

Introduction to Counselling Practicum

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Key concepts, structure, and best practices for a successful field experience

1. What Is a Counselling Practicum?

Aspect	Description
Definition	A supervised, hands-on training period where counselling students apply theory to real client work.
Purpose	• Bridge the gap between classroom learning and professional practice. • Develop core counselling skills (assessment, intervention, ethics). • Build confidence in therapeutic relationships.
Typical Duration	300–600 supervised hours (varies by program and accreditation body).
Placement Settings	Community mental health centres, schools, hospitals, private practices, NGOs, crisis hotlines, etc.

2. Core Components of a Practicum

Component	What It Involves	Expected Outcomes
Client Contact	Direct sessions (individual, group, family) with real or simulated clients.	Demonstrate rapport-building, active listening, and intervention techniques.
Supervision	Regular meetings with a qualified supervisor (individual & group).	Receive feedback, reflect on practice, and refine case conceptualisation.
Case Documentation	Intake forms, treatment plans, progress notes, termination summaries.	Produce accurate, confidential, and ethically sound records.
Reflective Practice	Journals, self-assessment tools, case presentations.	Increase self-awareness of biases, strengths, and areas for growth.
Professional Development	Workshops, seminars, ethics training, research reading.	Stay current with evidence-based practices and ethical standards.

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3. Ethical & Legal Foundations

Principle	Practical Implications
Confidentiality	Secure storage of records, obtain informed consent, discuss limits of confidentiality.
Informed Consent	Explain the counselling process, boundaries, fees (if any), and the right to withdraw.
Competence	Work only within the scope of training; seek supervision for unfamiliar issues.
Dual Relationships	Avoid social or business relationships that could impair objectivity.
Cultural Competence	Respect client's cultural, religious, and identity contexts; adapt interventions accordingly.
Mandatory Reporting	Recognise signs of abuse, self-harm, or imminent danger; follow local reporting laws.

4. Typical Weekly Structure (Example)

Time	Activity
Monday	2 client sessions (1?hr each) + 1?hr case note writing
Tuesday	1?hr group supervision + 2?hr workshop on trauma?informed care
Wednesday	3 client sessions (including a 30?min intake)
Thursday	1?hr reflective journal entry + 1?hr peer case discussion
Friday	2?hr observation of senior counsellor + 1?hr ethics briefing

Adjust based on placement requirements and personal learning goals.

5. Skill Development Checklist

Skill Area	Early Stage	Mid Stage	Advanced Stage
Rapport & Alliance	Establish basic trust, use open-ended questions.	Maintain consistent empathy, manage ruptures.	Repair ruptures, co-create therapeutic goals.

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Skill Area	Early Stage	Mid Stage	Advanced Stage
Assessment	Conduct structured intake, use basic screening tools.	Integrate multiple assessment methods, formulate case conceptualisation.	Apply complex diagnostic frameworks, consider systemic factors.
Intervention	Use simple CBT or person?centered techniques.	Tailor interventions to	