

REPORT OF AN INTERNSHIP CONDUCTED AT THE  
MEMORIAL UNIVERSITY COUNSELLING CENTRE  
INCLUDING A RESEARCH PROJECT ENTITLED:  
A PARTIAL REPLICATION AND EXTENSION OF  
SHORT'S (1991) STUDY OF THE RELATIONSHIP  
BETWEEN INITIAL CLIENT AND  
COUNSELLOR PERCEPTIONS

CENTRE FOR NEWFOUNDLAND STUDIES

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PATRICIA ANNE LANNON ROSE







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by

©Patricia Anne Lannon Rose, B. A.

An internship report submitted to the school of  
Graduate Studies in partial fulfillment of the requirements  
for the degree of Master of Education

Faculty of Education  
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## ABSTRACT

The internship at the Memorial University Counselling Centre, St. John's, Newfoundland, was a valuable learning experience for the intern. During the 13 week placement the intern counselled 30 clients on a variety of concerns -- personal, career, and academic. She co-lead an assertiveness training group for six weeks and worked as a Career Information Assistant for five hours each week. In addition, the intern benefited from the professional supervision at the centre, videotaping of sessions, and participation in case conferencing. Overall, the internship experience provided the intern with the opportunity to enhance and refine her counselling skills and gain an appreciation for counselling research by conducting a study in this setting.

The research study was conducted with 29 of the intern's clients who gave informed consent. This study partially replicated and extended Short's (1991) investigation of the relationship between initial client and counsellor perceptions. Following the first, third, and fifth sessions, the intern and her clients completed the Counsellor/Client Post-Counselling Form (CPF). The CPF can be divided into six corresponding factors for counsellor and client. Results revealed a significant positive relationship on the initial session

between perceptions of each other as measured by the CPF. Significant changes were found over time on three of six factors for the counsellor and on two of six factors for the clients. Significant differences were found between counsellor and client ratings on four of six factors for the first session and three of six factors for both the third and fifth sessions. A comparison of male and female client ratings showed female client ratings to be significantly higher than those of males on two factors for the third session. The results showed no significant difference in client perceptions of the counsellor based on their perceptions of age difference and no significant relationship between counsellor and client ratings for those clients who terminated prematurely. Recommendations for further study are included.



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**CHAPTER I**  
**INTRODUCTION**

**Rationale for the Internship**

One of the options for graduate students completing a Masters degree in Educational Psychology is an internship with a related research project. The internship option consists of a 13 week placement in an approved setting which will provide the intern with counselling experience and the opportunity to undertake a research project appropriate to the setting. The writer selected the internship for the following reasons:

1. The intern, having worked in the counselling field for several years, would have an opportunity to receive feedback on her counselling skills thereby identifying her strengths and weaknesses.
2. The intern desired practical exposure to various theoretical approaches and techniques.
3. The internship setting would provide an opportunity to work with an adult population.
4. The setting would be conducive to conducting research on some aspect of the intern's counselling.



### **The Setting**

The site for the internship was the Counselling Centre at Memorial University of Newfoundland. Application was made to the Centre in the Fall Semester, 1991. This was followed by an interview with Dr. George Hurley, Associate Professor in Counselling and Training Director, and Dr. Elaine Davis, Associate Professor in Counselling, to discuss the intern's interest in and reasons for pursuing both the practicum placement and internship at this setting. As a result of this interview, the intern was offered the opportunity to complete a two day per week Practicum in the Winter semester followed by an internship starting with the first day of classes for the Spring semester. Dr. Norman Garlie, Faculty of Education (Educational Psychology), agreed to be the Education Faculty supervisor for the internship. On-site supervision was provided by Dr. Church, Dr. Davis, and Dr. Doyle, each for a block of time during the internship.

The University Counselling Centre was chosen by the intern for the following reasons:

1. the quality of the professional supervision provided by the Centre;
2. the opportunity to work with trained professionals and participate in case conferencing;

3. the continuation of the practicum placement would allow the intern to continue with clients over a longer period of time;
4. the opportunity to engage in individual counselling on a regular basis; and
5. the overall quality of the learning experiences provided by the Centre such as the Career Planning Centre, the Interpersonal Process Recall Training, and the opportunity to be involved in Group Counselling.

The Counselling Centre currently employs six full-time counsellors who are available to provide counselling on personal, social, academic, and career concerns. The full-time professional staff also includes a reading specialist and an administrative assistant. The professional faculty of the Counselling Centre are:

**Dr. Elizabeth Church, Assistant Professor in Counselling**

**Dr. Elaine Davis, Associate Professor in Counselling**

**Dr. Michael Doyle, Assistant Professor in Counselling**

**Dr. John Garland, Associate Professor in Counselling**

**Dr. George Hurley, Associate Professor in Counselling and Training  
Director**

**Lester Marshall, Reading Specialist**

Dr. B. M. Schoenberg, Professor & Director

Wayne Yetman, Administrative Assistant in Counselling.

The Counselling Centre Referral and Community Resources Handbook (1990) describes the primary function of the Centre to be "to help students release, develop, or direct their personal capabilities" (p. 5). The Centre offers services in four areas: Learning Enhancement Programs, Career Planning, Individual and Group Counselling, and Credentials Service. The Handbook (1990) describes these services as follows:

1. **Learning Enhancement Programs.** The Centre offers a number of short courses and structured workshops in which students learn to apply general strategies for handling university-level work more effectively. Specifically, these programs provide training in organizational techniques to comprehend study materials and, later, to recall the materials for essays, class presentations and tests. Programs routinely offered include Speed Reading and Comprehension, Organizing Ideas for Term Papers and Essays, and Oral Communication.
2. **Career Planning Centre.** The Career Planning Centre (CPC) is a drop-in facility where students may come informally, without appointment, to peruse various kinds of career and

educational information. Information available in the CPC can help broaden the student's awareness of various career alternatives and can provide detailed information on those alternatives. Other information includes:

- a) general career-planning materials;
- b) job hunting, resumé writing and interviewing materials;
- c) description of qualifications needed and entrance requirements for various careers;
- d) guides to different programs of study available in Canada, the United States, and the Commonwealth Countries; and
- e) a complete collection of Canadian university and college calendars....

3. **Individual and Group Counselling.** In addition to individualized personal counselling, the Centre offers specialized group and training programs. For example, the intellectual and personal growth of many students is blocked by such phenomena as fear of testing situations, continued high levels of cognitive and physical arousal, fear of asserting oneself, and other debilitating concerns. Such difficulties may be dealt with on

either an individual or group basis depending upon the student's wishes. Therefore, programs such as Test Anxiety Management, Relaxation Training, Biofeedback Training and Assertiveness Training are routinely offered.

4. **Credentials Service.** The Centre provides credential services for students in the Faculty of Education. The Counselling Centre Credentials Service holds all relevant employment documents in a central file. Copies are then sent to prospective employers at the student's request. This service is currently offered only to students interested in obtaining teaching positions. (pp. 5-6)

#### **Goals for the Internship**

The intern's main objective in this internship was to gain further practical experience in counselling adults on a variety of concerns. The intern, having just completed a practicum at the Centre, was familiar with the operation of the Centre and the roles of the various personnel. In the practicum she was exposed to the Interpersonal Process Recall and found it quite helpful in understanding the counselling process. The intern also co-led an Assertiveness Training Group and became familiar with the operation of the

Career Planning Centre. During the practicum she provided individual counselling to students and became comfortable with videotaping her sessions. The goals for the internship involved a further exploration of some of these areas and were as follows:

**Goal 1: To become familiar with the concerns and issues facing the university student population in the following domains: personal, social, academic, and career domains.**

This was accomplished through:

- (a) conducting 113 counselling sessions with 30 clients;
- (b) reading about the concerns of this particular population (see Appendix A for annotated bibliography); and
- (c) providing career and academic information to students in the Career Planning Centre for five hours each week.

**Goal 2: To improve individual counselling skills by identifying areas of personal strength and working on areas of weakness.**

This was accomplished through:

- (a) videotaping sessions with clients who gave consent;

- (b) critically reviewing videotapes and maintaining a log of personal reactions to counselling sessions;
- (c) meeting once per week with on-site supervisor to discuss cases, review segments of tapes, and receive feedback on counselling skills;
- (d) participating in a group supervision once per week which involved viewing videotapes and discussing the counselling process;
- (e) meeting with Dr. Church and Dr. Garlie at mid-term to discuss the intern's progress; and
- (f) meeting with Dr. Doyle at the end of the internship to discuss the intern's progress during the internship.

**Goal 3: To further develop a personal style of counselling and expose the intern to various theoretical approaches to counselling and psychotherapy.**

This was accomplished by:

- (a) attending a weekly group supervision which followed the format of the Interpersonal Process Recall sessions;
- (b) further reading in the area of counselling (see Appendix A for bibliography); and

- (c) discussion of cases with on-site supervisors.

**Goal 4: To further develop counselling skills by participating in case conferencing with other trained professionals.**

This was accomplished by:

- (a) attending a one hour session where another intern presented a case to the professional faculty of the Counselling Centre; and
- (b) preparing and presenting a detailed case study of a client who had been seen by the intern for six sessions and receiving feedback from the professional faculty of the Counselling Centre.

**Goal 5: To gain further experience in group dynamics.**

This was accomplished by co-leading an Assertiveness Training Group for six weeks. The workshop involved:

- (a) reading on the topic of assertiveness (see Appendix A for annotated bibliography);
- (b) conducting screening interviews to determine the appropriateness of those interested in participating;
- (c) preparing for each session by meeting with co-leader to discuss session format and material to be covered;
- (d) preparing mini-lectures;



- (e) leading group exercises;
- (f) helping participants set goals;
- (g) providing written feedback to participants on logs which were submitted each week;
- (h) preparing for and conducting a session on relaxation techniques;
- (i) participating after each session in a weekly meeting with the co-leader and Dr. Davis, supervisor for the group training, to discuss the dynamics of the group; and
- (j) receiving individual feedback and evaluation from the participants on the intern's personal style of group leadership as well as the participants' overall impressions of the group.

**Goal 6: To become familiar with the administration, interpretation, and scoring of a number of standardized tests and inventories.**

This was accomplished by:

- (a) administering and interpreting the following tests: the Strong-Campbell Interest Inventory, the Myers-Briggs Type Indicator and the Beck Anxiety Scale;
- (b) reading the manual for the MMPI; and
- (c) reviewing the tests available at the Counselling Centre.

**Goal 7: To conduct a research project which is compatible with the internship and will provide the intern with valuable information about her effectiveness with her clients.**

This was accomplished by conducting a research project aimed at:

- (a) determining the relationship between counsellor and client perceptions of each other in the initial counselling session;
  - (b) determining whether client and counsellor ratings changed over time;
  - (c) determining the relationship between client perceptions of the counsellor and the perceived age difference between client and counsellor;
  - (d) determining the relationship between client perceptions of the counsellor and same-sex or opposite-sex counsellor/client dyads.
- (For a more detailed description of the study, see Chapter III)

## **CHAPTER II**

### **THE INTERNSHIP: A DESCRIPTION OF ACTIVITIES**

This chapter includes a description of the activities undertaken during the internship period from May 11 to August 7, 1992. The intern did not require any orientation activities as she had already become familiar with the operation of the Career Planning Centre, intake procedures, referral agencies on campus, and programs and services offered through the Counselling Centre, during her practicum in the previous semester. As a result of the practicum experience, the intern was able to start seeing clients immediately.

The intern maintained a log of daily activities and the time allocated to each activity. From this log, a summary was compiled and is presented in Table 1.

Table 1

**Hours Allocated to Internship Activities**

<b>Activity</b>	<b>No. of Hours</b>
Career Planning Centre	54.0
Individual Counselling	113.0
Group Counselling	28.0
Review of Videotapes	16.0
Testing	2.5
Supervision	28.0
Case Conferencing	4.0
Research/Reading	116.5
Workshops	7.0
Maintaining Log and Case Files	47.0
<b>Total Hours Allocated to these Activities</b>	<b>416.0</b>

### **Career Planning Centre**

The intern performed the duties of a career information assistant in the Career Planning Centre (CPC) for approximately 5 hours per week for the 13 week internship.

The CPC is operated as a drop-in facility where students can obtain information on careers. The resources in the CPC include material on a wide range of occupations in the form of books, monographs, pamphlets, videos, and vertical files. A comprehensive collection of calendars for training institutions in Canada is available at the CPC. In addition, some materials are available on study in the United States and Commonwealth Countries. The CPC also has a good collection of books on topics such as resumé writing, interview skills, job search, and working and studying abroad. The atmosphere is an informal one where students can help themselves or seek assistance.

During her time in the CPC, the intern advised students with regard to academic regulations, provided information on graduate entrance examinations, helped students locate materials on various careers and courses of study, referred students to appropriate university contacts, and suggested individual career counselling when appropriate.

The intern also participated in monthly meetings which were attended by the personnel of the CPC and counsellors from the Counselling Centre. These meetings provided an opportunity to discuss any difficulties encountered by the assistants and to present any new information which might be of interest to those involved. During these meetings new acquisitions were presented and discussed. The total number of hours spent in the CPC was 54.

#### **Individual Counselling**

During the internship, the intern provided counselling to students for personal, career, and academic concerns. The intern was exposed to issues such as: relationship difficulties; coping with loss; sexual, physical and emotional abuse; sexuality issues; low self-esteem; problems dealing with anxiety; obsessive and compulsive behavior; and a variety of career-related concerns.

The intern counselled a total of 30 clients, ranging in age from 18-48. Of these, 12 were male and 18 were female. Of the 12 male clients, 7 sought counselling for personal reasons, 3 for career concerns, 1 for academic problems, and 1 for a combination of personal and career concerns. Of the 18 female clients, 9 sought counselling for personal reasons, 5 for career

concerns, 1 for academic problems, and 3 for a combination of personal and career concerns.

The intern spent a total of 113 hours in individual counselling with these 30 clients during her internship. The number of sessions per client ranged from 1-14. Nine clients were counselled for five or more sessions. A summary of client characteristics by presenting concern and range of sessions is provided in Table 2, and a breakdown by age and sex is provided in Table 3. This experience was very valuable to the intern as it allowed her to work with clients over time and observe the progression of the counselling process and the development of the counsellor/client relationship. The intern maintained a reactions log which required self-reflection and documentation of how her clients made her feel and how she could incorporate her reactions into her counselling sessions. The range of presenting problems provided the intern with exposure to a variety of situations and to several complex cases which contributed substantially to her professional development.

