UNIVERSITY OF SWAZILAND

FACULTY OF HEALTH SCIENCES

GENERAL NURSING DEPARTMENT

FINAL EXAMINATION: MAY 2016

COURSE NAME: INTRODUCTION TO COUNSELLING
COURSE CODE: HSC 206
TOTAL MARKS: 75
ALLOCATED TIME: 2 HOURS
TOTAL NUMBER OF PAGES INCLUDING COVER PAGE: 5

INSTRUCTIONS:

- ANSWER ALL QUESTIONS
- EACH QUESTION CARRIES 25 MARKS
- ANSWER EACH QUESTION ON A NEW PAGE
- WRITE CLEARLY

DO NOT OPEN THE PAPER UNTIL INSTRUCTED BY THE INVIGILATOR
For the multiple choice questions, please select the best response from the options provided, and on your answer sheet, write your choice letter against the corresponding number. e.g. 1. A.

QUESTION 1: [25]

1. The counsellor recognizes that Mrs B’s eyes are clouded with tears, and then says to her, “Are you comfortable Mrs B? It’s ok with me to express any emotion you feel!” Which of the counselling interventions is the counsellor using:
   A. Cathartic intervention
   B. Cathartic intervention
   C. Confronting intervention
   D. Supportive intervention

2. The psychological approach that holds that all human behaviour is learned and therefore could, if necessary be unlearned is the:
   A. Psychodynamic approach
   B. Humanistic approach
   C. Person-centred approach
   D. Cognitive-behavioural approach

3. Which of the following counselling or therapeutic approach that helps that people learn to test the reality of their thoughts and better manage symptoms:
   A. Psychodynamic approach
   B. Humanistic approach
   C. Person-centred approach
   D. Cognitive-behavioural approach

4. The counsellor who adopts the humanistic approach in his or her practice will tend to do the following except to:
   A. Help with self-image problems
   B. Highlight the relationship of past events and experiences
   C. Acknowledge that every person to some degree is responsible for his or her own behaviour
   D. Focus on the here and now and to encourage patient to find her own solutions

5. The worried well are:
   A. People who do not suffer from a particular disease or disorder but are worried about themselves.
   B. People who are worried that they are not having any particular illness or disorder.
   C. A & B
   D. None of the above
6. Free floating attention is described as:
   A. Being attentive to everything that is happening and maybe disruptive of the counselling session
   B. Being open minded, attentive and free to allow the patient to express his emotions.
   C. To truly focus on the other person so to pay attention to every detail of the subject
   D. Moving with the client, following the conversation wherever it goes.

7. In psychodynamic theory, countertransference
   A. Refers to the distortion of the counsellor's interpretation of the client stemming from the therapist's own conflicts.
   B. Occurs when the counsellor or therapist develops feelings or views about the client that emanate from an accurate interpretation of the clients' issues.
   C. A situation when the client unconsciously put the counsellor in the place of a significant other.
   D. A situation when the counsellor can relate to the client's problems and then becomes more empathic.

8. According to Barbour (2009), how much of our communication is verbal?
   A. 55%
   B. 21%
   C. 7%
   D. 38%

According to the 16 Personalities' theory, cross- match the scale and trait it measures:

<table>
<thead>
<tr>
<th>No.</th>
<th>Scale</th>
<th>Personality Trait</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.</td>
<td>Mind</td>
<td>A. Thinking vs. Feeling</td>
</tr>
<tr>
<td></td>
<td></td>
<td>B. Judging vs. Prospecting</td>
</tr>
<tr>
<td></td>
<td></td>
<td>C. Introversion vs. Extraversion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>D. Intuitive vs. Sensing</td>
</tr>
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<td></td>
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<td>E. assertiveness vs. Turbulent</td>
</tr>
<tr>
<td>10.</td>
<td>Identity</td>
<td></td>
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<tr>
<td>11.</td>
<td>Tactics</td>
<td></td>
</tr>
</tbody>
</table>

12. When breaking bad news, the use of euphemisms is discouraged. Example of euphemism would be:
   A. It will be ok
   B. Things will never stay the same
   C. Let go, and move on
   D. Everyone experiences such in their lifetime

13. The exploration of dreams during counselling is inherent to the:
   A. Psychodynamic approach
   B. Cognitive-Behavioural approach
   C. Gestalt theory
   D. Personal construct approach
14. Tatar and Bekenman (2002) defined culture in relation to counselling as “trying to partially overcome solipsistic perspective of human experience”. By these they meant:
   A. That the setting becomes the larger context within which counselling activity is constellated, hence must be realized.
   B. The need to recognize the variety of ethnic cultural backgrounds involved in counselling practice.
   C. The need for practitioners to be aware of how their own culture could influence the counselling process.
   D. All of the above.

