions. While engaging in this field experience students become **agents of change** and collaborators with other professionals in schools.

The benefits and implications of such an approach include, increased student engagement, the activation of **leadership roles**, the utilization of evidence based practices and the development of learning communities.

Dr. Hande Sart of Turkey spoke of the need to provide leadership in research when there is a discrepancy that exists between what is enforced in legislation and what is put forward in practice.

“The right to education” is an important principle accepted in many international and national laws, legislation and regulations. The right to education should exist for all children including children with special needs. Through her research she has demonstrated that what is assumed to be present in “theory” does not match the reality within the Turkish school system. Her research involved investigating the problems that are seen and reported during the pre-diagnosis, diagnosis and post-diagnosis periods,

the opinions of teachers, psychological counsellors and administrators in school settings, specialists in Guidance and Research Centres, specialists in Special Education and Rehabilitation Centres, and physicians who are involved in the teams of diagnosis.

Her research shows a serious flaw in the system and as she indicated “it is not enough to do the research” there must be policy recommendations and practical outcomes from the research. **There must be change.**

The fourth presentation by **Alejandro Corbalán of Argentina** described a wellness approach, based on the concept of “Ubuntu”, which includes a strategy – that can be replicated at the national level – to improve the quality of education by promoting values, human rights, democracy, a culture of peace and work and leadership. The program provides tools that foster attitudes and behaviours consistent with timeless values such as respect, tolerance, dialogue, solidarity, and collaboration, in order to train young people to develop and optimize their own capacity to build new interpersonal relationships, optimize the individual and collective capacity to resolve conflicts, strengthen the motivation to live in a state of law and improve the interrelation of the population with the State. His methodology includes different techniques to develop creative potential, empathic communication and social skills, which include “**social leadership**”.

The underlying theme for all of these presentations may be summed up by the following quote from Mahatma Gandhi.

“We but mirror the world. All the tendencies present in the outer world are to be found in the world of our body. If we could change ourselves, the tendencies in the world would also change. As a man changes his own nature, so does the attitude of the world change towards him. This is the divine mystery supreme. A wonderful thing it is and the source of our happiness. We need not wait to see what others do.”

In other words “be the change you want to see in the world”.

The counsellor’s role involves the provision of professional assistance and guidance in resolving personal or psychological problems. In most settings, innovation, change and research related to counselling has become the purview of Counsellor Educators and not the front-line practitioner.

Counsellors are proficient in assisting their clients with change. Therefore, should they not also be proficient at assisting their profession with change? This can be accomplished by embracing the development of leadership skills and the notion that counsellors can and must be change agents.

Leadership training has not been integrated into the formal training of counsellors. The inclusion of “leadership training” would embed the change process in the fundamental education of a counsellor so that leadership would not only be seen to be the role of the counsellor educators but the role of all counsellors.

All of our presenters have shown that by taking on a leadership role, through research, action, and innovation systemic change is possible.

WORKING GROUP 3 (RED ROOM) - COUNSELLING CHANGING FAMILIES

Chair: Dr. Nate Perron

Rapporteur: Dr. Ruth Falzon

Interpreter: Beatrix Brinckmann

Group 3 was attended by 73 participants and languages used were English and Spanish.

Themes presented spanned across the life span - from pre-pregnancy to old age. These are the points Group 3 would like to present to IAC to inform the profession and the UNESCO.

These points have been endorsed by all members present during this working group.

To inform counselling practice, we ask IAC to consider the following:

1. Counselling must take into account individuals and their environment before pregnancy and across the life span
2. Counselling should address Individuals’ holistic quality of life
3. Counselling should address fractured relationships beyond the individual client, giving space for the person, their family and their environment
4. Counsellors’ self-care is in the interest of the client
5. Counselling should embrace Social Justice. This includes access to counselling irrespective of monetary profiles
6. Counselling should lobby and work with state/government policies

7. Counselling should work with communities and counsellors should seek support of leaders of communities
8. Counsellors' support should be continuous and should also be preventive by educating and raising awareness of the value of counselling, in order words promote Emotional Literacy
9. Communities should ensure counsellors' presence in pre-primary and primary schools counsellors should work with teachers and parents as a preventive measure
10. Using qualitative and quantitative evidence-based practice to promote counselling
11. Counselling should play a key role in supporting families through health-related challenges leading to vulnerable families.

