Ask Dr. Robertson (and Teela) 7— Elate, Hawkeye on Roberts: A Happy Counselling Psychology Family Affair



Scott Douglas Jacobsen



By Scott Douglas Jacobsen

Dr. Lloyd Hawkeye Robertson is a Registered Doctoral Psychologist with expertise in Counselling Psychology, Educational Psychology, and Human Resource Development. He earned qualifications in Social Work too. Duly note, he has five postsecondary degrees, of which 3 are undergraduate level. His research interests include memes as applied to self-knowledge, the

evolution of religion and spirituality, the aboriginal self's structure, residential school syndrome, prior learning recognition and assessment, and the treatment of attention deficit disorder and suicide ideation. In addition, he works in anxiety and trauma, addictions, and psycho-educational assessment, and relationship, family, and group counselling.

Our guest today is Teela Robertson, M.C., who earned a B.A. in Psychology from MacEwan University and an M.C. in Counselling Psychology from Athabasca University. She has been a Board Member of the Center to End All Sexual Exploitation (CEASE), and a Transitional Support Worker through the E4C Youth Housing Program. Now, she is a Registered Provisional Psychologist with a non-profit community agency.

Here we talk about generational differences in educational training, and private practice counselling psychology work in comparison to non-profit community work.

Listing of previous sessions with links at the end of the interview.

Scott Douglas Jacobsen: Let's start some of this within the context of a generational difference, for one, Lloyd and Teela, you come from different generations of counselling psychology. For two, you are a father and a daughter. You're family. Any points to make at the outset here?

Dr. Lloyd Hawkeye Robertson: Issues such as those involving gender diversity, transsexuality, changing male roles and multiple lifetime careers were, I think, normative markers for Teela's generation, and I consult with her regularly to avoid a feeling of being "stuck in the past." I have talked before in this series about treating every client as a culture of one and the process of exploring each person's unique culture has saved me from a lot of grief; however it is good to know what the client is talking about. I consult with Teela regularly about new and changing perspectives, and newer communication patters by which those perspectives are transmitted. I think I bring a historical perspective to the table.

Teela Robertson, M.C.: Given my dad raised me, I was influenced by his Adlerian approach, specifically regarding beliefs about human nature such as people are unique given their context, goal oriented, and capable of change. In my training I found myself automatically ascribing to an Adlerian framework which was pointed out by a professor early in my Masters. It was no surprise, but of course we typically try to differentiate from our parents. I agree my generation and particularly my personal experiences offered a different perspective for me to draw on when consulting with my dad. On the other side, my dad's range of professional experience and expertise is a platform for me to draw on as I continue to learn and develop my professional self.

Jacobsen: Another difference, though not necessarily or, at least, fully based on generations, is the private practice versus not for profit professional lives in the latter-2010s. Lloyd, you work through Hawkeye Associates, i.e., a private practice. Teela, you work with a not for profit agency.

Lloyd, how does private practice possibly provide more in-depth and intimate experiences with clients or patients in comparison to not for profit agencies? Teela, does a not for profit potentially give a more consistent and narrow range of possible issues and concerns of patients compared to a private practice clientele?

Lloyd: Although I have maintained a private practice under a registered business name since 1985, I have also worked for the provincial government, indigenous band governments, school boards and a community college. I have experience as a psychologist in each of those settings. While the private practise route allows the practitioner more flexibility in controlling his or her schedule, it also has some drawbacks. For example, if the client is a "noshow" normally the practitioner does not get paid for that missing hour; Further, most private practice work is funded through various plans each of which has their own limitations. For example, one Employee and Family Assistance Provider limits paid sessions to three every calendar year. Successful therapy usually takes longer than three sessions. Of course, there may also be limitations when employed as a psychologist by an agency. For

example, the provincial mental health program had a policy that therapists were not to do marriage counselling or ability assessments. School boards often did not like their psychologists doing mental health work. In private practice, I could do it all.

Teela Robertson, M.C.: Working in a community agency with accessible services that includes a sliding scale we see a wide range of client issues and concerns. Often this means clients who might otherwise only receive 3–5 sessions through insurance or employee assistance programs can continue therapy at a reduced rate. I am typically able to see my clients until we agree services are no longer required. Being in an agency there are some practice expectations to follow, however, at least in the agency I work there is a large amount of flexibility in terms of working with clients in our own style as opposed to having to conform to a specific modality or approach. What is somewhat unique although not exclusively, is that the agency I work for is faith-based and encourages us to take into consideration the client's cultural and spiritual beliefs to the extent we are competent to and the client wants us to. This is an area I believe my dad and I practice very similarly. In that we may intentionally included a client's cultural or spiritual practices as a strength they can draw on, something they may already be doing that they find helpful, prayer is a common example. Often times it is helpful to help clients consciously identify what it is they are already doing to get through tough times and do those things more intentionally, as long as they are productive for them.

Lloyd: There is research demonstrating that prayer can be effective in treating certain conditions such as depression and anxiety. But when you break down the results of that research you find that prayer involving a request that a deity give them something or do something to change their circumstance is not very effective. The prayer that is effective is non-demanding and contemplative, something like the notion of mindfulness. But often that is not sufficient. Psychotherapy is a value added process focusing on client empowerment and self-change. Using myself as an example, I was raised in a very religious family. Being a nervous sort, I found a quiet prayer to myself before each exam calmed me down and gave me the confidence to do my best. And it worked! I graduated from high school with a B average.

Then I went to university and eventually decided I had the ability to do better by establishing my learning goals and sticking to a plan to reach those goals. In the process, I no longer needed the prayer to calm me down because I was now confident in my knowledge and ability. Since then, with one exception in my masters program, I have had straight As. Adler said we all have within an innate drive he called "striving for perfection." The client who has stopped striving is discouraged. Our job, in part, is to help the client see that he or she has the capability to make a meaningful difference and to develop a plan to be the difference he has already decided is meaningful. As Teela said, that decision needs to be grounded in whatever cultural norms with which the client has chosen to self-identify.

Jacobsen: Lloyd and Teela, from educational experiences at the time of graduate training, what techniques were emphasized as core and then others as more secondary, even experimental—to provide a sense of the development of the discipline of counselling psychology over time?

Lloyd: In my masters program, it was emphasized that a psychotherapist had to pick one so-called "theory" of practise and learn it well. Eclectic practitioners were viewed as muddled and slightly irresponsible. In fact, these were not theories at all but competing schools of practise that regularly, and shamelessly, appropriated techniques from each other. Most psychologists today describe themselves as eclectic, and this has allowed for an evolving disciplinary paradigm that I described in my article on free will. This paradigm will, I think, allow for the development of psychology as a science, and has already allowed practitioners to refine their craft using best practices from a variety of schools.

Teela Robertson, M.C.: In my program Cognitive Behavioural Therapy (CBT) and Solution-Focused Therapy (SFT) were the popular choices. I believe this is due to the evidence backing CBT as well as the clear tools in each approach to help clients in very few sessions, this can be less intimidating for novice therapists. Another popular approach is mindfulness based techniques, I often draw on mindful techniques. Similarly to my dad's experience I was told to pick a theory I most closely prescribe to as many still hold a negative view of eclecticism as an approach but acknowledge most

therapists draw on tools from multiple theories. I am technically eclectic, although an Adlerian approach allows for this in terms of drawing on various techniques helpful for the client.

Jacobsen: Thank you for the opportunity and your time, Dr. Robertson and Teela.

Dr. Lloyd Hawkeye Robertson: You are very welcome.

Teela Robertson, M.C.: *Thank you for having me.*

For previous sessions, please see: Ask Dr. Robertson 1—Counselling and Psychology, Ask Dr. Robertson 2—Psychotherapy, Ask Dr. Robertson 3—Social and Psychological Sciences Gone Wrong, Ask Dr. Robertson 4—Just You and Me, One-on-One Counselling, Ask Dr. Robertson 5—Self-Actualization, Boys, and Young Males: Solution:Problem::Hammer:Nail, and Ask Dr. Robertson 6—It's All About Me, Me, Meme, and the Self: From First Nations to Second Nations, Building Third Culture Counselling.

Image Credit: Dr. Lloyd Hawkeye Robertson.

<u>Scott Douglas Jacobsen</u> founded <u>In-Sight: Independent Interview-Based</u> <u>Journal</u> and <u>In-Sight Publishing</u>. He authored/co-authored some <u>e-books</u>, free or low-cost. If you want to contact Scott: <u>Scott.D.Jacobsen@Gmail.com</u>.