15. Which of these statements is inaccurate regarding The Gestalt’s theory:
   A. The individual must develop self-awareness, acceptance, wholeness and responsibility in order to achieve organismic balance.
   B. Individuals are encouraged to trust his or her intuitive state rather adjust to society.
   C. Change occurs when individuals assume responsibility for themselves and when they terminate unfinished business.
   D. Counselling involves the interpretation of materials generated by the client through free association, dreams and recall.

From question 1-15 [15]

16. Briefly explain how the following five ethical principles can be observed by practitioners during counselling:
   A. Fidelity
   B. Self-Respect
   C. Beneficence
   D. Non-maleficence
   E. Justice

[10]

QUESTION 2 [25]

Musa is a 36 year old taxi conductor who has been smoking weed (dagg) since he was 15 years old. He came to the hospital for chronic coughing, and the excessive sedative effect of the dagg affects his social and work life. He tells you that passengers are complaining of his stench and rude behaviour, his co-worker (the taxi driver) is also frustrated because he regularly fails to show up for work, and had lost the taxi-money he collects, twice last month. He tells you that he realises that smoking weed is affecting his life, but he feels and thinks that he “cannot live without it”.

2.1 With your understanding of behaviour change counselling, outline the counselling process, briefly explaining how you can help Musa deal with his dagg problem. [10]
2.2 The extract below was taken from the conversation between Musa (M) and the counsellor (C). Having understood the qualities of an effective counselling relationship, Explain the DON'T's that as a counsellor you must avoid in your relationship with Musa, giving examples from the extract.

<table>
<thead>
<tr>
<th>C</th>
<th>So Musa, for how long have you been smoking?</th>
</tr>
</thead>
<tbody>
<tr>
<td>M</td>
<td>You mean... since I started from my youth?... eh... since I was at high school, it's almost 20 years now.</td>
</tr>
<tr>
<td>C</td>
<td>May you kindly tell me, why do you smoke?</td>
</tr>
<tr>
<td>M</td>
<td>Eish... I don't know... I started when I was only a teenager, I was young and experimenting... it must have been peer pressure, I wanted to be part of the smart group.</td>
</tr>
<tr>
<td>C</td>
<td>Don't you think you ought to stop? Is it really helping you in any way? You're telling me it's affecting your life and its created troubles for you.</td>
</tr>
<tr>
<td>M</td>
<td>I want to, but I think it's an impossible mission, I can't live without it, see it as my lifestyle... Its hard... you have no idea.</td>
</tr>
<tr>
<td>C</td>
<td>But I think you should try, I mean, there's nothing impossible here if you have made up your mind and you are determined. I know I stopped smoking myself, I was so determined and look at me now, I stopped... I haven't had a cigarette in five years, and mind you I was taking at least 20 a day... I mean a whole packet... but at last, not even 1... so you ought to stop, just put your mind to it... I'm here to help you through it.</td>
</tr>
<tr>
<td>M</td>
<td>Really, how did you do it? My uncle was smoking too, but he sometimes goes for one when he's drunk... but in my case, I think I need a miracle.</td>
</tr>
<tr>
<td>C</td>
<td>(Chucked)... what miracle?... you brought this on yourself Musa, and you have to work your way out of it... all you need is determination, not a miracle... (Chucked again). Diga is better than wrongways, I've seen worse cases...</td>
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**QUESTION 3**

Discuss the client-centred therapy with regards to the:

1. Main principles (3)
2. Theory constructs (5)
3. Therapeutic process (10)
4. Counselling skills (5)
5. Limitations (2)

**GOOD LUCK!!!!!!**