**Table 2**

Summary of Client Characteristics Based on Sex of Client and Presenting Concern

Presenting Concern	Male			Female		
	N	Range of Sessions	Mean No. of Sessions	N	Range of Sessions	Mean No. of Sessions
Personal	7	1-10	5.57	9	1-14	5.56
Career	3	1-2	1.33	5	1-4	2.40
Academic	1	--	1.00	1	-	1.00
Mixed Focus*	1	2	2.00	3	1-3	1.33

Note: \*Represents a combination of personal/career concerns.



Table 3

## Summary of Clients by Age, Sex, and Presenting Concern

Age Range	Male					Female				
	P	C	A	MF	Total	P	C	A	MF	Total
18-20	1			1	2	3	3			6
21-25	4	2	1		7	4		1	1	6
26-30	1				1				1	1
31-35		1			1	1	2			3
36-40	1				1				1	1
41-45										
46-50						1				1
<b>Total</b>	<b>7</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>12</b>	<b>9</b>	<b>5</b>	<b>1</b>	<b>3</b>	<b>18</b>

Key: Presenting Concern

P = Personal

C = Career

A = Academic

MF = Mixed Focus - P & C

### **Review of Videotapes**

The intern sought permission of each client to videotape the counselling session. Those who agreed were asked to sign a consent form, as per the regulations of the Centre (See Appendix B). Counselling was not contingent upon consenting to videotaping. Of the 30 clients seen, 11 consented to taping of their sessions. Of the 19 who refused, 14 of them were presenting personal concerns.

Due to the intern's caseload it was not possible to review every tape in full, but segments were viewed. The intern made notes for discussion which were used during supervision meetings. The videotaping allowed the intern to critically review her counselling style and behaviors as well as observe her progression over the internship. All videotapes were erased at the end of this internship.

Group supervision also provided the intern with the opportunity to view her own tapes, those of another intern, and a tape provided by a Counselling Centre supervisor.

### **Testing**

The intern interpreted the results of the computerized version of the Strong Campbell Interest Inventory for four clients. In addition the intern,

scored and interpreted the Myers-Briggs Type Indicator for two clients with respect to career and relationship issues. The Beck Anxiety Inventory was administered to a client, and the information was used in a subsequent counselling session.

The intern familiarized herself with the Minnesota Multiphasic Personality Inventory (MMPI) and its clinical scales, by reviewing the manual and questionnaire.

### **Supervision**

Supervision for the internship was carried out by the Education faculty supervisor and cross-appointed Counselling Centre faculty member, Dr. Norman Garlie, and by the Counselling Centre faculty supervisors who provided field supervision as per the following schedule:

May 13-June 25	-- Dr. Elizabeth Church
June 26-July 13	-- Dr. Elaine Davis
July 14-August 7	-- Dr. Michael Doyle.

Supervision was conducted in the following manner:

1. Regular one-hour weekly meetings were held individually with the Counselling Centre supervisor to discuss the intern's progress and concerns and to critically discuss cases and review segments of tapes.

2. Regular one-hour weekly group supervision meetings were held with a supervisor (Dr. Church for the first half of the internship and Dr. Doyle for the second half) and another intern. This time was spent critically reviewing each other's tapes and discussing them in an Interpersonal Process Recall format.
3. Dr. Garlie was unable to attend the bi-weekly supervision meetings but consulted regularly by electronic mail to discuss the intern's progress.
4. A mid-term meeting was conducted with Dr. Church, Dr. Garlie, and the intern to review the goals of the internship and discuss the intern's progress to date.
5. Dr. Church provided a mid-term evaluation of the intern's counselling skills, outlining the intern's strengths and suggesting areas to work upon.
6. Dr. Church, Dr. Davis, and Dr. Doyle were responsible for coordination and supervision of activities designed to meet the intern's goals.
7. Dr. Davis provided supervision of the Assertiveness Training group by meeting with the intern and co-leader once per week to discuss upcoming sessions and the group dynamics of the completed sessions.

8. Dr. Garlie assisted the intern in devising the internship proposal and completing the report. Throughout the process he advised the intern of any necessary changes.
9. Dr. Church, Dr. Davis, and Dr. Doyle each met with the intern at the end of their supervision period to discuss her progress, provide feedback, and to evaluate the extent to which goals were met.
10. A final evaluation was completed by Dr. Doyle at the end of the semester which coincided with the end of his supervision period.
11. Dr. Garlie met with the intern at the end of the internship to review the goals of the internship and discuss the intern's experience.

### **Case Conferencing**

The intern participated in two one-hour case presentations at the Centre. One was presented by another intern from his ongoing case load. Following each presentation, staff members who were present provided feedback and suggestions aimed at developing new insights.

The intern prepared and presented her case on June 19, 1992. There were a number of ongoing cases which would have been interesting to present. With the help of Dr. Church, the intern selected a challenging case of a client whom she had seen for six sessions. The intern felt that the opportunity to

present this case and receive viewpoints and recommendations from the Counselling Centre staff was quite beneficial.

Due to the vacation schedule, regular case conferencing was suspended for the summer months; consequently, the intern did not have the opportunity to observe cases being presented by the staff of the Centre. However, during the practicum experience at the Centre the intern did receive exposure to several such presentations.

#### **Research/Reading**

The intern was given one day per week to engage in research and reading activities. This time was very valuable to the intern in completing her internship report and research project. As well it provided the intern with an opportunity to read on a variety of topics as outlined in the annotated bibliography in Appendix A. The Counselling Centre library contained a good selection of materials on topics such as sexual abuse, concerns of university students, individual and group counselling, relaxation training, stress management, and counselling research. In addition to the materials available in the Centre's library, supervisors recommended books and articles which they felt appropriate.

### **Workshops**

The intern attended the Association of Newfoundland Psychologists' (ANP) Spring Conference. This conference consisted of a series of workshops presented throughout the day on May 22, 1992. The following sessions were attended: (a) Early Menarche as a Precursor of Dietary Restraint, (b) An Audiologist's and Psychologist's Perspective on Central Auditory Processing Learning Disabilities, (c) Revising the Hassles Component of the Hassles and Uplifts Scale: Evidence of Validity and Reliability, and (d) a panel discussion on the need for and feasibility of a Doctoral Program in Psychology at Memorial University of Newfoundland.

The workshops were presented by speakers in the psychology and counselling field from a wide variety of work settings. This conference provided the intern with an opportunity to be exposed to the types of research going on in Newfoundland and to expand her network of professional contacts.

### **Maintaining Log and Case Files**

During the internship, the intern maintained a daily log of activities which helped her compile a summary of the activities undertaken and the amount of time spent on each. Included in this log were reactions to counselling sessions and the internship itself. This log allowed the intern to

synthesize her thoughts and feelings and discuss with her supervisors how these reactions could be used to enhance her counselling.

As required by the Centre, intake summaries were completed for each client; these summaries included the presenting problem, the counsellor's view of the problem(s), and recommended constructive action. In addition to the intake summary, the intern maintained case file notes on each session. A master list of all clients seen was maintained during the internship. This master list provided a classification of concerns and the dates clients were seen. This list was submitted to the on-site supervisor at the end of the semester along with a case summary for each client (see Appendix C for copy of Case Summary Sheet). The case summaries were completed in the final week of the internship. A total of 47 hours were spent maintaining the log and case files.

### **Conclusion**

This chapter provided a description of the activities undertaken to meet the goals of the internship. As outlined, the intern participated in a variety of activities which she feels resulted in a very successful internship.

Of all the activities undertaken, the intern feels that the opportunity to engage in 113 hours of counselling with a variety of client concerns was



extremely valuable to her professional growth. In particular, being able to counsel 9 clients for 5 or more sessions, provided the intern with an opportunity to handle some rather complex cases. The direct supervision by Counselling Centre Faculty has given the counsellor exposure to various theoretical orientations and has allowed her to refine and develop her counselling skills. The Counselling Centre supervisors each allowed the intern to try out different approaches and provided encouragement and guidance.

The placement at the Centre provided an opportunity to gain insight into the concerns of the student population which included clients from age 18 to 48. The intern also benefited from conducting a research project which required her to become aware of her reactions to her clients and to obtain feedback from them. The intern has also gained an appreciation for counselling research.

Overall, the intern feels that this internship provided an excellent foundation upon which to further build counselling skills; she would highly recommend this setting to future interns.

**CHAPTER III**  
**RESEARCH COMPONENT**

**Introduction**

Following a review of the literature on counselling process, discussions with several professors involved in process research and a former intern who undertook a similar study, the intern undertook a correlational study involving counsellor and client ratings of her counselling sessions.

**Statement of Purpose**

The intern undertook a study with the following intentions:

1. (a) to determine if there is a relationship between counsellor and client perceptions of each other in the initial counselling session;  
(b) to determine if there is a change over time between initial client and counsellor ratings and subsequent ratings;
2. to determine if there is a relationship between client perceptions of the counsellor and the perceived age difference between client and counsellor;
3. to determine if there is a relationship between client perceptions of the counsellor and same-sex or opposite-sex counsellor/client dyads; and

4. to determine if there is a relationship between client and counsellor perceptions of each other and premature termination.

### **Rationale**

Carr (1977) states that in approaching the evaluation of counselling there are two possibilities: counsellors can use themselves as the main focus, or they can use the counselling program. He says that by focusing on themselves counsellors can gain information about their own effectiveness.

The intern was interested in learning more about the counselling process -- how she perceived and was perceived by her clients and the degree of congruence which exists between these perceptions. Stiles and Snow (1984) contended that "concordance between perspectives is of special interest for counsellors-in-training who are trying to learn their effect on clients" (p. 5). This study, with the intern herself as the main focus, has provided valuable feedback on her relationship with her clients and how it progressed over time.

Research on counselling process frequently refers to the working alliance which is also called the working relationship or therapeutic alliance, and is defined by Kokotovic and Tracey (1990) as "the feeling that both participants care for each other and that they can and will work productively toward a shared goal" (p. 16). They state that it is generally agreed that it

takes time to develop a sound working alliance and researchers do not usually assess it until after the third session. However they suggested, that with a move to time-limited counselling, it is logical to establish quick working alliances with clients. Kokotovic and Tracey also suggested that the level of working alliance established in the first session does not necessarily determine levels of subsequent sessions. Tessler (1975) suggested that independent variables which affect initial reactions to the counselling relationship may change over time. He selected the initial session for study "because if a client's initial reactions are unfavorable, he may not return to pursue the counselling relationship; even if he does return, he may no longer be receptive to influence" (p. 187). Brown (1970) stated that counsellors form impressions about their clients both before and during the counselling process, and these impressions have an impact on the counsellor-client relationship. LaCrosse (1980) found that clients' ratings of their counsellor increased significantly from pre-counselling to post-counselling.

Since Strong's (1968) suggestion that counselling represents an interpersonal influence process, a considerable amount of research has been done in this area. Researchers and practitioners have begun to recognize the relationship between successful counselling outcomes and compatible counsellor-client pairings (Simons & Helms, 1976). For example, Helms and

Simons's unpublished study (cited in Simons and Helms, 1975) found that college students' evaluation of counsellors was influenced by a combination of the variables -- sex and age. Unfortunately no information was provided on the criteria used.

According to Lasky and Salomone (1977), "few investigations have focused on the potential influence of therapist-patient age similarity on the psychotherapy relationship" (p. 511). They examined therapist-patient age similarity and therapist status in relation to interpersonal attraction in the psychotherapy dyad. They found that age similarity was more relevant for younger patients whereas therapist status had greater significance for older patients. In a review of the research on therapist-patient matching, Luborsky, Chandler, Auerback, Cohen and Bachrach (1971) concluded that "a feeling of similarity" (p. 153) provided a more significant relationship between the therapist and the patient. Lasky and Salomone (1977) suggest that age-related cues might communicate differences in values, attitudes, and other personal characteristics which may affect therapy outcome.

Howard, Orlinsky, and Hill (1970) discovered that female clients were more satisfied with female therapists following therapy. Hill (1975) states that many counsellors view it as appropriate to match the sex of client and counsellor. She says that feminist counselling is based on the premise that

female counsellors are better able to understand and empathize with female clients than are male counsellors. Hill examined how the sex of the client and the sex and experience level of the counsellor affect the client. The results showed more discussion of feelings by both counsellor and client in same-sex pairings. Furthermore, inexperienced males and experienced female counsellors elicited more feelings from their clients than did experienced males and inexperienced females.

Rating scales have been used to measure various counselling characteristics related to both process and outcome (Barak & LaCrosse, 1975; Dill-Standiford, Stiles & Rorer, 1988; Heesacker & Heppner, 1983; LaCrosse, 1980; Linden, Stone & Shertzer, 1965; Stiles & Snow, 1984). A typical way of using these rating scales is correlational research.

In this study, the researcher used two rating scales, the Counsellor Post-Counselling Form and Client Post-Counselling Form (CPF), to obtain both client and self-ratings of the counsellor. They are described in detail in the Instruments section. According to Sheppard (1978) six subscales can be extracted from each instrument. They are:

- 1) liking for counsellor/client
- 2) desire to see counsellor/client again
- 3) estimate of counsellor/client liking for each other

- 4) rating of level of understanding felt by counsellor/client
- 5) rating of counsellor performance by self and client
- 6) rating of accurate understanding of counsellor by self and client.

### **Significance**

This study was designed primarily to provide an opportunity to evaluate the intern's counselling process and to determine if there was congruence between her perceptions and those of her clients. As well as being of value to the intern, the findings on perceptions over time, age, and gender should be of interest to others engaged in process research. The information related to age and gender may provide the intern with information about the kinds of clients with whom she works the best.

### **Research Questions**

The intern attempted to answer the following questions through this study:

1. (a) What is the relationship between the counsellor's and clients' perceptions of and reactions to the initial counselling session, as measured by the CPF?

