

STUDY GUIDE

FOR THE

**NATIONAL COUNSELOR
EXAMINATION**

AND

CPCE

**COUNSELOR PREPARATION COMPREHENSIVE
EXAMINATION**

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I. HUMAN GROWTH AND DEVELOPMENT

1. **Development** is defined as systematic changes and continuities in the individual that occur between conception and death. These systematic **changes occur in three broad areas: physical development, cognitive development, and psychosocial development.**
2. **Theories** of how humans grow and develop fall into the following broad categories:
 - a. **learning** including behavioral theories, social learning theories, and information-processing theories
 - b. **cognitive** theories
 - c. **psychoanalytic** including the Neo-Freudian and ego psychology theories
 - d. **humanistic** psychology and self theories
3. **Human growth and development** changes can be viewed as:
 - a. **Qualitative:** change in structure or organization (for example, sexual development)
 - or*
 - Quantitative:** change in number, degree or frequency (content changes, for example, intellectual development).

b. Continuous: changes are sequential and cannot be separated easily (for example, personality development)

or

Discontinuous: certain changes in abilities or behaviors can be separated from others which argues for stages of development (for example, language development).

c. Mechanistic: this is the reduction of all behavior to common elements (for example, instinctual, reflexive behavior)

or

Organismic: because of new stages, there is change or discontinuity; it is more than Stimulus-Response. The organism is involved including the use of cognition. Examples would be moral or ethical development.

4. Self-concept

Self-concept may be **defined as your perception of your qualities, attributes and traits.**

At birth, infants have no sense of self. In early months this quickly changes.

By 24 months, most infants show signs of self-recognition; they can identify social categories they are in such as age and gender, "who is like me and who is not like me"; they exhibit various temperaments.

The **pre-school child's** self-concept is very concrete and physical. By 8 or so, they can describe inner qualities.

By **adolescence,** self-concepts (self-descriptions) become more abstract and psychological. **Stabilization** of self-concept attributes continues.

Cultural and family factors influence the development of attributes and some traits.

5. Developmental concepts

Nature vs. nurture: **Nature** includes genetic and hereditary factors.

Nurture includes learning and environmental factors.

Genotype and Phenotype: **Genotype** is the **genetic (inherited) makeup** of the individual.

Phenotype: the way an individual's genotype is expressed through **physical and behavioral characteristics.**

Tabula rasa: John Locke's view that children begin as a **'blank slate'** acquiring their characteristics through experience.

Plasticity: for most individuals **lifespan development is plastic** representing an easy and smooth transition from one stage to the next.

Resiliency: the **ability to adapt effectively** despite the experience of adverse circumstances. For example, some children, despite experiencing potentially damaging conditions and circumstances, seem to suffer few consequences.

6. Neurobiology

Neuroscience is sometimes referred to as the missing link in the mental health professions. Ivey, D'Andrea and Ivey believe that "the mind is the product of the activity occurring in the brain at the molecular, cellular, and anatomical levels, which are in turn impacted by a person's interpersonal relationships, cultural context, and societal experience."

Counselors, by using different theories, skills and interventions promote the

release of **various neurotransmitters** which **promote related brain changes**.

Neurotransmitters affect various cognitive, emotional, psychological and behavioral reactions that people have to their life experiences.

Neurotransmitters carry messages between neurons that stimulate reactions in the brain. These chemical reactions stimulate different parts of the brain leading to different cognitive, emotional, psychological and behavioral outcomes.

Four principal neurotransmitters important to counselors:

- a. **Acetylcholine** -- important for memory, optimal cognitive functioning, emotional balance and control
- b. **Serotonin** -- affects feelings, behaving, thinking; critical for emotional and cognitive processes; vital to sleep and anxiety control
- c. **Dopamine** -- important for emotional wellness, motivation, pleasurable feelings
- d. **GABA (gamma amino butyric acid)** -- helps reduce anxiety, promotes relaxation and sleep

Different counseling and therapy skills help promote the production of each of these four neurotransmitters.

7. **Abraham Maslow** (Humanistic Psychologist)

Maslow developed the **'hierarchy of needs.'**

People are always motivated to higher-order needs:

food/water to

security/safety to

belonging/love to

self-esteem/prestige/status to

self-actualization.