Group 3 is asking IAC to **present the following to the UNESCO:**

- 1) Recognise the importance of Counselling as a profession and a contributor to quality of life on an individual and community level across the life span. Counselling humanises the person from a holistic perspective and in turn informs the community and its members.
- 2) Parenting programmes should be promoted with national governments, focusing on the 4Cs of parenting: Care, Consistency, Choices and Consequences.
- 3) A concern UNESCO needs to recognise is the increased number of adolescents in incarceration and to address why this is happening. This should be viewed in a context where we need to understand how adolescents can 'thrive' versus 'get by'.
- 4) Delayed gratification has been linked to success in life, as well as less deviant behaviours. UNESCO should promote this competence and attitude in schools and places of work.
- 5) Crises in life and present world events necessitate the recognition of need for professional support to help improve quality of life, particularly in post-tragedy and post-trauma situations. This includes the effects of Acquired Brain Injury.
- 6) Relationships are considered extremely important for quality of life and should be promoted in a context where (a) technology might be isolating us in as much as it is connecting us; and (b) loneliness has become a significant issue in counselling. This should start from early education on to old age, where working in groups and addressing personal education and Emotional Literacy could be a way forward.

- 7) In a context where the number of elderly people continues to increase, UNESCO needs to address issues of quality of life and more meaningful activities. One example could be the use of elderly counsellors in homes for the elderly.
- 8) Chronic Illness, community work and professional counselling should be a priority. Support should not only be for the clients, but also their families and friends in order to address uncertainties, loss and the unknown they would be experiencing.
- 9) The chronically ill experience a shift in identity, in independence and in Quality of life. This leads to feeling of anger and frustration which the person themselves, their medical professionals, their careers and their families would not know how to handle. Group 3 proposes training medical personnel to understand and address emotional literacy in order to support the chronically ill's journey and search for meaning and management of the situation as well as counselling intervention.

WORKING GROUP Nº 4 - COUNSELLING AND POVERTY

Chair: Counsellor Ana Maria Diaz

Rapporteur: Counsellor Patricia Baioni

Interpreter: Clr Pat Baioni

In Group 4 there were three presentations about people suffering from poverty who are not prepared to be employed. Such people are in situations of vulnerability, social risk, and mental health owing to climate disasters affecting large populations.

The first presentation was in charge of counselor Adela Saenz Cavia who talked about resilience: learning and resources for social risk situations. She currently works in Boulogne province of Buenos Aires in the emergency villa, a shanty town called "La Carcova", the project is framed in the work carried out by Father Pepe, José Maria Di Paola, in "San Juan Bosco Diocesan Mission", which brings together a population of around 40,000 people through situations of extreme poverty and indigence, torn by drugs, violence and insecurity.

The second presentation was in charge of counselor Jenny Rowett who developed on pre-employment modules: an innovative effort by the Canadian Career Development

Foundation and the New Brunswick Department of Social Development to enhance the capacity of people suffering from poverty.

The third presentation was in charge of Cirecie West-Olatunji who shared the use of the method of teaching in reverse to improve the competencies of multicultural counselling and social justice. This theory was put into practice in New Orleans after Hurricane Katrina and in India training local counselors. In situations of social vulnerability in Argentina, Canada, USA New Orleans and India we have seen that community counselling should be developed with the following looks in common: The counselor must have a cultural training before approaching the place of high social vulnerability; they must know its history, the culture and language of the people that are going to help. Trust in the capacities and potential they already have and that we will help them develop, which means, empowering people of their own capacities, developing sustainable tools over time and leaving those capacities already installed in communities through the training of their local leaders. Highlight group work, for having greater community impact and to generate networks complemented by individual work just for specific critical cases.

Consider a positive look at people as powerful, capable of developing the resilience as an emotional effort, to generate projects in which they get involved, develop positive thoughts and emotions, that will help them overcome the crisis and motivate them for their social and labour insertion. In the person of the Counselor the greatest limitation is:

That this type of work requires great introspection and personal growth based on the valuation of very different but equally valuable cultural styles.

Humility, honesty and daring to perform the task must be present in the person of the counselor.

All the presenters agree that this is an exchange in which it is received much more than what is given and that generates a lot of fulfilment and personal satisfaction.

Our recommendation for UNESCO is that Argentina, with 30% structural poverty, like other countries in the world with the same or more needs, will receive with joy strong collaboration from UNESCO so that more and more NGOs can have many more programs to

develop the skills of the counselors to be trained in assisting people at risk because of extreme poverty.

WORKING GROUP 5: COUNSELING AND SUBSTANCE ABUSE

Chair: Counselor. Alicia Pafundi

Rapporteur: Counselor Roberto Bertone

Interpreter: Dr. Deirdre Kelly

The first presentation: Counseling in the field of addiction to psychoactive substances, in charge of Counselor Roberto Bertone in collaboration with the Lic María José Lander.

The second presentation: Responsible and chosen Nutrition. The Prevention of food abuse. by Counselor Mónica Montes:

The third presentation: Progression in the problem of addiction by Counselor Juan Facundo Cincunegui and Counselor Natalia Dorola

The first thing seen in the three papers is a coincidence as the real problem is the **link** set with the object, and not the object in itself, whatever it is, food, drugs or other.

There was a good exchange of experiences, where it could be seen that the subject of addiction is focused in general on adolescence and to a lesser extent in adults.

It was also reflected the interest for such a specialization, not only for self-motivation of adding new knowledge and learn other areas to develop the profession, but also for being affected in different ways, either for own problematic use, or for being in contact with close-people suffering from a problematic use, not only to psychoactive substances but also to eating disorders.

Furthermore, and on the basis of this exchange, we could make it clear that this specialty cannot be practised individually, but it is required the involvement of a multidisciplinary team in an institution where the person is treated in groups, at least at initial phase until

reach abstinence. Also, as a consequence of it cannot be treated individually, this group came to the conclusion that if this topic appears in private practice, derivation is not an "automatic" action, but it is also a process for which the counsellor must be advised to give alternatives at the moment of derivation.

The focus in one of the presentations was the role of the counselor in addictions. In private practice, as we have already mentioned above, the process will result in a derivation to any institution. As a member of a health care institution the counsellor could participate in: 1) admission interviews with the purpose of evaluating the client's situation and its subsequent addition to the method that contributes best to its cure, (day-centre, day outpatient hospital, or if necessary a brief hospitalization). 2) As a coordinator of groups of people in problematic use, as a socio-therapeutic operator or in collaboration with one of these helpers. 3) As a coordinator in the network groups of: parents, couples, siblings or friends.

At the stage of having achieved abstinence, it is recommended to be in charge of a psychologist, because generally, the basic problem is usually deeper, and not a counselors matter. However it was considered the possibility that a counsellor may also accompany this process in an interdisciplinary way together with the psychologist, situation which was not advised since some confusing situations for the client may appear.

After being achieved not only abstinence but also the remission of problematic use, as well as the detection of origins, the following stage of existential sense search and personal development can be accompanied by a counselor, who can also be a member of prevention area, both specific and non-specific within various social and health policies.

According to our humanistic point of view, the treatments should not be rigid models, but must be able to adapt to each person, this fact was clearly mentioned in the third presentation, which was supported not only by the audience but also by other presenters.

Another item was sustainability and, in this sense, the vision of Clr. Mónica Montes is that the person, together with his context, is his own resource, having also a look that goes from

micro to macro, in spatial and temporal. As spatial it means, how personal change impacts on social area. As temporal it means, how, from the present, it is given a new meaning to ancestors and how the improvement life quality transcends to descendants.

Concerning to substance addictions, there is also self-sustainability since the person, after leaving behind consumption, can start to pay attention to 'others' and naturally develop a need to support and offer the opportunity to be transcendent in others, as a way of sublimation, of new meaning of life that has ahead.

Another activity developed in the group was a centering exercise, which we did at the beginning of one of the presentations; this resource helped us all to be more present in the working space.

The key ideas that we would like them to remain are:

- 1) In the case of problematic consumption of substances: Specialization, Group and Interdisciplinary approach, “the substances are not the problem” Self-sustainability.
- 2) In the case of food: Nutrition, not only seen as an ingestion of food, but also of everything that surrounds, how to be stood in front of it, what is ingested, in all ways (visual, olfactory, gustatory, etc.) nourishes and is incorporated. The other word is sustainability.

Recommendations for UNESCO:

The suggestion is that they provide the countries the necessary tools to be participants and to collaborate in the solution of these problems.

Concerning to our profession, it would be good for disclosure that counselling is a profession which is being developed around the world, with some kind of publicity campaign.

WORKING GROUP 6 - COUNSELLING IN THE FACE OF PROFOUND LOSS

Chair: Valentina Chichiniova

Rapporteur: Niamh Donoghue

Interpreter: Clr. Rogeria Piccoli

The overarching theme of this group was the way in which loss, although a normal part of life, can have such a sudden and unexpected impact on both individuals and their communities. One of the most interesting outcomes from discussion was the way in which loss and grief presented themselves as universal experiences pointing towards the humanity related to the work we do as counsellors. One very interesting comment which emerged was "Pain is not a question of culture"

Presentations focused on loss across a variety of developmental stages and across various cultures. I will now outline some of the key themes that emerged from the presentations and discussion.

1. PROTECTIVE AND CONFLICTING FACTORS ASSOCIATED WITH LOSS

It is important that UNESCO is aware that factors outside of counselling can have the potential to negatively impact upon the counselling process, for example systems and institutions can often create barriers for our clients and have the potential to further exacerbate our clients presenting issues. It is important that UNESCO work closely with counsellors to identify and break down potential barriers to the counselling process.

Although loss can be seen as a universal concept the cultural factors associated with grief and mourning cannot be overlooked. UNESCO needs to remain committed to raising awareness of intercultural competences, ensuring that they are studied, taught, and promoted not only at a theoretical level but also on the practical level.

Religious and spiritual customs and beliefs should not be overlooked and where appropriate they should take precedence over traditional counselling methods. It is important that counsellors be supported to engage with traditional and alternative practices that are derived from indigenous beliefs and religious systems. The UN has a key role in providing opportunities for the provision of, and sharing of, information and knowledge across disciplines.

2. IMPACT OF LOSS ON IDENTITY

Persons who experience profound loss often go through a period of identity reconstruction, wherein they are learning to be, in the absence of those who have been lost. Acknowledging that loss has the potential to become an integral part of an individual's personality, moving them in directions that they don't expect or understand means the role of the counsellor is

integral to the grieving process. UNESCO must work alongside counsellors to lobby for the provision of more services, opportunities and spaces for people to work through their grief.

3. INDIVIDUAL AND COLLECTIVE FACTORS ASSOCIATED WITH LOSS

On an individual level, loss can lead to shifts in relationships, both the loss of relationships as well as the strengthening of specific relationships. We cannot neglect to acknowledge the collective experience of loss wherein loss can transcend the individual and become a part of the community. It is imperative that we understand the power and importance associated with a community, group or family that assumes the responsibility associated with loss and grief and work towards the provision of adequate support and interventions to ensure positive and sustainable outcomes.

4. RESILIENCE

It is important that we as counsellors understand ways in which resilience can be fostered through counselling. When looking at resilience across cultures it is important to understand the various determinants of resiliency within the cultural context of our clients. We need to work collectively with the support of organisations like the IAC and UNESCO to establish culturally sensitive frameworks, within which we can address resilience with our clients.

5. OVERALL IMPLICATIONS FOR US AS COUNSELLORS

It is important that we engage with practice based research - The power of examples to influence practice is invaluable and as professionals we have a responsibility to expand the frontiers of knowledge in our field

We must not forget the importance of creativity in counselling, we must strive to seek out innovative and creative means of working with our clients.

Flexibility in our approaches will ensure that we make deep and meaningful relationships with our clients while creating spaces that foster deep contemplation where stories of trauma and pain can be shared and witnessed.

We all know that TRUST lies at the centre of our work. We must not forget to trust in our own expertise and remember that as individuals we are valuable tools. We must remember to allow ourselves to be human beings who are walking alongside our clients, sharing in

their experiences. Allowing ourselves to trust our clients stepping into the unknown with them and trusting that they know what is best.

I would like to end with a Victor Frankl quote which was presented in our group

“Everything can be taken from a man but one thing: the last of the human freedoms — to choose one’s attitude in any given set of circumstances, to choose one’s own way.”

PRESENTATION OF WORKING GROUP Nº 7 - COUNSELLING AS A PROFESSION IN SOUTH AMERICA (incl. Challenges in Career Counselling)

Chair: Counselor Eduardo Blacher

Rapporteur: Counselor Yanina Blacher

Interpreter: Clr. Melisa Logroño

After presenting chair, rapporteur and interpreter it was agreed to dedicate 10 minutes for presentations and then 30 minutes for discussion, with 3 presentations each day.

Presentation of Professor Del Lowenthal “Is counselling a cultural or evidence-based practice?”

- It was considered to go from theory to practice or from practice to theory.
- In England, the practice of Counselling is being tapped by the government, for example in policies against terrorism. This threatens confidentiality and leads to research as a substitute of professional practice. In the US and in Argentina, there is no difficulty with regard to confidentiality.
- In England they work with a study handbook and many students seek to practice the technique. From what they learn in the manuals they expect something magical to happen at the interview.
- A proper research involves professional practice, supervision and personal process.
- Practice is essential to the theory. It needs to live the empirical and the cultural.
- Research must be done from the practice of profession to the theory and not from theory to practice.

- One of the challenges faced or met, is the balance seeking between professional practice and research. As per Del, when the research is the centre, the heart is missed. The encounter with the other.

Presentation of counselor Silvana Antún, discussion:

- Usage of Logotherapy as a basis for accompanying, as a model and as a resource.
- Confidence in spirituality as responsibility, freedom, auto-distancing and self-transcendence.
- It was discussed the professional and personal beliefs (in terms of theoretical basis). Whether it influences or not in the listening and process to accompany others.
- Usage of resources. Centered on whom?
- Professional practice in other provinces and countries. The influence of traditions and cultures.

Presentation of counselor Cristina Papazian. Amparar Project

- She presented a model of intervention from the Counseling to accompany children with cerebral palsy and their families in Armenia.
- The mode includes training to parents and therapists so that the project can continue when the Counsellor is removed.
- The challenge is to get funding or sponsors and the support of institutions to recommend and propagate them as being valuable to the community.

Presentation of Ms Heidi Mitton “The work of Counseling in political violence”

- Think of individual and collective effects and messages sent to community.
- To accompany someone it must be taken into account the individual, the social and the relational.
- To trust and accompany from the healthy aspects of the person and his body, concerning to his strengths and resilience.
- The search for truth, justice and the historical memory, whereas the collective suffering, has collective causes.
- In violent situations or trauma, as in the paper by Marla Buchanan, to facilitate the contextualization and find a meaning to what happened.

- It was discussed the difficulty of identification or approach to others grief when he belongs to a VERY different culture from own.

Presentation of Susana Meliá investigation:

- It was discussed the reasons why students choose Counselling career.
- Many of them come recommended by consultants, teachers from different levels of education and professionals of other areas such as psychologists or paediatricians.
- The results of the research show that most of students arrive as a vocation to help.
- The difficulty of conducting research with an enabled supervisory body.
- The difficulty to define Counseling profession, introducing it in a similar way, beyond orientation, without decorating it or adding content that does not match and creates confusion and fights with other aid professionals.
- The first Counselors who graduated were opening the way to those who followed them. It is the responsibility of each professional to find means and ways where to go into the profession. Without expecting others (Associations, Institutes, Professionals) do it for them but with them.

Our recommendations for UNESCO are:

- Persist in making Counseling to be known and valued as one of the present help professions in our country. In its role of prevention and promotion of health in several fields of intervention.
- Facilitate and support access of counsellors in public institutions in their own role of competences, so that they can work interdisciplinary way, providing all that Counseling has in it to offer.

DOMINIC NSONA AND ESNATY OBETEILE gave a question and answer session with conference attendees.

Chair: Dr. John Prysor-Jones

Rapporteur: Dr. Ruth Falzon

Interpreter: Clr. Melisa Logroño

The Chair asked: What was happening inside you as you were listening to Esnaty and Dominic this morning in your mind and in your heart?

I was feeling very frustrated looking at your presentation that 10 years of this dream of yours just kind of hung out and you and other people have hung in there waiting for the right time, I felt very frustrated listening to that

DAN in terms of this dream about counselling and people trying to set up something but for some reason it has walked out of town some people went out of town and picked up jobs that took them away from counselling and it died a natural death. But then happy that I represented this morning and came together and established the association and if there is anything we can do and the team we have now is hard working and as say about what has happened already. We are all committed that the MAC accomplishes what it has on the table, I highlighted what has been done and we are making sure that everybody is on board.

The three of us are working very hard. We all have our jobs. I work in a hospital they coordinate a catholic system and working in another organisation but we are working on a voluntary basis we meet up in the night and in the weekends and I am happy to report that we have done milestones in the few years we have been together

Esnaty similar to the Malawi situation Most frustrating is that the Government does not have a system that helps counselling to grow because as you are progress I graduated in 2010 and I am working in a secondary school, not colleges I graduated with left the government because they are not progressing and if you progress you no longer practice counselling.

Unfortunately time is very short IN my country three types of people practicing counselling

- 1) Paraprofessionals – with a diploma in counselling who are working in NGOs, in churches and schools as guidance teachers
- 2) Masters – private counselling in their own practices and clinics. These mostly work with government at the Ministry and are not doing counselling and are doing supervisory work in schools and universities.

- 3) Lecturers at universities and institutions –do not have the opportunity to work on the development of counselling in the association as they do not have the time as they are also working for the government.

How long is the training programme (GGA?)

Group 2 actually supervise?? Yes

BAC started in 2005 as a need for somebody to supervise Counsellors and as there was no act to govern counselling. The few people who started but eventually loss of their jobs somebody else pick it up and this led to factions. Current members of the association are fighting government for the counselling Act to go to parliament but we have time issues to work for the association.

For somebody to grow in counselling you have to commit your own money. Trained myself for my masters and you have to make sure you do it for yourself as the government will not commit finances for you. Supervision and administration concerning not only counselling is taking up the time as they are directed what they do and so limit time one has to promote counselling and work to develop the profession.

Dominic – looks like the associations of African countries need to do a lot of homework in sensitising the government about the importance of counselling because it is not recognised as a profession and so the question why do we promote something we do not know that is. We need to convince government of the importance. I was sharing this morning with another colleague– In Malawi we lost our president and the speaker of parliament All this happened because of stress issues which counselling could have prevented. If there had been counselling the situation would have been different. We need to talk to the responsible ministries falls under h ministry of gender and family affairs – Can you identify who is a counsellor? Define what counselling and its training. The categories of counselling the definition of counselling and that at the end of the day we will give terms of reference for the minister. When all put together we will take to start the process for the act of parliament to be recognised as a profession. Until that is done we are at a dead end. Slowly and surely we are progressing and that is what we want.

UNESCO SUPPORT working on the guidance and counselling programme and most people do not differentiate between the two as different entities. As such, guidance programmes

end up like taking precedence over counselling programmes in such a way that could not be looked at as an independent entity without guidance. And because Guidance and COU are mostly by teachers, so for the government it is something like we have trained teachers who are doing this so why do we need counsellors.

We also have the cultural practices mentioned but in the traditional indigenous practice could be defined like giving advice and especially does by somebody elderly and experienced in the way of traditional health practices and not having gone through formal education then somebody does not see why it can be done by anybody with formal schooling because they are giving advice and the person who is being helped are being helped so here is no problem. So that is where we are.

You had trouble getting here. How are you feeling having got here much later than the rest of us?

GGA noted that the consulate did not give the visa which only needs a letter of invitation but this never came until the very last day.

EO: I felt when I came in the morning I felt good that I managed to come. But then when I started presenting and I was only given ten minutes I said was this worth coming here and fighting to come here and only given ten minutes? I was told by IAC when you are preparing a VISA you spend a lot of your own money. The material you need to put the documents together and managed to come here and only ten minutes I became stressed. Fortunately John organised this session and it helped and made me feel better and in the morning I was really frustrated - to come all the way and be given ten minutes – really!!!

SW what counselling approaches are taught in your countries and how you manage them within the advice giving expectations. DAN Malawi person centred approach and for the fusion of several other counselling approaches and theories I did mention that institutions are coming up to train counsellors in Malawi but the challenge is the practice aspect. Counselling is one of the highlighted areas and so the practical aspect is somewhat neglected so with a PhD in counselling may have not skills when you see them in supervision. That is where MA comes in to connect with the institution to do the practical part so that we can fuse and we have better counsellors.

Hours of practice is critical and important for the profession as they may present a qualification but still not know how to counsel and that is the work of the association. In Botswana different approaches are being used because of our different training depending on where you re working. Mostly PC and cognitive behavioural is more in the cases of drug and substance abuse. There is now way you can assist the client without involving the family into the counselling process. Same work in schools where ensure that all related to child is involved so CBT is more practical. For careers PC and Gestalt

Most trains in general you can shift from one approach to another

How many year of training? First degree four year education in counselling and then after 4 years two years for the masters an then your PhD depends on how you are doing your PhD. So counselling depends on and comes under education and not the health system?

The Ministry of education and the ministry of health re working on counselling together. Right now I am doing training as addiction professional and in that group we are from education. Military, ministry of health and those from NGOs are training together so we come from all different sectors.

Malawi Ministry of health doctors have a module on counselling in their training as well as nurses. And they stand and say we are also counsellors just because of one module.

Botswana Social works gain more recognition as counsellor than us with master's degree in counselling. Some do a first degree in social work they get more recognition in counselling A lot of students go to a social worker and say they have gone for counselling so laymen in my country they know more o social worker and difference not clear

Counselling and general population – Botswana 2 million but you realise that they know ore of social workers than real trained counsellors SW in Botswana more established and developed than COU they have ethics in place and a strong association same for psychologists and people are more aware of Social workers and Psychologists.

What happens to people when you explain what COU is? Do they resist even with positive results? This happens in Argentina small cities

EO ass speaks on the ride to inform people and especially for people to know the issues that need COU. This is working and people are now able to know and starting to know COU but not to distinguish between the three

Malawi CO makes a person comes to terms with himself. COU allows one to understand why some things are happening. Clients can grow worse and for example become more angry because we are living the memories and they tell us I am stopping as I am getting angrier but that is part of the progress and after this they start to get better. Important for counsellors to assure clients that this is normal.

Since COU is coming for a background of advice, you see that in Africa when you talk about counselling they think should I pay for I would arrive at. So we need to inform difference between advice and counselling.

DAN in Hospital I coordinate a child counselling service and have a private practice. HIV workers have very short counselling training (up to 5 weeks) and these are testing people for HIV and giving out the results. These are not prof counselling but only provide testing and counselling for HIV. These form the better proportion of the MAC association. Can we upgrade them through CPD? So they can progress.

Trained in counselling and in theology working as pastors in churches they have a certificate as one of the courses in their 3-year training. I was invited during their graduation for the certificate in counselling as president for awareness for them to know that they are not prof counsellors that they need to continue their training in counselling. Most appreciate that and they register with the association to know about counselling and go for further training. Those who are promoted to senior are selected on the basis of being observed doing counselling and having shown interest of help students and then they are promoted and then they realised that they need training in counselling as they would only have had one course in counselling during their teacher training (three year training diploma and four year degree). This created an interest for further training in counselling

GGA

School counselling in primary and secondary school or limited to a stage and is it compulsory for school

Every school at least one person who is called senior teaching guidance and did counselling who are trained – first degree I counselling are placed in secondary schools – two in each school and one in the primary. They have a dept. for counselling

Is it solely career and guidance counselling?

Guidance and counselling as a subject and at primary the person are actually have their own subject that they are teaching but providing a programme which is more health and wellness and preparing career.

Hospital work process?

Just like any heart condition people are encouraged to come so when people or couple arrive a protocol includes re test during and post. The stage process each stage 35 minutes In Botswana certain number of session and then debriefing but we do not go for debriefing as you have to organise or yourself with a need. Nobody taking care of you as a counsellor in school except if you have attended an emergency in a secondary school e.g. cases where students die and you are called in to attend to that school. Then ministry will organise a debriefing for that team but in your daily work no supervision and nobody will tell you need support.

IN Argentina we pay our own supervisors.

How does it fell to be a counsellor? Why do you do it?

EO – as an individual it is a very personal fulfilment that is why will spent all the way I came to Argentina to get the feedback to my county to tell them listen to what they do in other countries

Love of the work and as this is who I am. I did a degree a of English but every day students came with problems and I was doing guidance and counselling in the class of English because a concern for me to pay attention to one student to help them in English so that gave me the agency of training in counselling and if govt. is not supporting I do not feel govt. owes me anything but I still go. In Malta I had to pay myself for the conference because I felt it is very important for my own personal development.

DAN I see it as a calling, a passion and energy from within to see people developing and I see people improve so I would do all I can to see people happy. After every session everything is fast in our environment and nobody wants to sit down to listen dot someone so when they see you are there for them and you focus on them and are there for them and repeat what they are saying. At the end they felt better and that is what keeps me satisfied.

The Conference closed with presentations to the AAC and IAC committees and an announcement of the IAC 52nd. International Conference in **Rome, Italy, 21-23 September 2018.**

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