- (b) Which of the six factors measured by the CPF show the strongest/weakest relationships between counsellor and client ratings of the initial session?
  - (c) How do the mean ratings on the CPF of the counsellor and client compare for each of the rated sessions?
  - (d) Are there changes in mean ratings of the counsellor's and clients' perceptions over time?
2. What is the nature of the relationship between perceived age difference and client perceptions of the counsellor?
  3. What is the nature of the relationship between client perceptions of counsellor and same-sex or opposite-sex counsellor/client dyads?
  4. What is the nature of the relationship between client and counsellor perceptions of each other and premature termination?

### **Literature Review**

The review of the literature will cover research in the area of counselling as an interpersonal influence process. Studies related to both counsellor and client perceptions of each other and the counselling session will be presented in terms of source characteristics, initial impressions, changes



over time, premature termination, and counsellor variables such as age and sex.

### Interpersonal Influence Process

Strong's (1968) article on the social influence process, which sparked a proliferation of research on the counsellor's ability to influence clients, has been described as a landmark paper on counselling as an interpersonal influence process (Corrigan, Dell, Lewis & Schmidt, 1980; Egan, 1990). Since his article, similar terms have begun appearing in the literature, such as: the working alliance (Bordin, 1979; Kokotovic & Tracy, 1990), the helping alliance (Luborsky, Crits-Christoph, Alexander, Margolis & Cohen, 1983) and the interpersonal influence process (Heppner & Dixon, 1981).

According to Bordin (1979), the therapeutic outcome is in a large part determined by the strength of the alliance. Bordin sees the working alliance as including three features: "an agreement on goals, an assignment of task or a series of tasks, and the development of bonds" (p. 253). Luborsky et al. (1983) use the term helping alliance which they define as "the patient's experience of the treatment or the relationship with the therapist as helpful, or potentially helpful in achieving the patient's goals" (p. 480).

Bordin's working alliance differs from Strong's (1968) social influence on the dimension of mutuality. Bordin's conceptualization of the working alliance involves collaboration and is based on the degree of concordance between counsellor and client. Similarly, Gelso and Carter (1985) define the relationship as "the feelings and attitudes that counselling participants have toward one another, and the manner in which they are expressed" (p. 159).

If the counselling relationship does not get off to a good start, the poor working relationship may carry on throughout the sessions and possibly result in the client not returning (Tessler, 1975; Tryon, 1989). Bordin (1979) suggested that premature termination may be the result of a weak or poor alliance, while Kokotovic and Tracey (1990) found no relationship after the first session. According to Kokotovic and Tracey, the big issue in the relationship between the working alliance and premature termination is that the relationship may change and develop over time. They state that "the level of the working alliance established in the first session does not necessarily have to determine the level of subsequent sessions" (p. 21).

Marziali (1984) found that clinical expectations were supported by lower positive alliance ratings in the earlier sessions than in the final session. She suggests that patients and therapists typically use the first three to five sessions to establish the relationship, and if a reciprocal bond is established

through this early interaction, "then the work of therapy is carried through to a positive outcome, reflected in the higher final session ratings" (p. 422).

Horvath and Symonds (1991) conducted a meta-analysis of 24 studies which related the quality of the working alliance to therapy outcome. They found a moderate but reliable relationship between a good working alliance and a positive outcome in therapy.

Strong and Matross (1973) view the counsellor's power to bring about client change as being a function of the relationship with the client, and this change is brought about by "the impact of counsellor remarks on clients" (p. 26). Kaschak (1978) found that both therapist and client attributed change to different aspects of the relationship. The therapist attributed change in the clients to be a result of techniques, supportiveness, and confrontation; whereas, clients pointed to more general therapist characteristics such as the therapist being non-judgemental and just having someone with whom to talk. Strupp and Binder (1984) state that:

Often the therapist is being most helpful when he or she is receptive, silent, attuned, and trying to understand what the patient is communicating in symbolic or disguised ways. In particular, the therapist should resist the compulsion to do something, especially at those times when he or she feels under

pressure from the patient (and himself or herself) to intervene, perform, reassure, and so on. Frequently, underestimated is the degree to which the therapist's presence and empathic listening constitute the most powerful source of help and support one human being can provide to another. (p. 41)

Heppner and Heesacker (1983) suggest that enough questions have been raised by the data from real-life applied settings (LaCrosse, 1980; Heppner & Heesacker, 1982, Zamostny et al., 1981) to suggest "that the influence process is more complex than previously assumed, and to suggest that other variables as well as other persuasion models warrant investigation" (p. 38). According to Davis, Cook, Jennings and Heck (1977), "the general conclusion that the dispositions and motives of the counselor do interact with client-related factors suggests that the study of counselor variables is crucial for understanding the variability in counseling outcome" (p. 476).

#### Clients' Perceptions of Counsellor

Strong (1968) described the following factors, or source characteristics, extrapolated from social psychology research which he believed contributed to the counsellor's influence: expertness, attractiveness, trustworthiness, and involvement. Whether or not a counsellor is viewed as an expert depends

upon objective evidence such as diplomas, certificates, professional books, etc., and behavioral evidence which gives the client the impression that the counsellor knows what he/she is doing (Strong, 1968). According to Strong, attractiveness is determined by the client's feelings of similarity to, compatibility with, and liking for the counsellor. He views trustworthiness as a function of reputation, social role, sincerity, and openness as well as a "perceived lack of motivation for personal gain" (p. 218). Client involvement refers to the extent to which the focus is on the client's problem and affected aspects of his/her life. Strong suggests that the client's involvement can be enhanced by using exploratory techniques which keep the focus on the client's problem as well as techniques such as reflection of feeling or accurate empathy.

According to Strong (1968):

There is a strong interaction between the processes enhancing client involvement and those enhancing perceived counselor characteristics. The counselor's communication of therapeutic understanding, nonpossessive warmth, and genuineness and his smoothness and self assurance in guiding the various processes enhance his perceived expertness, trustworthiness, and attractiveness, as well as client involvement. (p. 223)

Barak & LaCrosse (1975) developed a rating scale to test Strong's (1968) prediction of the existence of three dimensions of counsellor behavior: expertness, attractiveness, and trustworthiness. This rating scale consisted of 36 bipolar scales and was called the Counsellor Rating Form (CRF). Their study provided support for the existence of the three dimensions and provided a valuable instrument for further research.

In 1983, Corrigan and Schmidt revised and shortened the CRF (Barak & LaCrosse, 1975) and created a new version -- the Counsellor Rating Form Short (CRF-S). The reliability and validity was tested and found to be compatible to the longer CRF. A description of the shortened scale is provided in Table 4.

Table 4

**Counsellor Rating Form Short Version**  
(CRF-S; Corrigan and Schmidt, 1983)

<b>Scales</b>	<b>Items</b>
Attractiveness	Friendly Likeable Sociable Warm
Expertness	Experienced Expert Prepared Skillful
Trustworthiness	Honest Reliable Sincere Trustworthy

Increasing attention has been given to client perceptions since Strong's (1968) social influence model of counselling, and there has been a focus in the research on the role of the perceptual ratings of expertness, attractiveness, and trustworthiness (Banikiotes & Merluzzi, 1981; Barak & LaCrosse, 1975; Corrigan & Schmidt, 1983; Heesacker & Heppner, 1983; Heppner & Dixon, 1981; Heppner & Heesacker, 1983; Kerr & Dell, 1976; LaCrosse, 1980; Lasky & Salomone, 1977; McKee & Smouse, 1983; Merluzzi, Banikiotes & Missbach, 1978; Peca-Baker & Friedlander, 1987; Wachowiak & Diaz, 1987; Wills, 1978; Zamostny, Corrigan & Eggert, 1981).

Three main categories of cues related to client perceptions have been identified in reviews of the social influence process in counselling (Corrigan et al., 1980; Heppner & Dixon, 1981). They are: 1) evidential -- how the counsellor looks, what he/she wears, how the office is furnished, decor and location; 2) reputational cues -- information made known about counsellor's professional and/or social background; 3) behavioral cues -- nonverbal and verbal behaviors of the counsellor.

Both the reviews of Corrigan et al. (1980) and Heppner and Dixon (1981) concluded that while much is known about the interpersonal influence process, the conclusions are limited by methodological issues. Consequently, Heppner and Heesacker (1982) undertook a study to examine the interpersonal influence process over time using actual counselling sessions. They found that client perceptions of expertness, attractiveness, and trustworthiness do change over time but not in the same direction. Some counsellors were perceived as significantly increasing in client perceptions of expertness, attractiveness, and trustworthiness while an almost equal number significantly decreased over time on the same variables. While there were varying degrees in the ratings, it is important to note that most counsellors were rated positively at the beginning and at the end. The findings suggest that, while initial impressions might be affected by the socially prescribed role that clients associate with a



professional counsellor, specific behavior as well as counselling outcomes influence perceptions over time. Heppner and Heesacker suggest that generalizability of their results is limited to counsellors-in-training and to a relationship developed within seven sessions. Contrary to these findings, Bachelor (1987) found that clients' perceptions of therapists were relatively stable throughout 20 sessions.

Heppner and Heesacker (1983) found that specific pre-counselling client expectations of counsellor expertness, attractiveness, and trustworthiness were not highly correlated with perception of the counsellor on the same dimensions after several weeks of counselling.

LaCrosse (1980) found support for his "main hypothesis that initial perceptions of the counselor are positively related to immediate post-counseling outcomes" with the single most powerful prediction being the client perception of counsellor expertness (p. 324). An unpredicted finding from this study was that the clients' ratings on the CRF increased significantly from pre-counselling to post-counselling. LaCrosse explains this by using a cognitive consistency model which "would predict that clients who gained more would be more likely to attribute high levels of expertness, attractiveness and trustworthiness to their counselor" (p. 325).

Tessler (1975) proposed that "research dealing with more advanced phases of counseling relationships should be sensitive to the possibility that the bases for satisfaction in social relationships tend to change over time" (p. 191). He suggests that there are three possible alternatives related to explaining changes in the counselling relationship over time. He proposes that independent variables which affect reactions to the initial counselling relationship may cease to be important after the first or second session; or, conversely, some independent variables which are unimportant initially may assume greater importance over time. The third possibility which Tessler suggests is that rather than ceasing to be important the independent variables may set the tone for future encounters.

According to LaCrosse (1977) "counseling effectiveness is determined to a large extent by the client's perceptions of the counselor's behavior" (p. 464). He emphasizes the importance of client feedback to counsellors-in-training in addition to counsellor/supervisor feedback.

Scheid (1976) undertook a study of subjects' perceptions of the counsellor in relation to the counsellor's behavior or the counsellor's status. His hypothesis that the counsellor who exhibits a high level of facilitative behavior would be viewed more positively than the counsellor exhibiting a low level was quite strongly supported. As well, the status of the counsellor had a

significant effect on only two measures -- counsellor competence and counsellor comfort. There was no significant effect on counsellor warmth, counsellor climate, client satisfaction, or general counsellor appeal.

Kokotovic and Tracey (1987) found that premature terminators were less satisfied with counselling than those who continued, and they also viewed their counsellors as less expert and trustworthy. They defined premature terminators as those who agreed to return following intake but did not. No differences were found in client perceptions between those who continued or dropped out on the dimensions of counsellor attractiveness or client-counsellor agreement on identifying the problem.

McNeill, May and Lee (1987) extended Heppner and Heesacker's (1983) study by examining the premature and successful terminator's perceptions of counsellors on expertness, attractiveness, and trustworthiness and satisfaction with counselling. They defined premature terminators "as clients who initiated their own termination of counseling without the knowledge or against the advice of the counselor" (p. 86). They found that those who terminated prematurely found their counsellors less expert, attractive, and trustworthy than did successful terminators and were also less satisfied with the counselling they received than were successful terminators.

### Counsellor's Perceptions of Clients

The results of Brown's (1970) study suggest that counsellor first impressions, such as personal liking, are related to selected outcomes and should be considered when matching clients and counsellors. He suggests that there may be implications for client-counsellor assignment and that just as counsellors refer clients when clear differences in values become apparent, so too perhaps, should counsellors do the same if their feelings toward the client are less than warm. He states that "In such a situation it is questionable whether the counselor pursues the relationship with his typical fervour or naturalness" (p. 557).

According to Dorn (1984) the counsellor's perceptions of the client are as important to the influence process as are the client's perceptions of the counsellor. According to Gelso and Carter (1985) better results are achieved when counsellors work with clients whom they like and with whom they work well. Scheid (1976) stated that "there is literature to suggest that a counselor's ability to influence may be as contingent upon who he is perceived to be as it is upon his behavior" (p. 504).

### Counsellor-Client Agreement

Client and counsellor perceptions of the counselling session have been shown to differ. For example, LaCrosse (1977) found no significant correlation between the ratings of experienced counsellors and their clients on the dimensions of expertness, attractiveness, and trustworthiness. Stiles and Snow (1984) reported that there was little relation between novice counsellor's judgment of session depth and value and their client's evaluations. However, client reactions could be moderately predicted by the counsellor's comfort in sessions and post-session positive mood. Lee, Uhlemann, and Haase (1985) concluded that both counsellor's and client's perceptions of the interview differ from one another particularly in the area of non-verbal behaviors. They suggest that it is important for beginning counsellors to be aware of discrepancies between their own and client's perceptions because "what the counselors do and what the clients perceive are two different things" (p. 186).

Marziali (1984) studied three viewpoints of the therapeutic alliance by having patients, therapists, and clinician judges rate the same therapy hours. Significant correlations were found between patients', therapists', and judges' ratings of the patients' positive and negative contributions and the therapists' positive contributions to the relationship; however, there was no agreement on the therapists' negative contributions. Similarly, in a study of therapist

perceptions of client reactions, Thompson and Hill (1991) found that therapists were more often accurate at recognizing positive client reactions than negative reactions.

The results of a study by Horenstein, Houston, and Holmes (1973) showed that counsellors and clients did not agree on the progress made in therapy. However, the correlation between judge's perceptions and client perceptions was statistically significant. An explanation given for the therapist's inaccuracy in judging the progress of therapy is that their high motivation to see their clients improve may have caused them to overrate the effects of their therapy.

Thompson and Hill (1991) suggest that counsellors may not be able to plan effective interventions if they are unaware of client reactions. In a study involving 16 therapists who each saw two clients for a single counselling session, therapists reported the same reaction cluster as did their clients in 50% of the instances. The reaction clusters studied were: 1) supported, 2) therapeutic work, 3) challenged, 4) negative reaction, and 5) no reaction. The match rates were highest for therapeutic work (62%), supported (54%), and no reaction (46%). Lower match rates were found for negative reaction (27%) and challenged (14%).

Dill-Standiford et al. (1988) found that overall, clients rated the sessions higher on depth than did their counsellors, and counsellors rated their feelings following the session as slightly more aroused and positive than their clients. However, overall, in rating themselves and predicting the others' ratings on the dimensions of depth and smoothness, counsellors and clients were in accord that their sessions were deeper and smoother than they were shallow or rough. As well they were in agreement on the positivity and arousal indices that "their mood was more positive and aroused than negative or quiet" (p. 50).

When counsellors rated their clients post-session mood positively, (Dill-Standiford et al., 1988) there was a tendency for clients as a group to also rate the counsellor's post-session mood positively. Another finding was that there tended to be agreement between counsellors and clients on which clients had smoother sessions.

In a review of factors influencing the outcome of psychotherapy, Luborsky et al. (1971) examined the effect of therapist-client similarity and found a positive relationship between similarity and outcome in 9 out of 14 studies. The types of similarity included social class, interests, values, and orientation to interpersonal values. They state that, "A feeling of similarity seems to provide a more significant relationship between the therapist and

patient and therefore, a better outcome to treatment" (p. 153). Tessler (1975) found similar results in his work. However, Howard, Orlinsky, and Hill (1970) found evidence that some patients are satisfied with a counsellor whose personal characteristics are similar to theirs, while others found the least satisfaction with a similar therapist. According to Wills (1978) there is evidence that helping professionals have difficulty maintaining positive regard for clients who are very dissimilar.

In a recent study, Berry and Sipps (1991) suggested that in situations where the client has low self-esteem similarity to the counsellor may result in premature termination. Their results supported the idea that a client who devalues him or herself is likely to devalue the same aspects of the counsellor who may be similar. They suggest that counsellors who become aware of a low level of self-esteem in their clients should be cautious of self-disclosure which might lead the client to devalue the counsellor and result in premature termination.

#### Age and Client/Counsellor Perceptions

Lasky and Salomone (1977) found that psychiatric in-patients under 30 years of age rated younger counsellors as more attractive to them; whereas, in-patients over 30 showed no significant differences in their attraction ratings of



younger vs. older counsellors. Similarly, Heppner and Dixon (1981) state that while no conclusions could be drawn from their review of the literature about the effect of the age of the counsellor on perceived counsellor attractiveness, a preliminary finding suggests that the effect of age may be more important for clients under 30 years of age.

Karasu, Stein, and Charles (1979) found that therapists had a preference for treating those in younger age groups and "the closer the age of the therapist to the depressed patient, the greater the correlation in ratings and the greater the likelihood of the patient remaining in treatment" (p. 103).

Results of an investigation by Simons and Helms (1976) of women's preferences for counsellors on a number of variables -- marital status, age, and sex -- suggested that women seek counsellors who are older than themselves. Both college and non-college women preferred women counsellors who were in the 35-45 and the 55-65 age range while non-college women had a preference for the oldest group 55-65.

#### Effects of Counsellor Gender

A review of the literature on the effects of counsellor gender on the therapeutic alliance showed equivocal results. A study undertaken to determine if the sex of the therapist had any direct impact on the treatment

process (Orlinsky & Howard, 1976) found that "fifteen of the 46 dimensions of patient experience showed some statistically significant difference simply as a function of the sex of the therapist" (p. 84).

In a factor analysis of patient-interview items, Jones and Zoppel (1982) showed that women therapists formed more effective therapeutic alliances than did male therapists; however, both male and female clients of male counsellors reported that therapy caused a significant improvement.

Simons and Helms (1976) found that non-college women subjects viewed female counsellors as better able to understand their problems and reported greater ease of expression and comfort with women. Both college and non-college women anticipated that "women counselors would be superior to men in all areas measured" (p. 386) by the study.

Merluzzi et al. (1978) conducted an analogue study on the effects of counsellor sex (male or female), experience (expert or non-expert), and self disclosure level (low or high) in relation to perceived expertness, attractiveness, and trustworthiness. They found that female experts were rated as more expert than female non-experts, but there was no difference in the ratings of male experts and non-experts. The authors state that these results may suggest that stereotypic impressions of women may have been a factor in subjects attributing more expertness to female expert counsellors and less to

non-expert female counsellors. A woman with substantial credentials may be assumed by subjects to be substantially better than her male counterparts, or a woman with no credentials may be seen as much less competent than a man who also lacks credentials. Merluzzi et al. (1978) also found an interaction based on sex of the counsellor. Low disclosing female counsellors were rated as more trustworthy than high-disclosing female counsellors.

Simons and Helms (1976) state that the majority of studies up to that time have found that women clients and/or students prefer male counsellors. Similarly, in an analogue study conducted by Feldstein (1982) results indicated that both males and females prefer male counsellors. The author suggests that "this finding appears to be an example of students' traditional sex role beliefs" (p. 420). Male counsellors received higher credibility scores than did female counsellors. However, students showed a strong preference for feminine counsellors regardless of sex. This is consistent with the sex role stereotype of the counsellor who is a helper or good listener. According to Feldstein the preferred counsellor "appears to be one who is warm, supportive, feelings-oriented and empathic" (p. 420). These traits are particularly important in the early stages of counselling, and Feldstein suggests that because these students rated the initial counselling session these traits may have taken on greater importance.

Kaschak (1978) found that clients were most responsive to same-sex therapists and asserted that same-sex pairs are most likely to result in a positive therapeutic outcome. In her 1979 study Feldstein attempted to provide empirical data to support the feminist argument for same-sex pairings in counselling, but her findings did not support this argument. In fact male subjects reported greater satisfaction and a higher level of counsellor regard with feminine counsellors than masculine counsellors regardless of the counsellor's sex. In contrast, female subjects reported greater satisfaction and higher counsellor regard with masculine counsellors regardless of the counsellor's sex.

Howard et al. (1970) studied the extent to which personal characteristics of patients and therapists influenced patient satisfaction. Patients were all females, classified by age, marital status, and parental status, while the therapists were classified by sex in addition to these variables. This resulted in 56 possible patient therapist combinations. The overall finding was that female patients generally found psychotherapy with female therapists to be more satisfactory than with male therapists.

Hill (1975) found that clients of female counsellors reported more satisfaction with the session than did clients of male counsellors. She also found that both inexperienced male and female counsellors were most empathic

and elicited more feelings with same-sex clients than they did with opposite-sex clients. Hill's explanation for this was that counsellors who are just learning the skills may be better able to identify with persons who have had similar experiences. However, Hill cautions that discretion be exercised in applying these data to the counselling situation and that it might be more fruitful to use this data to create an awareness among counsellors "that they do act differently with different clients and that this does affect the process of counseling" (p. 10).

Orlinsky and Howard (1976) found that while for many patients the sex of the therapist was irrelevant their analysis suggests that single women and women with depressive reactions found more support and satisfaction with women therapists.

Banikiotes and Merluzzi (1981) found that subject's ratings of comfort in disclosing were greater with female rather than male and greater with egalitarian rather than traditional counsellor. Female egalitarian counsellors were perceived as the most expert while female traditional counsellors were perceived as least expert.

In a study by Blier, Atkinson, and Geer (1987), the feminine sex role was rated higher for personal concerns than the masculine sex role. While the converse was found for assertiveness concerns.

Tryon (1986) examined the relations among various client and counsellor characteristics and engagement in counselling for more than one session after intake. There was no relationship between sex of counsellor and whether or not clients returned for another session, and there was no significant relationship between client engagement and same-sex or opposite-sex pairs.

In a university counselling centre, Betz and Shullman (1979) found that clients of both sexes were significantly less likely to return following intake if interviewed by a male counsellor. As well, clients referred by a male intake counsellor to a male counsellor were significantly less likely to return than were clients seen by and/or referred to female counsellors.

While the results on return rate and counsellor gender found by Krauskopf, Baumgardner, and Mandracchia (1981) were in the same direction as those found by Betz and Shullman (1979), they were not significant. Epperson's (1981) results in a replication and extension of Betz and Shullman's (1979) study found the opposite effect -- male counsellors had a higher return rate than female counsellors.

### Summary

The review of the literature has included studies related to the interpersonal influence process. Studies which examined counsellor and client perceptions of each other in relation to source characteristics, initial impressions, and changes over time were included. In addition, studies which considered the relationship between counsellor and client perceptions and premature termination were reviewed as well as studies related to the effects of counsellor age and sex.

The literature review revealed that the counsellor/client relationship is a complex subject involving a variety of variables. While several studies showed that counsellors and clients generally differ in their perceptions of each other and the counselling session on a number of dimensions (Horenstein, Houston & Holmes, 1973; LaCrosse, 1977; Lee, Uhlemann & Haase, 1985; Stiles & Snow, 1984), others found that there was agreement on the therapists' positive contributions but not on their negative contributions (Marziali, 1984; Thompson & Hill, 1991). In all but one study (Bachelor, 1987), client perceptions were found to change over time but not necessarily in the same direction (Heppner & Heesacker, 1982; Heppner & Heesacker, 1983; LaCrosse, 1980). Findings of studies related to premature termination

consistently showed that premature terminators were less satisfied with counselling than successful terminators (Kokotovic & Tracey, 1987; McNeill, May & Lee, 1987).

Client and counsellor perceptions of each other were shown to be influenced by variables such as age and sex. While the literature showed few studies related to the effects of age on client/counsellor perceptions, two studies indicated that this effect may be more important for clients under 30 years of age (Heppner & Dixon, 1981; Lasky & Salomone, 1977). A large body of literature existed on the effects of counsellor gender and the therapeutic alliance, however the studies showed equivocal results. The complexity of the variables involved is demonstrated by the findings of Orlinsky and Howard (1976) which showed statistically significant differences on 15 of 46 dimensions of patient experience as a function of the sex of the therapist.

In view of the wealth of research on the social influence process, Gelso and Carter's (1985) description of the relationship between counsellor and client as "an elusive, sometimes mystical, frequently debatable, and always interesting aspect of the psychotherapy enterprise" (p. 155) seems apropos.



### **Methodology**

The methodology was similar to Short's (1991) study. This study was conducted at the Memorial University Counselling Centre with the intern's clients who gave informed consent. Both the intern and the client rated their perception of and reactions to the initial, third, and fifth sessions using a Client and Counsellor Post-Counselling Form (CPF) as adapted from Sheppard (1978) by Short (1991). These forms are included in Appendix D. In addition to the client form, following the initial session only clients were asked to provide information regarding perceived age difference between client and counsellor and to indicate client gender (see Appendix E).

### **Subjects**

The subjects were clients seeking counselling at the Memorial University Counselling Centre during the period of the internship. At the beginning of the initial session, the intern asked clients to participate in an anonymous evaluation of the counselling provided by the intern. Clients were asked to sign an informed consent form (see Appendix F). Twenty-nine of the intern's 30 clients met the criteria for participation in the study. The criteria was simply that the client had not been previously counselled by the intern and was willing to give informed consent. One client was excluded because he had

been counselled by the intern in the preceding semester. All of those meeting the criteria agreed to participate. A summary of client characteristics is provided in Table 5.

Table 5

**SUMMARY OF CLIENT CHARACTERISTICS BY  
AGE, SEX, MARITAL STATUS AND WHETHER  
FROM A RURAL COMMUNITY OR URBAN CENTRE**

Age Range	Marital Status	RURAL *		URBAN *	
		Male	Female	Male	Female
18-20	Married	--	--	--	--
	Single	--	2	2	4
	Separated	--	--	--	--
21-25	Married	--	--	--	--
	Single	6	2	--	2
	Separated	--	--	--	1
26-30	Married	--	--	1	--
	Single	--	1	--	--
	Separated	--	--	--	--
31-35	Married	--	--	--	1
	Single	--	--	1	2
	Separated	--	--	--	--
36-40	Married	1	--	--	--
	Single	--	--	--	--
	Separated	--	--	--	--
41-45	Married	--	--	--	1
	Single	--	--	--	--
	Separated	--	--	--	--
46-50	Married	--	--	--	--
	Single	--	--	--	--
	Separated	--	--	--	1
<b>Total</b>		<b>7</b>	<b>5</b>	<b>4</b>	<b>12</b>

**Note:** n=28 -- one female from an urban centre in the age range of 21-25 did not provide information on marital status.

\*Rural and urban were not defined but left to the client's interpretation.

### **Counsellor**

The intern conducted the counselling sessions during her three month internship at the Counselling Centre and analyzed the results following the experience. She applied the skills learned from Gerard Egan's counselling model. A summary of Egan's (1990) model is presented in Table 6.

### **Instruments**

The instruments used were the Counsellor Post-Counselling Form and the Client Post-Counselling Form which were adapted by Short (1991) from Sheppard (1978) for use in a similar study. Sheppard (personal communication, January 31, 1992) has supported the continued use of the adapted version. The CPF consists of two rating forms each containing 20 statements describing feelings about the perceptions of the counselling session. The responses are recorded on the form using a scale from one to six which ranges from strongly disagree to strongly agree. Sheppard (1978) reported split-half reliability coefficients of .86 for the Counsellor Post-Counselling Form and of .82 for the Client Post-Counselling Form. The scale for each form can be broken down into six corresponding factors as shown in Table 7. However, the reader is cautioned to be alert to the fact that these factors described by Sheppard and presented in Table 7 were not factor analyzed.

**Table 6** (Egan, 1990)**Egan's Counselling Model**

<b>Stage I:</b>	Present scenario: identifying and clarifying problem situations and unused opportunities.
	Step I-A: helping clients tell their stories
	Step I-B: identifying and challenging blind spots
	Step I-C: search for leverage.
<b>Stage II:</b>	Preferred scenario:
	Step II-A: helping clients develop a range of possibilities for a better future
	Step II-B: helping clients translate preferred scenario possibilities into viable agendas
	Step II-C: helping clients identify incentives which will enable commitment.
<b>Stage III:</b>	Formulating Strategies and Plans:
	Step III-A: helping clients brainstorm a range of strategies for implementing agendas
	Step III-B: helping clients choose a set of agendas that fit best

**Step III-C:** helping clients formulate a plan for accomplishing the goals of the preferred scenario.

Table 7 (Taken from Short, 1991)

**Factors of the Counsellor/Client Post Counselling Form (CPF)**  
*(Adapted from Sheppard, 1978)*

<b>Factors</b>	<b>Counsellor Post-Counselling Form</b>	<b>Client Post-Counselling Form</b>
Factor 1	Counsellor liking for client (Items 1, 3, 18, 19)	Client liking for counsellor (Items 1, 18)
Factor 2	Counsellor desire to see client again (Items 2, 7, 12)	Client desire to see counsellor again (Items 5, 8, 10)
Factor 3	Estimate of client liking for counsellor (Items 4, 9, 15, 16)	Estimate of counsellor liking for client (Items 7, 14)
Factor 4	Counsellor rating of level of understanding felt by client (Items 17, 20)	Client rating of level of understanding felt by counsellor (Items 2, 6)
Factor 5	Counsellor rating of own performance (Items 6, 10, 11)	Client rating of counsellor performance (Items 12, 17, 19, 20)
Factor 6	Counsellor rating of accurate understanding (Items 5, 8, 13)	Client rating of counsellor accurate understanding (Items 11, 13, 15)

Included with the Client Post-Counseling Form was a cover sheet (Appendix G) outlining the instructions (Short, 1991) and assuring clients of anonymity. A separate sheet requesting personal information was used following the initial session only (Appendix E).

### **Procedure**

#### **Client's Responsibility**

1. Those who agreed completed the Client Post-Counseling Form immediately following the first, third, and fifth sessions and provided the personal information following the first session only.
2. The client returned the form to the receptionist before leaving.

#### **Intern's Responsibility**

1. Before the start of the study, the intern identified the three sets of the counsellor and client forms by noting the number of the session -- first, third, or fifth on the top right hand corner of each form. These forms were placed in the files to be used for each client, along with the form requesting the personal information.



2. At the beginning of the initial session, the intern advised the client of the purpose of the study and his/her responsibility, if he/she agreed to participate. Following the explanation, the intern obtained the client's permission and collected the signed consent form (see Appendix F).
3. The intern provided the client with the forms following the first, third, and fifth session and instructed the client to complete the form in the reception area. Following the first session only, the client was asked to provide information on perceived age difference between self and counsellor and to state his/her gender.
4. The intern completed the Counsellor Post-Counselling Form immediately following the first, third, and fifth sessions and returned it to the receptionist.
5. Upon completion of the study, the intern collected the files containing the coded rating scales.

#### **Receptionist's Responsibility**

1. The receptionist deposited completed CPF forms into a confidential file.

2. This confidential file remained locked in the receptionist's desk until the end of the semester.
3. At the end of the semester, the receptionist coded the CPF's for each client before handing them over to the intern.

### **Limitations of Study**

The following is a list of limitations of the internship study:

1. A small sample, from a university counselling centre, of 29 clients and one counsellor as well as the reductions in sample size from 29 in the first session to 13 in the third session and 8 in the fifth session make it difficult to make generalizations about the results.
2. The small number of cases may have accounted for the lack of significance for premature terminators.
3. Reasons for premature termination are not known.
4. Although participants could opt out of the study, they may have been influenced by the counsellor's asking them to participate.
5. In spite of being assured anonymity, clients may have wanted to please the counsellor.

6. Seeing a counsellor-in-training may have influenced client responses.
7. The factors as described in this study were not arrived at by analysis and therefore are not necessarily true factors in a statistical sense.
8. In drawing conclusions about same-sex and opposite-sex counsellor/client dyads, it should be noted that there were no same-sex dyads for males.
9. The ambiguity of several of the statements on the CPF may have resulted in different interpretations.

### **Analysis**

Analysis involved correlational methods and descriptive statistics using the Statistical Package for the Social Sciences (SPSS-X). Negatively worded items were reverse scored for the correlational analysis, calculation of means and standard deviations, and the one-way analysis of variance.

Pearson Product Moment Correlation Coefficients were calculated for all items on the CPF completed by both the counsellor and client on the initial session and between the corresponding six factors on the CPF. Further analysis of data involved the calculation of means and standard deviations for

each of the six factors on the CPF for the first, third, and fifth sessions, and paired sample t-tests to determine changes over time.

A one-way analysis of variance (ANOVA) was conducted to determine the nature of the relationship between perceived age difference and client perceptions. Means and standard deviations were calculated by gender for each of the six factors of the Client Post-Counselling Form to determine the nature of the relationship between same-sex and opposite-sex counsellor/client dyads.

Correlational analysis was conducted between counsellor and client ratings of clients who terminated prematurely. Further analysis of this data was conducted to determine the percentage of premature terminators rated negatively by the counsellor on the initial session as well as the percentage of premature terminators who rated the counsellor negatively.

Additional analysis involved frequencies and percentages of counsellor and client ratings for the 20 items of the CPF.

### **Results**

The intern attempted to answer four main research questions related to counsellor and client perceptions as measured by the CPF. Each of these questions is stated below and following each question the results are presented.

However, before presenting the results, two caveats are in order -- one in relation to the number of cases and the other regarding the usage of the term Factor.

While there were a total of 29 clients who attended the first session, a number of clients failed to respond to various questions resulting in missing data. To allow proper data analysis, the number of counsellor responses for each item of the Counselling Post-Counselling Form was reduced to match the number of client responses as shown in the various tables. A total of 13 clients completed the Client Post-Counselling Form after the third session, and 8 clients completed the Client Post-Counselling Form after the fifth session, resulting in a reduction of the number of cases over time. Missing responses on these forms further reduced the number of cases.

The reader should keep in mind that the Factors first described in Table 7 (p. 71) and presented in subsequent tables were not obtained using factor analysis but represent a logical method of grouping responses.

It should also be noted that the terms intern and counsellor are used interchangeably throughout the remainder of this paper.

**Question 1(a). What is the relationship between the counsellor's and clients' perceptions of and reactions to the initial counselling session, as measured by the CPF?**

To answer this question, Pearson Product Moment Correlation Coefficients were calculated for all items completed by both the counsellor and the client on the initial session (Table 8) and between the six factors on the Counsellor and Client Post-Counselling Forms. (Note:  $n$  ranges from 23-29 for the initial session).

Table 8

**CORRELATIONS BETWEEN COUNSELLOR AND CLIENT RATINGS  
OF INITIAL SESSION ON CPF**

<u>FACTORS</u>			
Counsellor Post- Counselling Form	Client Post- Counselling Form	n	Pearson Product Moment Correlation Coefficient
Counsellor liking for client	Client liking for counsellor	29	.348*
Counsellor desire to see client again	Client desire to see counsellor again	28	.284
Estimate of client liking for counsellor	Estimate of counsellor liking for client	26	.326*
Counsellor rating of level of understanding felt by client	Client rating of level of understanding felt by counsellor	28	.505**
Counsellor rating of own performance	Client rating of counsellor performance	25	.290
Counsellor rating of accurate understanding	Client rating of counsellor accurate understanding	26	.698***
CPF (all items)	CPF (all items)	23	.491**

Note: Variance in n is because of missing data.

\*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$

When counsellor/client perceptions for all items of the initial session were compared, a significant correlation was found ( $r=.491, p<.01$ ). Four of the six factors show a significant positive correlation between counsellor and client ratings. Significant correlations were found between Factor 1, counsellor and client ratings of liking for each other ( $r=.348, p<.05$ ); Factor 3, counsellor and client estimates of liking by the other ( $r=.326, p<.05$ ); Factor 4, counsellor and client ratings of level of understanding felt by each other ( $r=.505, p<.01$ ); and, Factor 6, counsellor and client ratings of counsellor accurate understanding ( $r=.698, p<.001$ ).

**Question 1(b): Which of the six factors measured by the CPF show the strongest/weakest relationship between counsellor and client ratings of the initial session?**

The correlations revealed the strongest relationship on the initial session (Table 8) existed between counsellor and client ratings of accurate understanding ( $r=.698, p<.001$ ). Table 8 shows that the weakest relationship on the initial session existed between counsellor and client desire to see each other again.

**Question 1(c). How do the mean ratings on the CPF for the counsellor and client compare for each of the rated sessions?**



Comparisons of counsellor and client ratings on the CPF were done through t-test analysis to determine if one group mean differed significantly from another. As shown in Table 9, a comparison of means for the first session shows a significant difference for Factor 1, liking for each other,  $t(28) = 10.69, p < .05$ ; Factor 2, desire to see each other again,  $t(27) = -2.26, p < .05$ ; Factor 3, estimate of liking by the other,  $t(25) = 16.80, p < .05$ ; and Factor 5, rating of counsellor's performance,  $t(24) = -9.55, p < .05$ .

A comparison of means for the third session, shows a significant difference for Factor 1, liking for each other,  $t(12) = 5.74, p < .05$ ; Factor 3, estimate of liking by the other,  $t(12) = 19.35, p < .05$ ; and Factor 5, rating of counsellor's performance,  $t(10) = -4.42, p < .05$ .

On the fifth session, there were significant differences on Factor 1, liking for each other,  $t(7) = 3.26, p < .05$ ; Factor 3, estimate of liking by the other ( $t(7) = 19.09, p < .05$ ) and Factor 5, rating of counsellor's performance,  $t(6) = -8.23, p < .05$ .

Table 9

**COMPARISON OF COUNSELLOR AND CLIENT RATINGS ON  
COUNSELLOR/CLIENT POST-COUNSELLING FORM (CPF)  
FOR 1ST, 3RD, & 5TH SESSIONS**

Factor (Counsellor Post- Counselling Form)	Counsellor Rating			Client Rating			Paired Sample		
	Session	M	X	SD	X	SD	t	df	sig
Factor 1 Counsellor liking for client	1	29	4.73	1.07	5.53	0.64	10.69*	28	.000
	3	13	4.81	1.26	5.50	0.84	3.76*	12	.004
	5	8	4.72	1.50	5.94	0.18	3.28*	7	.014
Factor 2 Counsellor desire to see client again	1	28	4.67	1.24	5.20	0.75	-2.26*	27	.032
	3	12	4.75	1.54	5.25	0.91	-1.12	11	.285
	5	7	4.95	1.50	5.48	0.57	-0.90	6	.402
Factor 3 Estimate of client liking for counsellor	1	26	4.86	0.71	5.17	0.72	16.80*	25	.000
	3	13	5.22	0.52	5.08	0.46	19.35*	12	.000
	5	8	5.47	0.54	5.25	0.89	19.09*	7	.000
Factor 4 Counsellor rating of level or understanding felt by client	1	28	4.77	0.92	4.93	1.31	-0.72	27	.477
	3	13	4.81	1.11	4.96	1.16	-0.38	12	.714
	5	8	4.94	1.02	4.88	1.36	0.13	7	.899
Factor 5 Counsellor rating of own performance	1	25	4.52	1.18	5.30	0.80	-9.55*	24	.000
	3	11	4.27	1.23	5.09	1.42	-4.42*	10	.001
	5	7	4.33	1.31	5.75	0.35	-8.23*	6	.000
Factor 6 Counsellor rating of accurate understanding	1	26	4.38	1.57	4.05	0.48	1.27	25	.214
	3	13	4.26	1.75	4.35	0.85	-0.25	12	.815
	5	8	4.21	1.83	4.21	0.31	0.00	7	1.000

\* p&lt;.05

Question 1(d): **Are there changes in mean ratings of the counsellor's and clients' perceptions over time?**

To answer this question, results will be presented for counsellor ratings over time followed by client ratings over time.

#### **Counsellor Ratings – Over Time**

As shown in Table 10, the counsellor estimate of client liking for the counsellor, Factor 3, indicated there were significant differences between the means from the first to the third session,  $t(12) = -3.07, p < .05$ ; from the first to the fifth session,  $t(7) = -3.55, p < .05$ ; and from the third to fifth session,  $t(7) = -2.43, p < .05$ .

On Factor 4, there was a significant difference from the first to fifth session in the counsellor's rating of level of understanding felt by the client,  $t(7) = -2.81, p < .05$ . Factor 5, rating of counsellor's performance showed a significant difference from the first to the fifth session;  $t(7) = -3.72, p < .05$ ; and from the third to fifth session.  $t(7) = -3.32, p < .05$ .

Table 10

**COMPARISON OF COUNSELLOR RATINGS ON SIX FACTORS  
MEASURED BY COUNSELLOR POST-COUNSELLING FORM -- OVER TIME**

	n	X	SD	t	df	sig
<b>Factor 1</b>						
<b>Counsellor liking for client</b>						
Session 1 to Session 3	13	4.65 4.81	1.23 1.26	-0.78	12	.450
Session 1 to Session 5	8	4.53 4.72	1.23 1.50	-0.43	7	.681
Session 3 to Session 5	8	4.69 4.72	1.31 1.50	-0.18	7	.862
<b>Factor 2</b>						
<b>Counsellor desire to see client again</b>						
Session 1 to Session 3	13	4.67 4.79	1.35 1.49	-0.50	12	.624
Session 1 to Session 5	8	4.50 5.08	1.52 1.43	-1.62	7	.150
Session 3 to Session 5	8	4.88 5.08	1.55 1.43	-1.00	7	.351
<b>Factor 3</b>						
<b>Estimate of client liking for counsellor</b>						
Session 1 to Session 3	13	4.83 5.23	0.73 0.52	-3.07*	12	.010
Session 1 to Session 5	8	4.72 5.47	0.82 0.54	-3.55*	7	.009
Session 3 to Session 5	8	5.13 5.47	0.61 0.54	-2.43*	7	.045

Table 10 (continued)

	<i>n</i>	<i>X</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>sig</i>
<b>Factor 4</b>						
Counsellor rating of level of understanding felt by client						
Session 1 to Session 3	13	4.50	1.04	-1.53	12	.151
Session 1 to Session 5	8	4.19	1.03	-2.81*	7	.026
Session 3 to Session 5	8	4.31	1.13	-1.53	7	.170
		4.94	1.02			
<b>Factor 5</b>						
Counsellor rating of own performance						
Session 1 to Session 3	13	4.03	1.21	-0.35	12	.733
Session 1 to Session 5	8	3.54	1.25	-3.72*	7	.007
Session 3 to Session 5	8	3.71	1.46	-3.32*	7	.013
		4.42	1.23			
<b>Factor 6</b>						
Counsellor rating of accurate understanding						
Session 1 to Session 3	13	4.13	1.69	-1.05	12	.316
Session 1 to Session 5	8	3.96	1.61	-1.00	7	.351
Session 3 to Session 5	8	4.13	1.58	-0.39	7	.711
		4.21	1.83			

\*  $p < .05$

### Client Ratings – Over Time

As shown in Table 11, there was a significant difference between means from the third to the fifth session on Factor 5, the client's rating of counsellor performance,  $t(5) = -2.74, p < .05$ .

There were also significant differences on Factor 6, client ratings of counsellor accurate understanding from the first to third session,  $t(10) = -2.39, p < .05$  and from the first to the fifth session,  $t(6) = -2.52, p < .05$ .

Table 11

**COMPARISON OF CLIENT RATINGS ON SIX FACTORS  
MEASURED BY CLIENT POST-COUNSELLING FORM – OVER TIME**

	n	X	SD	t	df	sig
<b>Factor 1</b>						
<b>Client liking for counsellor</b>						
Session 1 to Session 3	13	5.62	0.74	0.51	12	.621
Session 1 to Session 5	8	5.50	0.89	-1.70	7	.133
Session 3 to Session 5	8	5.69	0.70	-1.32	7	.227
		5.94	0.18			
<b>Factor 2</b>						
<b>Client desire to see counsellor again</b>						
Session 1 to Session 3	11	5.27	0.90	0.29	10	.777
Session 1 to Session 5	7	5.10	1.03	-1.49	6	.188
Session 3 to Session 5	7	5.52	0.72	0.42	6	.689
		5.48	0.57			
<b>Factor 3</b>						
<b>Estimate of counsellor liking for client</b>						
Session 1 to Session 3	11	5.09	0.83	-0.18	10	.858
Session 1 to Session 5	6	4.92	1.07	-1.12	5	.314
Session 3 to Session 5	8	5.19	0.88	-0.24	7	.815
		5.25	0.89			

	<i>n</i>	<i>X</i>	<i>SD</i>	<i>t</i>	<i>df</i>	<i>sig</i>
<b>Table 11 (continued)</b>						
<b>Factor 4</b>						
Client rating of level of understanding felt by counsellor						
Session 1 to Session 3	13	4.85	1.34	-0.54	12	.598
Session 1 to Session 5	8	4.63	1.41	-1.18	7	.275
Session 3 to Session 5	8	4.94	1.05	0.24	7	.815
		4.88	1.36			
<b>Factor 5</b>						
Client rating of counsellor performance						
Session 1 to Session 3	10	5.48	0.61	0.60	9	.564
Session 1 to Session 5	6	5.33	0.63	-2.07	5	.093
Session 3 to Session 5	6	5.50	0.52	-2.74*	5	.041
		5.75	0.39			
<b>Factor 6</b>						
Client rating of counsellor accurate understanding						
Session 1 to Session 3	11	4.00	0.37	-2.39*	10	.038
Session 1 to Session 5	7	3.90	0.32	-2.52*	6	.045
Session 3 to Session 5	8	4.29	0.33	0.80	7	.451
		4.21	0.31			

\*  $p < .05$



**Question 2: What is the nature of the relationship between perceived age difference and client perceptions of the counsellor?**

In order to examine the nature of the relationship between perceived age difference and client perceptions of the counsellor, a one-way analysis of variance (ANOVA) was conducted between client ratings and perceptions of the counsellor as being older, younger, or about the same age as the client. However, the analysis showed no significant differences in client perceptions based upon age perception of the counsellor.

Of the 29 clients, 2 perceived the counsellor to be younger, 22 perceived the counsellor to be older, and 5 perceived that the counsellor was about the same age as they were. Twenty-three (79.3%) of the clients were accurate in estimating to which category the counsellor's age belonged. The counsellor was, in fact, older than 27 of her clients and younger than 2.

**Question 3: What is the nature of the relationship between client perceptions of counsellor and same-sex or opposite-sex counsellor/client dyads?**

In order to examine the nature of the relationship between client perceptions and same-sex or opposite-sex counsellor/client dyads, 1-test analysis was performed for each factor on the Client Post-Counselling Form. The results are summarized in Tables 12, 13, and 14. Table 13 shows a

significant difference for female client (same-sex dyads) ratings for Factor 4, the level of understanding felt by the counsellor,  $t(11) = -2.55, p < .05$ ; and Factor 6, the counsellor's accurate understanding,  $t(11) = -2.38, p < .05$ , on the third session. In both cases the differences are significantly higher for same-sex dyads.

Table 12

**DIFFERENCE BETWEEN MEAN RATINGS FOR SAME-SEX AND OPPOSITE-SEX  
COUNSELLOR/CLIENT DYADS FOR SIX FACTORS MEASURED BY  
CLIENT POST-COUNSELLING FORM**

**SESSION 1**

	Gender	n	X	SD	t	df	sig
<b>Factor 1</b>							
Client liking for counsellor	Male	11	5.59	0.44	0.37	27	.718
	Female	18	5.50	0.75			
<b>Factor 2</b>							
Client desire to see counsellor again	Male	11	5.21	0.67	0.05	26	.957
	Female	17	5.20	0.82			
<b>Factor 3</b>							
Estimate of counsellor liking for client	Male	10	5.00	0.85	-0.97	24	.343
	Female	16	5.28	0.63			
<b>Factor 4</b>							
Client rating of level of understanding felt by counsellor	Male	11	4.55	1.37	-1.26	26	.220
	Female	17	5.18	1.25			
<b>Factor 5</b>							
Client rating of counsellor performance	Male	10	5.25	0.61	-0.25	23	.806
	Female	15	5.33	0.93			
<b>Factor 6</b>							
Client rating of counsellor accurate understanding	Male	10	4.03	0.40	-0.15	24	.883
	Female	16	4.06	0.53			

Note: Male = Opposite-Sex Counsellor/Client Dyads  
 Female = Same-Sex Counsellor/Client Dyads

Table 13

**DIFFERENCE BETWEEN MEAN RATINGS FOR SAME-SEX AND OPPOSITE-SEX  
COUNSELLOR/CLIENT DYADS FOR SIX FACTORS MEASURED BY  
CLIENT POST-COUNSELLING FORM**

**SESSION 3**

	Gender	n	X	SD	t	df	sig
<b>Factor 1</b>							
Client liking for counsellor	Male	5	5.80	0.45	1.02	11	.331
	Female	8	5.31	1.00			
<b>Factor 2</b>							
Client desire to see counsellor again	Male	5	5.53	0.56	0.90	10	.388
	Female	7	5.05	1.10			
<b>Factor 3</b>							
Estimate of counsellor liking for client	Male	5	5.30	0.67	0.72	11	.485
	Female	8	4.94	0.98			
<b>Factor 4</b>							
Client rating of level of understanding felt by counsellor	Male	5	4.10	1.29	-2.55*	11	.027
	Female	8	5.50	0.71			
<b>Factor 5</b>							
Client rating of counsellor performance	Male	4	5.56	0.43	0.82	9	.435
	Female	7	4.82	1.75			
<b>Factor 6</b>							
Client rating of counsellor accurate understanding	Male	5	4.07	0.43	-2.38*	11	.036
	Female	8	4.58	0.35			

Note: Male = Opposite-Sex Counsellor/Client Dyads  
 Female = Same-Sex Counsellor/Client Dyads

\*  $p < .05$

Table 14

**DIFFERENCE BETWEEN MEAN RATINGS FOR SAME-SEX AND OPPOSITE-SEX  
COUNSELLOR/CLIENT DYADS FOR SIX FACTORS MEASURED BY  
CLIENT POST-COUNSELLING FORM**

**SESSION 5**

	Gender	N	X	SD	t	df	sig
<b>Factor 1</b>							
Client liking for counsellor	Male	4	6.00	0.00	**		
	Female	4	5.88	0.50			
<b>Factor 2</b>							
Client desire to see counsellor again	Male	4	5.58	0.32	0.54	5	.615
	Female	3	5.33	0.88			
<b>Factor 3</b>							
Estimate of counsellor liking for client	Male	4	5.38	0.75	0.37	6	.722
	Female	4	5.13	1.11			
<b>Factor 4</b>							
Client rating of level of understanding felt by counsellor	Male	4	4.25	1.50	-1.39	6	.215
	Female	4	5.50	1.00			
<b>Factor 5</b>							
Client rating of counsellor performance	Male	4	5.88	0.14	1.10	5	.322
	Female	3	5.58	0.52			
<b>Factor 6</b>							
Client rating of counsellor accurate understanding	Male	4	4.17	0.43	-0.36	6	.730
	Female	4	4.25	0.17			

Note: Male = Opposite-Sex Counsellor/Client Dyads  
Female = Same-Sex Counsellor/Client Dyads

\*\* t-test not possible

**Question 4: What is the nature of the relationship between client and counsellor perceptions of each other and premature termination?**

Correlational analysis of counsellor and client responses for four clients who terminated prematurely showed no significant results. Premature terminators were defined as clients who failed to return for a scheduled appointment. Even though one cannot draw any definite conclusions based on such a small sample, the intern thought it might contribute to her self-understanding to determine what percentage of clients responding negatively on items on the initial session were premature terminators. It might also be helpful to see what percentage of clients, for whom the counsellor responded negatively, might have terminated early. The intern defines a negative response as being in the disagree range (1-3) for positively worded items and in the agree range (4-6) for negatively worded items.

Table 15 shows a breakdown of the number of negative responses by clients for each item, the number of negative responses given by premature terminators, and the ratio between the two. Table 16 shows a similar breakdown for the counsellor. One comparison on Table 15 which stands out is on Item 12, where two clients who initially agreed that they might find it

easier to discuss feelings if they had another counsellor, both (100%)  
prematurely terminated.

Table 15

**NEGATIVE CLIENT RESPONSES  
AND RELATIONSHIP WITH PREMATURE TERMINATION**

Item	Initial Session Total No. Negative Responses	Initial Session No. of Negative Responses by Premature Terminators	% of Client: Who Rated Counsellor Negatively on Item and Prematurely Terminated
1. I had a very warm feeling towards this counsellor.	1	0	0.0%
*2. This counsellor must have realized that she didn't understand me very well.	4	2	50.0%
*3. There are other people I would feel it much easier to talk to.	5	2	40.0%
4. I really felt comfortable talking to this counsellor.	2	1	50.0%
5. I look forward to talking with this counsellor again.	1	0	0.0%
*6. At times this counsellor seemed confused about what I was trying to say.	6	3	50.0%
7. I felt that this counsellor regards me as a likeable person.	1	0	0.0%
*8. I see no point in seeing this counsellor again.	0	0	0.0%
9. I wish I had friends who were as understanding as this counsellor.	9	2	22.2%
10. I wish I could spend more time with this counsellor.	3	0	0.0%
11. Many of the things this counsellor said just seemed to hit the nail right on the head.	2	1	50.0%
*12. If I had someone else as a counsellor I might find it easier to discuss my feelings.	2	2	100.0%
*13. It seemed that the counsellor understood me even when I didn't express myself very well.	1	1	100%



Item	Initial Session Total No. Negative Responses	Initial Session No. of Negative Responses by Premature Terminators	% of Clients Who Rated Counsellor Negatively on Item and Prematurely Terminated
<b>Table 15 (continued)</b>			
*14. I'm not so sure that this counsellor liked me very much.	2	0	0.0%
*15. The counsellor often misunderstood what I was trying to say.	3	2	66.7%
16. It was easier for me to talk with this counsellor than with most other people.	8	3	37.5%
17. This counsellor really has a lot on the ball.	1	1	100.0%
*18. I guess I didn't like this counsellor very much.	0	0	0.0%
19. I would certainly recommend this counsellor to any friend who needed help.	1	1	100.0%
*20. After the session with this counsellor I'm not sure that counselling can be very helpful.	3	0	0.0%

Note: The items marked with an asterisk (\*) are negatively worded.

Table 16

**NEGATIVE COUNSELLOR RESPONSES  
AND RELATIONSHIP WITH PREMATURE TERMINATION**

Item	Initial Session Total No. of Negative Responses	Initial Session No. of Negative Responses for Premature Terminators	% of Clients Rated Negatively by Counsellor on Item Who Prematurely Terminated
1. I like this client more than most I have had.	6	3	50.0%
2. I look forward to talking with this client again.	3	1	33.3%
*3. I couldn't seem to get very interested in this client.	3	2	66.7%
4. I feel fairly sure that this client would want to see me again if given an opportunity.	4	2	50.0%
5. I was seldom in doubt as to what this client was trying to say.	11	2	18.2%
*6. I felt somewhat ineffective with this client.	7	2	28.6%
7. I would prefer working with this client more than most of the clients I have had.	8	3	37.5%
*8. It was often difficult for me to understand what this client was trying to say.	6	3	50.0%
*9. I doubt whether this client saw me as a warm and accepting person.	1	0	0.0%
10. I found it easier to respond to what this client was saying than with other clients I have had.	9	3	33.3%
11. I feel fairly competent about my counselling with this client.	5	2	40.0%
*12. I feel less inclined to work with this client than with others I have worked with.	6	3	50.0%
13. I found it fairly easy to understand and communicate with this client.	6	3	50.0%

Item	Initial Session Total No. of Negative Responses	Initial Session No. of Negative Responses for Premature Terminators	% of Clients Rated Negatively by Counsellor on Item Who Prematurely Terminated
<b>Table 16 (continued)</b>			
14. I was often at a loss as to how to respond to this client.	7	2	28.6%
*15. I doubt whether this client would want to continue on counselling with me.	3	1	33.3%
16. I felt that this client saw me as a warm and accepting person.	1	1	100.0%
17. I think that this client felt that I was doing a good job of understanding him/her.	3	1	33.3%
*18. I would like to be able to feel more warmth and acceptance toward this client.	5	3	60.0%
19. I feel that I would like this client socially if I had met him/her first in that capacity.	10	2	20.0%
*20. The client probably felt that I didn't understand him/her too well.	3	0	0.0%

Note: The items marked with an asterisk (\*) are negatively worded.

As can be observed from Table 16, 50% of the intern's clients whom she rated negatively on Item 1, "I like this client more than most I have had" were premature terminators. It was also observed that 60% of those clients, for whom the counsellor wanted to feel more warmth and acceptance towards (Item 18), were premature terminators, as were 20% of those whom the counsellor felt she would not like socially if first met in that capacity (Item 19).

#### **Additional Analysis – Overall Feelings and Reactions**

In addition to answering the research questions, the intern thought it would be valuable to examine the clients' and counsellor's feelings and reactions to the initial session as Short (1991) did. These findings will be presented by discussing the fifth question in two parts.

##### **Question 5(a). What are the overall feelings and reactions of the client toward the counsellor after the initial session as measured by the Client Post-Counselling Form?**

This question was answered by analyzing in descriptive terms each of the 20 items on the Client Post-Counselling Form. This was done by calculating response rates which are presented in Table 17. The intern will highlight a number of items which caught her attention.

Table 17

**DISTRIBUTION OF CLIENT RESPONSES ON ITEMS OF THE  
CLIENT POST-COUNSELLING FORM**

Item	Frequency (N=25-29)		Percentage Agreement (Clients' Ratings of Counsellor)					
	Disagree	Agree	Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1. I had a very warm feeling towards this counsellor.	1	28	—	3.4%	—	10.3%	34.5%	51.7%
*2. This counsellor must have realized that she didn't understand me very well.	24	4	53.6%	25.0%	7.1%	7.1%	3.6%	3.6%
*3. There are other people I would feel it much easier to talk to.	23	5	50.0%	25.0%	7.1%	3.6%	14.3%	—
4. I really felt comfortable talking to this counsellor.	2	27	—	—	6.9%	6.9%	24.1%	62.1%
5. I look forward to talking with this counsellor again.	1	28	—	3.4%	—	13.8%	27.6%	55.2%
*6. At times this counsellor seemed confused about what I was trying to say.	23	6	51.7%	17.2%	10.3%	10.3%	3.4%	6.9%
7. I felt that this counsellor regards me as a likable person.	1	25	—	—	3.8%	11.5%	61.5%	23.1%
*8. I see no point in seeing this counsellor again.	29	0	72.4%	27.6%	—	—	—	—
9. I wish I had friends who were as understanding as this counsellor.	9	17	15.4%	3.8%	15.4%	15.4%	30.8%	19.2%
10. I wish I could spend more time with this counsellor.	3	25	—	3.6%	7.1%	42.9%	17.9%	28.6%
11. Many of the things this counsellor said just seemed to hit the nail right on the head.	2	25	—	—	7.4%	22.2%	33.3%	37.0%

Item	Frequency (N=25-29)		Percentage Agreement (Clients' Ratings of Counsellor)					
	Disagree	Agree	Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
Table 17 (continued)								
*12. If I had someone else as a counsellor I might find it easier to discuss my feelings.	26	2	50.0%	28.6%	14.3%	3.6%	3.6%	-
*13. It seemed that the counsellor understood me even when I didn't express myself very well.	1	27	-	-	3.6%	17.9%	42.9%	35.7%
*14. I'm not so sure that this counsellor liked me very much.	24	2	50.0%	42.3%	-	3.8%	3.8%	-
*15. The counsellor often misunderstood what I was trying to say.	26	3	62.1%	20.7%	6.9%	6.9%	-	3.4%
16. It was easier for me to talk with this counsellor than with most other people.	8	20	-	10.7%	17.9%	21.4%	35.7%	14.3%
17. This counsellor really has a lot on the ball.	1	24	-	-	4.0%	8.0%	48.0%	40.0%
*18. I guess I didn't like this counsellor very much.	29	0	79.3%	17.2%	3.4%	-	-	-
19. I would certainly recommend this counsellor to any friend who needed help.	1	28	-	-	3.4%	10.3%	24.1%	62.1%
*20. After the session with this counsellor I'm not sure that counselling can be very helpful.	26	3	58.6%	20.7%	10.3%	-	3.4%	6.9%

Note: The items marked with an asterisk (\*) are negatively worded. Percentages are rounded to one place after the decimal point.

As shown in Table 17, all (100%) clients disagreed with Item 8, "I see no point in seeing this counsellor again," and all disagreed with Item 18 which stated "I guess I didn't like this counsellor very much." On Items 1, 5, 7, 13, 17 and 19, all but 1 (96.6%) of the clients rated the counsellor favorably. These items included having a warm feeling for the counsellor, looking forward to talking to the counsellor again, feeling that the counsellor regards the client as a likeable person, feeling understood by the counsellor even when not expressing oneself well, viewing the counsellor as having a lot on the ball, and recommending the counsellor to a friend who needed help.

There was considerable spread on client ratings for Item 6, "At times this counsellor seemed confused about what I was trying to say." Six clients agreed with this statement with two strongly agreeing. However, on a similar statement for Item 15, "The counsellor often misunderstood what I was trying to say," three clients agreed and only one of these strongly agreed.

Nine clients (34.6%) disagreed with the Item 9 statement, "I wish I had friends who were as understanding as this counsellor." However, only 4 clients (14.3%) agreed with Item 2, "This counsellor must have realized that she didn't understand me very well" and one client (3.6%) disagreed with Item 13, "It seemed that the counsellor understood me even when I didn't express myself very well."

On Item 16, "It was easier for me to talk with this counsellor than most other people," 8 clients (28.6%) responded from slight to moderate disagreement. On a similar statement, Item 3, "There are other people I would feel it much easier to talk to," 5 clients (17.9%) agreed with 1 slightly agreeing and 4 moderately agreeing.

**Question 5(b): What are the overall feelings and reactions of the counsellor toward the client after the initial session as measured by the Counsellor Post-Counselling Form.**

To answer this question, the intern calculated her response rates, which are presented in Table 18, for each of the 20 items on the Counsellor Post-Counselling Form. A number of items which appeared noteworthy are presented below.

An examination of the intern's perceptions of the initial counselling session showed six of the items produced little scatter. For example in response to the statement, Item 2, "I look forward to talking to this client again," the intern indicated 86.6% agreement (Table 18). She agreed with this statement for 26 clients and slightly disagreed with the statement twice and moderately disagreed once. Generally, the intern rated the following items positively: getting interested in her clients, believing that her clients would



want to continue in counselling, and believing that her clients felt she was doing a good job of understanding them.

Table 18

**DISTRIBUTION OF COUNSELLOR RESPONSES ON ITEMS OF THE  
COUNSELLOR POST-COUNSELLING FORM**

Item	Frequency (N=29)		Percentage Agreement (Counsellor Ratings of Clients)					
	Disagree	Agree	Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
1. I like this client more than most I have had.	6	23	—	3.4%	17.2%	17.2%	37.9%	24.1%
2. I look forward to talking with this client again.	3	26	—	3.4%	6.9%	13.8%	31.0%	44.8%
*3. I couldn't seem to get very interested in this client.	26	3	62.1%	20.7%	6.9%	6.9%	3.4%	—
4. I feel fairly sure that this client would want to see me again if given an opportunity.	4	25	3.4%	3.4%	6.9%	24.1%	44.8%	17.2%
5. I was seldom in doubt as to what this client was trying to say.	11	18	10.3%	13.8%	13.8%	10.3%	41.4%	10.3%
*6. I felt somewhat ineffective with this client.	22	7	24.1%	44.8%	6.9%	6.9%	13.8%	3.4%
7. I would prefer working with this client more than most of the clients I have had.	8	21	3.4%	10.3%	13.8%	24.1%	27.6%	20.7%
*8. It was often difficult for me to understand what this client was trying to say.	23	6	48.3%	27.6%	3.4%	3.4%	6.9%	10.3%
*9. I doubt whether this client saw me as a warm and accepting person.	28	1	34.5%	44.8%	17.2%	3.4%	—	—
10. I found it easier to respond to what this client was saying than with other clients I have had.	9	20	6.9%	3.4%	20.7%	31.0%	24.1%	13.8%

Item	Frequency (N = 29)		Percentage Agreement (Counsellor Ratings of Clients)					
	Disagree	Agree	Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
Table 18 (continued)								
11. I feel fairly competent about my counselling with this client.	5	24	3.4%	—	13.8%	24.1%	41.4%	17.2%
*12. I feel less inclined to work with this client than with others I have worked with.	23	6	48.3%	20.7%	10.3%	13.8%	—	6.9%
13. I found it fairly easy to understand and communicate with this client.	6	23	13.8%	6.9%	—	10.3%	41.4%	27.6%
*14. I was often at a loss as to how to respond to this client.	22	7	27.6%	31.0%	17.2%	6.9%	13.8%	3.4%
*15. I doubt whether this client would want to continue on counselling with me.	26	3	10.3%	51.7%	27.6%	6.9%	—	3.4%
16. I felt that this client saw me as a warm and accepting person.	1	28	—	—	3.4%	13.8%	58.6%	24.1%
17. I think that this client felt that I was doing a good job of understanding him/her.	3	26	—	—	10.3%	27.6%	51.5%	10.3%
*18. I would like to be able to feel more warmth and acceptance toward this client.	24	5	65.5%	13.8%	3.4%	10.3%	—	6.9%
19. I feel that I would like this client socially if I had met him/her first in that capacity.	10	19	6.9%	6.9%	20.7%	34.5%	20.7%	10.3%
*20. The client probably felt that I didn't understand him/her too well.	26	3	37.9%	27.6%	24.1%	3.4%	6.9%	—

Note: The items marked with an asterisk (\*) are negatively worded. Percentages are rounded to one place after the decimal point.

Scatter was observed on 8 items where the intern's ratings fell in all six categories. For example on the statement, Item 10, "I found it easier to respond to what this client was saying than with other clients I have had," the intern disagreed 31% of the time and agreed 69% of the time. Similarly on Item 5, "I was seldom in doubt as to what this client was trying to say," the intern disagreed 37.9% and agreed 62.1%. On Item 14, "I was often at a loss as how to respond to this client," the intern agreed 24.1% and disagreed 75.9%.

## **Discussion**

### **Counsellor/Client Perceptions – Initial Session**

The results showed that there was counsellor/client agreement on Factor 1, liking for each other; Factor 3, estimate of liking by the other; Factor 4, level of understanding felt by each other; and, Factor 6, counsellor and client ratings of accurate understanding.

The significant positive correlations between four out of six factors indicate that the counsellor and client tended to agree on these factors (See Table 8, p. 79). These findings were similar to Short's (1991) results, in that all correlations for the initial session were in a positive direction. However, only two of the factors found to be significantly correlated in this study also

showed a significant relationship in Short's study. They were Factor 4, the rating of level of understanding felt by counsellor and client and Factor 6, the rating of counsellor accurate understanding. While Short found a significant relationship between ratings of counsellor performance, no significant relationship was found in this study.

Consistent with Short's (1991) findings and other studies (Dill-Standiford et al., 1988; & Kokotovic & Tracy, 1990) of counsellor/client agreement on perceptions of the initial session, the correlations were generally low. Lee et al. (1985) concluded that low correlations between client and counsellor self-ratings indicate that counsellors and clients tend to perceive the counselling interview differently.

The correlations revealed the strongest relationship on the initial session existed between counsellor and client ratings of accurate understanding, Factor 6. This factor also showed the strongest relationship in Short's (1991) study. An example of a statement from the Counsellor Post-Counselling Form which is included in this factor is Item 13, "I found it fairly easy to understand and communicate with this client." A corresponding item from the Client Post-Counselling Form is Item 11, "Many of the things this counsellor said just seemed to hit the nail right on the head." The significant correlation coefficient indicated agreement between the counsellor and client perceptions

of the counsellor's accuracy in understanding her clients. Short (1991) suggests that "one could predict with caution that when the intern felt she was understanding her clients adequately, the clients also felt understood by the intern" (p. 71).

Findings on the weakest relationship were also consistent with Short's (1991) findings, with counsellor and client desire to see each other again, Factor 2, having the lowest correlation. Examples of statements from the Counsellor Post-Counselling Form are Item 7, "I would prefer working with this client more than most of the clients I have had" and Item 12, "I feel less inclined to work with this client than with others I have worked with." The counsellor's ratings on these two items may have been affected by the client's presenting concern. The intern desired experience in counselling for personal issues and may have felt less inclined to see clients again who presented with career and academic concerns.

Further analysis on the initial session, using a comparison of means for counsellor and client ratings (see Table 9, p. 82) showed significant differences on the initial session for Factor 1, counsellor and client liking for each other; Factor 2, desire to see each other again; Factor 3, estimate of liking for each other; and, Factor 5, ratings of counsellor performance. In spite of these differences, both counsellor and client ratings indicate a

descriptive range of between slight and moderate agreement on the six factors measured suggesting that the main difference between ratings was in degree of agreement. Lee et al. (1985) suggest that it is helpful for counsellors to be aware of the discrepancy between their perceptions and those of their clients.

The initial session is important to the counsellor/client relationship from the viewpoint that if the client views the initial session unfavourably he/she may not return (Tessler, 1975). Overall, these results suggest a favourable start to the counsellor/client relationship.

#### **Counsellor/Client Ratings – Over Time**

On Factor 1, counsellor and client liking for each other, there were significant differences for each of the three sessions (see Table 9, p. 82). Counsellor ratings were lower than client ratings and even though there was a significant difference between them, the means for both fell in the descriptive range of slight to moderate agreement. This indicates that, on the average, the intern liked her clients and they in turn liked her. The counsellor's lower ratings may have been influenced by Item 19 for this factor which stated "I feel that I would like this client socially if I had met him/her first in that capacity." The intern's response on this item may have been negatively influenced by the age difference between her and the majority of her clients,

which made the intern feel she had few social interests in common with some of them. According to Wills (1978), the principle of similarity and attraction "has wide generality and in many contexts it can be predicted reliably that persons will like others who are similar to themselves and will tend to dislike persons who are dissimilar to themselves (p. 982). Wills goes on to say, and perhaps overstate, that "Generalization of this principle to helping relationships might be qualified by the possibility that helping agents, who undergo an extensive period of professional training, are not influenced by their like or dislike for a client" (p. 982).

A comparison for Factor 2, desire to see each other again, showed client ratings to be higher than counsellor ratings for all sessions with a significant difference on only the first session. This would suggest that over time the ratings became more similar, indicating a mutual desire to see each other again. On the initial session the counsellor ratings may have been lower than client ratings because of the intern's preference for certain types of presenting problems, particularly those having potential for three or more sessions.

Counsellor and client ratings on Factor 3, estimate of liking by the other, showed significant differences between the means for all sessions. While counsellor's estimate of client liking for counsellor was significantly



lower than the corresponding factor for the client, on the initial session, the counsellor's ratings not only increased over time but ratings became significantly higher than those of her clients, for the third and fifth sessions. A possible explanation may be that the counsellor was more tentative on the first session but later may have rated the clients higher because they were returning for counselling. These differences in ratings point out the importance of being aware of the discrepancy between her perceptions and those of her clients (Lee et al., 1985).

Another possible reason for the lower counsellor ratings on this factor was that the counsellor found it difficult to rate two of the items because of the comparisons involved. These items were: Item 7: "I would prefer working with this client more than many of the clients I have had" and Item 12, "I feel less inclined to work with this client than with others I have worked with."

There were no significant differences on counsellor and client ratings for Factor 4, rating of level of understanding felt by clients and counsellor, for any of the sessions. These results suggest that the counsellor consistently felt that she was understanding her clients and they in turn felt understood by her.

A comparison of mean ratings for counsellor and client on Factor 5, rating of counsellor's performance, shows a significant difference between each other's ratings in all sessions, with client ratings being consistently higher

than counsellor ratings. The higher client ratings on counsellor performance may be linked to Lacrosse's (1980) suggestion that a significant increase in client ratings from pre-counselling to post-counselling can be accounted for by a consistency model. According to this model, those who gained more would be likely to rate their counsellors as more expert, trustworthy, and attractive.

On Factor 6, rating of accurate understanding, there were no significant differences between means for any session, thereby suggesting counsellor and client agreement. An example of a statement from the Counsellor's Post-Counselling Form is Item 5, "I was seldom in doubt as to what this client was trying to say," and one from the Client Post-Counselling Form is Item 13, "It seemed that this counsellor understood me even when I didn't express myself very well."

Table 9 (p. 82) shows the counsellor's ratings, for all factors across all sessions, were slightly lower than client ratings with three exceptions. They were: Factor 3, estimate of client liking for counsellor for the third and fifth sessions; Factor 4, level of understanding felt by the client for the fifth session; and Factor 6, rating of accurate understanding for the initial session. However, of these three factors, only Factor 3 reaches significance. These lower counsellor ratings are in line with counselling research (e.g., Stiles & Snow, 1984) which suggests that there is a tendency for clients to give

somewhat more positive ratings than counsellors. Lacrosse (1977) found clients rated counsellors highest on every variable measured relative to counsellor's and observers' ratings. He suggests that the cognitive dissonance model explains the magnitude of client ratings "that is, it is difficult to deprecate a source of help, especially when one is in a personal crisis" (p. 469).

By visually scanning the data in Table 9 (p. 82), a couple of patterns can be seen to emerge. Factor 2, desire to see each other again, and Factor 3, estimate of liking by the other, both show a steady increase in the counsellor and client ratings. The counsellor's rating of level of understanding felt by the client, Factor 4, shows a steady increase whereas the client ratings fluctuate. Factor 6, rating of accurate understanding, shows a decline in counsellor's ratings which may be related to the complexities of the longer term cases, but there was no consistent pattern in client ratings. Factor 1, liking for each other and Factor 5, ratings of the counsellor's performance, showed no consistent increases or decreases for either the counsellor or her clients. Heppner and Heesacker's (1982) findings which show that client perceptions change over time but not necessarily in the same direction give support to these observations.

The fluctuations in some of the ratings over the first five sessions lend support to Marziali's (1984) suggestion that the positive components of the treatment relationship are not solidly established in the initial phase of therapy. It typically takes three to five sessions for counsellor and client to explore ways to relate to each other. Marziali suggests that early sessions involve a tentative interaction which if developed into a reciprocal bond results in a favorable outcome which is reflected in higher ratings of final sessions. These ratings also support Kokotovic and Tracey's (1990) view that the level of working alliance established in the first session does not necessarily determine levels of subsequent sessions.

#### **Counsellor Ratings — Over Time**

As shown in Table 10 (p. 84), the counsellor estimate of client liking for the counsellor, Factor 3, illustrates significant differences from the first to third session, the first to the fifth session, and third to fifth session. These ratings suggest that the intern felt her clients liked her more as the relationship developed. It is possible that these ratings also reflect an increase over time in the intern's level of confidence in her counselling skills. When she felt more confident, she was more likely to feel that her clients liked her.

The counsellor's rating of level of understanding felt by client, Factor 4, showed a significant difference over time, from the first to the fifth session. The intern's higher ratings over time may have been the result of interpreting the client's returning for five sessions to be an indication that he/she felt better understood.

Factor 5, rating of counsellor's performance, showed a significant difference in ratings by the counsellor from the first to the fifth session and from the third to the fifth session. An example of an item from the Counsellor Post-Counselling Form comprising this factor is Item 11, "I feel fairly competent about my counselling with this client." The intern also attributes this change in ratings of her own performance to be a reflection of the confidence she gained as her clients moved beyond the first session, and she began to see some changes in them.

#### **Client Ratings – Over Time**

Changes over time in client perceptions were found for Factor 5 (see Table 11, p. 87), rating of counsellor's performance. There was a significant increase in ratings between the third and fifth session. An example of an item comprising this factor on the Client Post-Counselling Form is Item 13, "It

seemed that the counsellor understood me even when I didn't express myself very well."

On Factor 6, client ratings of counsellor accurate understanding, there were significant increases in mean ratings from the first to the third session and from the first to the fifth session. The fact that the client ratings for four out of six factors showed no significant change over time lends support to the idea that the client's view of the relationship is established early (Tessler, 1975 & Tryon, 1989).

#### **Perceived Age Difference and Client Ratings**

While there were no significant relationships between perceived age difference and client ratings, the data stimulated some observations. The intern chose perceived age difference rather than actual age differences based on the belief that some clients might view her as older or younger than others. The results showed that 79.3% were accurate in estimating the category to which the counsellor belonged -- older, younger or about the same age.

One of the female clients who was older than the intern had specifically requested an older female counsellor but agreed to see the intern when her request could not be accommodated at the time. The intern discussed this preference with the client at the initial session and offered a referral to another

counsellor; however, the client decided to continue with the intern. This client request was consistent with Simons and Helms's (1976) findings that women tend to seek counsellors who are older than themselves.

### **Client Perceptions and Same-Sex/Opposite-Sex Dyads**

Results showed that female (same-sex) ratings were significantly higher than male ratings (opposite sex) for Factor 4 (see Table 13, p. 92), the level of understanding felt by the counsellor; and, Factor 6, the counsellor's accurate understanding for the third session. From this it can be concluded that female clients felt better understood than male clients following the third session. For all other factors and sessions, there were no significant differences in the means of male clients or female clients. It is not clear why this difference showed only on the third session; however, the inconsistency of these results is not surprising given the variety of findings on the effects of counsellor gender and the therapeutic alliance reported in the literature and presented in Chapter III (Banikiotes & Merluzzi, 1981; Betz & Shullman, 1979; Blier et al., 1987; Epperson, 1981; Feldstein, 1982; Hill, 1975; Howard et al., 1970; Jones & Zoppel, 1972; Kaschak, 1978; Krauskopf et al., 1981; Merluzzi et al., 1978; Orlinsky & Howard, 1976; Simon & Helms, 1976).

### **Counsellor/Client Perceptions and Premature Termination**

The results showed no significant correlation between counsellor and client ratings and premature termination, based on four clients. Two cases were dropped because of missing data. In spite of the non-significant results and the small sample, the intern will comment upon some observations made from the data which provided some valuable insight into her relationship with her clients.

Out of the 29 clients who were seen for the first time, six failed to return for scheduled appointments, indicating a dropout rate of 20.7%. Of these six, four failed to return following the initial session, indicating an intake dropout rate of 13.8%. This dropout rate is somewhat lower than that found by Betz and Shullman (1979) who found that 24% of clients seen for an intake session did not return for scheduled counselling and Epperson (1981) who found similar results with 25% not returning.

Given the small number of premature terminators, the counsellor was able to compare both Client and Counsellor Post-Counselling Forms individually to observe differences in ratings which might contribute to premature termination. Analysis of the data showed that one client was the only client who rated the counsellor negatively on Items 4, 11, 13, 17 and 19. Overall, the client rated the counsellor negatively on 12 items. However, the



counsellor rated the client positively on all items except Item 10, indicating a lack of agreement in counsellor and client ratings. This suggests that the counsellor failed to pick up on the client's negative assessment. However, according to Dill-Standiford et al. (1988) it is not unusual for counsellors and clients to hold viewpoints on counselling which are distinct. Rennie (1985), in an unpublished paper (cited in Thompson & Hill, 1991), states that "clients sometimes hide their reactions from therapists" (p. 261).

The intern observed that on Items 1, 3, and 18, 50%-66.7% (see Table 16, p. 98) of the clients whom she rated negatively were premature terminators, as well as 20% on Item 19. These four items make up Factor 1, counsellor liking for the client. These figures cause the intern to question whether her negative reactions on client liking may have contributed to premature termination for some clients. In a critical review of the literature on dropping out of treatment, Baekeland and Lundwall (1975) noted that there is an association between lower dropout rates and therapist liking for the client.

Counsellor ratings for one client who prematurely terminated included 14 negative responses; whereas, the client only responded in a negative manner for two items. These 14 items showed negative ratings for all items making up the following factors: Factor 1, counsellor liking for the client;

Factor 2, counsellor's desire to see client again; and, Factor 6, counsellor rating of accurate understanding. It was observed that while the counsellor rated a number of her clients less favorably than the clients rated her, only one out of 26 responded negatively on the initial session to Item 7, "I felt this counsellor regards me as likeable person," and none of the premature terminators responded negatively to this item. This might suggest that in spite of negative feelings towards some of her clients, the intern was able to convey unconditional positive regard.

Kokotovic and Tracey (1987) point out that studies involving premature termination may be confounded by combining those who dropped out, having gotten what they wanted, and those who felt they were not helped. Marziali (1988) suggests that other clients who terminate prematurely may not be ready to commit themselves to what is involved in a course of treatment. In the data collected, the intern has no way of knowing to which category her clients belong; however, based on such a small sample no firm conclusions could be drawn even if the reason were known.

### Client Overall Feelings and Reactions

In the Results section, the intern highlighted some items which caused her to examine the reactions of her clients. In this section, comments will be made about some of the ratings.

The intern was pleased by the overall favorable ratings by her client (see Table 17, p. 101) and was encouraged by their positive reactions. However, a few ratings caused the intern some concern while others sometimes appeared contradictory.

On Item 6, "At times this counsellor seemed confused about what I was trying to say," six clients agreed. However, on a similar statement, Item 15, "The counsellor often misunderstood what I was trying to say" only three clients agreed. The intern was somewhat puzzled by the ratings on Item 15, given that only four clients agreed with Item 2, "This counsellor must have realized that she didn't understand me very well" and only one client disagreed with Item 13, "It seemed that the counsellor understood me even when I didn't express myself very well." A possible interpretation might be that while the counsellor may have initially appeared confused, she sought clarification which increased understanding. As Short (1991) suggested, additional information through personal interviews or extra space on the form might have provided insight into understanding the sometimes contradictory responses.

The intern noted that nine clients disagreed with Item 9, "I wish I had friends who were as understanding as this counsellor." Three clients failed to respond to this item which suggests this question may have been ambiguous to clients. If for example, the clients had very understanding friends, they would not wish for understanding friends. On the other hand, clients may not wish to share personal problems with friends.

Another item which caused the intern some concern was Item 16, "It was easier for me to talk with this counsellor than most other people." Eight clients responded negatively to this item. On a similar statement, Item 3, five clients agreed with the statement, "There are other people I would feel it much easier to talk to."

Given the generally positive response by clients to the counsellor, it might be speculated that many clients come to counselling with issues that are very difficult to talk about, and the rating may reflect the ambivalence clients often have about entering counselling. Of course, another possibility is that there was something in the intern's behavior that failed to put some clients at ease.

The intern observed that four clients failed to respond to Item 17, "This counsellor really has a lot on the ball" with one client noting that she did not understand the statement. The intern wonders if this might involve a dated

expression. On Item 7, "I felt that this counsellor regards me as a likeable person," three clients failed to respond. Similarly, three clients failed to respond to Item 4, "I'm not sure this counsellor liked me very much. Upon examining the Client Post-Counselling Forms, the counsellor observed that the same clients had missed all three items. However, two of those who completed subsequent forms did complete these items related to counsellor liking. It may have been that these clients felt it was too early to make such a judgement on the initial session.

#### **Counsellor Overall Feelings and Reactions**

The counsellor's overall reaction to her clients was positive (see Table 18, p. 106). A number of counsellor responses for individual items have already been discussed in relation to counsellor ratings over time and premature termination. What the counsellor finds striking in her ratings is the range of responses. On eight items, the intern's ratings fell in all six categories. It is the intern's opinion that the scatter may be attributable to the wide range of client concerns and the complex nature of some of the personal issues involved which evoked a variety of reactions in the counsellor. It should also be remembered that the counsellor was rating 29 very different individuals whereas the clients were rating one counsellor. The intern also

wonders how the completion of 50 forms by the counsellor may have affected the ratings as opposed to a maximum of three forms by the clients.

In summary, the intern found that by analyzing the distribution of the responses, she further examined what might have been going on in the initial session with these clients, and what the impact upon her clients might have been.

## **CHAPTER IV**

### **SUMMARY AND RECOMMENDATIONS**

#### **Summary**

The intern completed a 13 week internship at the Memorial University Counselling Centre, St. John's, Newfoundland. During the placement she conducted a research study involving the counsellor/client relationship.

The intern conducted total of 113 hours of individual counselling with 30 clients on a variety of concerns -- personal, career, and academic. She co-led an assertiveness training group and worked as a Career Information Assistant in the Career Planning Centre. In addition to case conferencing, the intern participated in group supervision conducted in an Interpersonal Process Recall format. