



PERSON-CENTERED COUNSELLING OF WOMEN  
WITH HUMAN IMMUNODEFICIENCY VIRUS (HIV)  
AND INTERPERSONAL CRISES

BY

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## **ABSTRACT**

The person-centered approach to counselling was developed by Carl Rogers (1902-1987) in the United States based on the principles of humanistic psychology. Many studies conducted in the West have shown the effectiveness of this approach with various groups of clients. However there is limited number of studies investigating the benefits of this approach in the Malaysian setting. Consequently, a qualitative case study was conducted in an attempt to explore the outcome of person-centered counselling sessions underwent by women with HIV who were facing interpersonal crises. 'Women with interpersonal crises' in the present study refers to women who are facing issues or challenges in their relationships with their significant others such as marital issues or issues of being abused. The aim of this study is to investigate the outcome of employing person-centered counselling as an approach in helping these women. The overall findings show positive outcome of the person-centered counselling sessions on the participants. The characteristics of client's self-exploration in a non-directive, egalitarian relationship in exploring their personal growth was identifiable through several major themes that served as indicators of personal growth. The major themes that have been identified are Religiosity, Personal changes, Emotional changes, Cognitive changes, Plan of action, Behavioural changes and Selflessness. The important and distinct feature in this research is that one of the major signifiers of personal growth is the aspect of Religiosity.

## خلاصة البحث

إن طريقة الاستشارة النفسية القائمة على مركزية الفرد قد تم تطويرها من قبل كارل روجرز (1902-1987) في الولايات المتحدة الأمريكية بناء على مبادئ علم النفس الإنساني. وقد أظهرت العديد من الدراسات التي أجريت في الغرب فعالية هذه الطريقة مع مجموعات متنوعة من العملاء. إلا أن هناك نقصاً في عدد الدراسات التي تفحص فوائد هذه الطريقة في الحالة المألوية. من أجل هذا فقد تم إجراء دراسة حالة نوعية أو وصفية في محاولة لاستكشاف حصيلة جلسات طريقة الاستشارات النفسية القائمة على مركزية الفرد التي تمت على نساء مصابات بالايدز ومن يعانون من أزمات التواصل الشخصي والمرأة التي تعاني من مشكلات التواصل الشخصي يقصد بها المرأة التي تواجه قضايا أو تحديات في علاقتها مع الآخرين ذوي الأهمية لديها مثل المسائل الزوجية، أو ما يتعلق بإساءة المعاملة التي قد تكون تعرضت له. إن هدف هذه الدراسة هو فحص نتائج تطبيق طريقة مركزية الفرد في الاستشارات النفسية كمدخل استشاري توجيهي في مساعدة هؤلاء النساء. ولقد أسفرت نتائج البحث عن وجود حصيلة موجبة لتطبيق طريقة الاستشارة النفسية القائمة على مركزية الفرد وعلى المشاركين، وقد وجد أن خصائص الاستكشاف الذاتي للعميل في العلاقة غير الموجهة في استكشاف نموه الذاتي كان بالإمكان تمييزها من خلال عدد من الموضوعات الرئيسية التي ساعدت كمؤشرات على النحو الذاتي وهذه الموضوعات الرئيسية التي يمكن تمييزها هي التدين والتغيرات الشخصية والتغيرات الانفعالية والتغيرات الإدراكية وخطة الفعل والتغيرات السلوكية وإنعدام الاحساس بالذات. إن أهم وأبرز ملامح هذا البحث أن أحد الموجهات الرئيسية للنمو الشخصي هي ناحية التدين.

## APPROVAL PAGE

I certify that I have supervised and read this study and that in my opinion, it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a thesis for the degree of Master of Human Sciences (Psychology).

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## DECLARATION

I hereby declare that this dissertation is the result of my own investigations, except where otherwise stated. I also declare that it has not been previously or concurrently submitted as a whole for any other degrees at IIUM or other institutions.

Pamilia Lourdunathan

Signature .....

Date .....

INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA

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**PERSON-CENTERED COUNSELLING OF WOMEN WITH HUMAN  
IMMUNODEFICIENCY VIRUS (HIV) AND INTERPERSONAL CRISES**

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Affirmed by Pamilia Lourdunathan

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Signature

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Date

This dissertation is dedicated to my loving parents, Lourdunathan Andrew and  
Theresa as well as to my sweet sister, Sharon  
for the abundant prayers, love and care given.

I appreciate you.

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Finally, I remain solely responsible for any inaccuracies or shortcomings that exist in this dissertation.



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# **CHAPTER 1**

## **INTRODUCTION**

### **1.0 OVERVIEW OF THE CHAPTER**

This chapter will discuss the background of the present study, the overview of the person-centered counselling and the statement of the problem. Furthermore, the research objective, research question, significance of the study and definition of terms will be presented in this section.

### **1.1 BACKGROUND OF THE STUDY**

#### **1.1.1 Person-Centered Counselling**

Studies have found that one of the effective ways to help individuals with interpersonal crises and psychological dilemmas is by applying a counselling approach called person-centered counselling (Daruwalla, Fernandez, Salam, Shaikh, & Osrin, 2009; Kline, Pelias, & Delia, 1991; Laursen, Furman, & Mooney, 2006; Street, 2000; Rogers, 1957). Person-centered counselling was developed by Carl Rogers in the 1940s. Since then it has become a widely used model in mental health and psychotherapy settings (Wilkins, 2010). It is an approach of counselling that encourages a non-judgmental environment whereby the counsellor demonstrates three main core conditions for therapeutic change which are genuineness, empathy and unconditional positive regard (Rogers, 1957; 1961; 1980).

Genuineness refers to the counsellor being congruent and transparent in the helping relationship with the client. Empathy, as the second core condition is the ability to put oneself in another's situation and to have a deep understanding of the inner world of the client (Rogers, 1957; 1961; 1980) whereas, the third core condition,

which is unconditional positive regard, refers to the counsellor being non-judgmental and unconditionally accepting towards the client. As a result, when clients participate in this helping relationship they will then disclose their concerns freely thus moving towards the direction of personal growth (Rogers, 1957; 1961; 1980).

Personal growth refers to “(1) an openness to experience, (2) clients’ trust in themselves, (3) an internal source of evaluation, and (4) a willingness to continue growing” (Corey, 2009, p. 170). In other words, personal growth is the process or outcome of person-centered counselling that is indicated when the client has a sense of openness to his or her surroundings and is able to have confidence in his or her abilities. Furthermore as the client undergoes person-centered counselling, the client will become independent in terms of making decisions and will have the motivation to keep moving on.

Another unique characteristic of person-centered counselling is its nondirective, egalitarian relationship between the counsellor and the client whereby the client is not reliant on the counsellor for directive advice or guidance.

However, there is a viewpoint arguing that this approach is inappropriate in aiding individuals who are in a crisis as they may need directive interventions (Jones-Smith, 2011). This is due to the fact that the approach emphasizes more on the counsellor’s personal qualities while placing a lack of emphasis on the techniques used. Hence, the present study seeks to investigate the efficacy of utilizing this approach among Malaysian female clients with Human Immunodeficiency Virus (HIV) who are undergoing interpersonal crises.

### **1.1.2 Women with HIV and Interpersonal Crises**

Daily events and life experiences that have been accumulated can cause individuals to experience stress in their lives. Many individuals go through life difficulties and crises resulting in various psychological issues.

One of the common types of crises that exist is interpersonal crises which refer to conflicts among individuals that have yet to be reconciled or challenges in communication skills that result in stress within the relationship (Floyd, 2008). The phrase 'women with interpersonal crises' refer to women who are undergoing a highly stressful time in their interpersonal relationships as a result of conflicts among them and other individuals in their lives (Floyd, 2008). In other words, it can refer to women who are facing serious interpersonal conflicts, including marital issues, thus resulting in a low level of functioning in handling these life events.

Among some of the common causes of interpersonal crises are financial issues, careers, daily hassles of everyday routines, poor coping skills and lack in communication skills. It has also been shown that being diagnosed with an illness can take a toll on relationships thus resulting in interpersonal crises. For example, a person diagnosed with breast cancer may face emotional challenges and problems in interpersonal relationships (Kucko, 2011). Additionally, being diagnosed with HIV/AIDS (Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome) can similarly affect a person due to the stigma involved (Liu, 2010). Crowley (1995) identified the experience of facing HIV as a crisis in terms of a person's economic and interpersonal well-being.



The global statistics of individuals with HIV/AIDS can be seen in Table 1.1 below:

Table 1.1  
Global statistics of HIV and AIDS published by UNAIDS, WHO and UNICEF based on the statistics of 2010 (Source: AVERT, 2011).

People living with HIV/AIDS	34 million
Proportion of adult women living with HIV/AIDS	50%
AIDS deaths	1.8 million

The statistics of people who were infected with HIV as well as the cases of AIDS in Malaysia are as follows:

Table 1.2  
Number of New Infections and AIDS Cases by Gender per Year Reported in Malaysia (from 1986 until 2010) (Source: Disease Control Unit, Ministry of Health Malaysia, 2010, Prepared by: The Resource Centre, Malaysian AIDS Council).

Factor	Classification	HIV Infection	AIDS Cases
Sex/Gender	Male	82,603	14,482
	Female	8,759	1,870
Age Group (with highest number of cases)	30-39 years	39,304	7,033

It was also found that in 2010, the number of women infected with HIV in Malaysia was 668 while the number of AIDS cases among women was 167 (Malaysian AIDS Council, 2011). Therefore, based on the statistics shown, it can be seen that a significant amount of women in Malaysia and around the world have been infected with HIV thus creating a need for more psychological aid and services for these individuals. Zulkifli, Huang, Low, and Wong (2007) from United Nations

Malaysia found that the impact of an individual having HIV can affect his or her interpersonal relationships with family members or with friends. This could be attributed to the stigma and discrimination that may exist from having this illness. Furthermore, the psychological well being of individuals with HIV can also be affected as they may face inner fears or worries about their future. All of these situations can pose as a crisis to women who are faced with these challenges.

As a result, Zulkifli et al. (2007) stressed the need for additional programmes such as thorough counselling, outreach and follow-up care services as well as social support in aiding residents of shelter homes to have a holistic and positive lifestyle. This would be vital as it has been found that women with HIV have a considerably higher rate of exhibiting symptoms of depression and anxiety (Morrison, Petitto, Have, Gettes, Chiappini, Weber, Brinker-Spence, Bauer, Douglas, & Evans, 2002). Therefore, this situation has inspired the main purpose of the present study which is to investigate the efficacy of person-centered counselling as a form of psychological help for Malaysian women with HIV who are faced with interpersonal crises.

## **1.2 STATEMENT OF THE PROBLEM**

In Malaysia, person-centered counselling is considered as one of the main counselling theories in counsellor training curricula as well as in educational settings. Especially in counselling skills training syllabus, person-centered counselling is the main reference for training counsellors in helping individuals through their life endeavours. Hence, more research is needed to look into the efficacy and effectiveness of person-centered counselling in this area.

Although some research has been carried out on the utilization of person-centered counselling, there are limited studies on the application of this approach

among women with HIV who are facing interpersonal crises. This is because previous studies have concentrated on different groups such as university students (Mohamad, 2008), individuals with depression (Din, Noor, & Khan, 2008; Wilkins, 2010), individuals with anxiety (Stephen, Elliot, & Macleod, 2011; Wilkins, 2010), individuals with addiction problems (Fisher, 2010; Hadraba, 2011) and several other groups.

Martin (1992) found that person-centered counselling is still a widely practised interventional tool in Europe. However, in the Malaysian setting, studies on person-centered counselling are rather limited, creating a need for evidence of the feasibility of this approach. Moreover, Mason (2009) explained that there is a scarcity in the amount of literature that has been published involving person-centered counselling for the past 20 years. As more counselling centres are developed in Malaysia, there is a necessity for counsellors to look for effective interventional strategies to help women with HIV and interpersonal crises. As a result, the present study is an investigation on the characteristics of the participants' self-exploration in receiving person-centered counselling. This is because the efficacy of this approach in aiding these clients is not yet known.

Furthermore, although its efficacy has been widely supported in the West (Adams & Grieder, 2005; Brandes, 2006; Brodaty, Green, & Koschera, 2003; Feldacker, Torrone, Triplette, Smith, & Leone, 2010; Fisher, 2010; Lemoire & Chen, 2005; Morrell et al., 2009; Mutchler, Wagner, Cowgill, & McKay, 2011), limited studies have explored the effectiveness of the nondirective nature of person-centered counselling among Malaysian clients. This is because it was not known if this nondirective approach that does not involve the providing of directive advice, will be able to sufficiently aid Malaysian clients with HIV who are facing interpersonal

crises. There is a need to explore this aspect as most Malaysian clients have the tendency to expect directive guidance and advice from authoritative figures such as counselors due to the hierarchical aspect in Malaysian culture as well as due to the traditional mandated counselling in Malaysia (Abdullah, 2001; Abu Talib, 2010). In addition, there is also a need to explore the efficacy of person-centered counselling among Malaysian clients in order to examine the level of expressiveness and adaptability among Malaysian clients in adhering to this approach of counselling. This is because in Malaysian culture, a person's private problems are rarely expressed in detail or discussed freely with a stranger due to the need to 'save face'. Conflicting thoughts are also rarely expressed by most Malaysian individuals (Abdullah, 1996; Abu Talib, 2010).

### **1.3 RESEARCH OBJECTIVE**

In general, the objective of the present study is to investigate the efficacy and sufficiency of person-centered counselling in helping Malaysian women with HIV and interpersonal crises. Specifically, the present study aims to describe the characteristics of these women's self-exploration in a non-directive, egalitarian relationship with the person-centered counsellor in exploring their experience of personal growth.

Indicators of personal growth were identified through themes that emerged from the person-centered counselling sessions.

#### **1.4 RESEARCH QUESTION**

The research question of the present study is as follows:

What are the characteristics of self-exploration of the Malaysian women with HIV and interpersonal crises in a non-directive, egalitarian relationship with the person-centered counsellor in exploring their experience of personal growth?

Based on the findings of the characteristics of the client's self-exploration within person-centered counselling, the sufficiency or lack of it in the practice of person-centered counselling is indicated.

#### **1.5 SIGNIFICANCE OF THE STUDY**

In the aspect of the counselling profession, the present study will help existing and future counsellors identify the application of person-centered counselling across various cultures. This is because counsellors, particularly in Malaysia can gain an in-depth understanding of the experiences of women with HIV and who are in interpersonal crises. This will be beneficial in community counselling centres that wish to help more Malaysian women face similar challenges through their life endeavours.

From the aspect of empirical research and as mentioned earlier, there is limited availability of published literature on the efficacy of this approach among this group of clients.

On the whole, the utilization of person-centered counselling is to help these women experience self-exploration and personal growth in a non-directive mode of therapy.

## **1.6 DEFINITION OF TERMS**

### **Personal Growth**

#### ***Conceptual Definition***

Personal growth is defined as “(1) an openness to experience, (2) clients’ trust in themselves, (3) an internal source of evaluation, and (4) a willingness to continue growing” (Corey, 2009, p. 170). In other words, as a client undergoes the process of person-centered counselling, he or she will be more open to occurrences, have a sense of self-trust and be more independent in his or her life issues.

#### ***Operational Definition***

This study looks into clients’ process of achieving personal growth. The indicators of personal growth in relation to the above criteria were assessed based on the analysis of verbatim transcriptions of the counselling sessions conducted and the themes that emerged from the person-centered counselling sessions. Moreover, it took into consideration the nonverbal behavior observation and the journal entries by the participants. Indicators of personal growth in the present study were identified through these themes and among some of these indicators of personal growth include the participants being more open to occurrences and experiences in their lives as well as having a sense of belief and confidence in their abilities. These indicators can also be seen in the participants being independent in terms of decision making in their lives as well as having the willingness and motivation for self-improvement. These indicators are in line with the definition of personal growth as mentioned in Corey (2009).

## **Non-directive relationship**

### ***Conceptual Definition***

The non-directive nature of the counselling relationship in the present study is based on the description by Casemore (2011) who termed it as the client using internal resources without being reliant on the counsellor.

### ***Operational Definition***

In the present study, the non-directive relationship in the person-centered counseling sessions is operationally defined as the counsellor providing the clients with a therapeutic alliance to help them use their internal resources within them to aid them in their lives. The counsellor did this without trying to implement any change in the clients or being directive towards the client.

## **Egalitarian relationship**

### ***Conceptual Definition***

The egalitarian relationship in the present study is based on the definition postulated by Mearns and Thorne (2007) who illustrated the role of the counsellor and the client as being equal while the counsellor does not demand for the client's trust through any portrayal of being an 'expert'.

### ***Operational Definition***

In the present study, the counsellor and the client are deemed equal in this therapeutic relationship. Therefore, the client is not reliant on the counsellor for any specific guidance or advice but views the counsellor as an equal partner in this therapeutic alliance.

## **Clients' self-exploration**

### ***Conceptual Definition***

Clients' self-exploration refers to the process of the clients' sense of awareness of his or her experiences as they move towards achieving personal growth (Rogers, 1961; Thorne, 2011).

### ***Operational Definition***

In the present study, the clients' self-exploration was investigated based on the clients' disclosure of their experiences and understanding of themselves through the person-centered counseling sessions as they moved towards attaining personal growth.

## **HIV**

### ***Conceptual Definition***

HIV/AIDS (Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome) is a disease that can affect a person physically, emotionally or socially. It can also sometimes affect interpersonal relationships due to the stigma involved in this disease (Liu, 2010). Crowley (1995) also identified facing HIV as a crisis and a challenge in terms of a person's economic and interpersonal well-being.

### ***Operational Definition***

In the present study women with HIV is referred to as women who have been living with HIV.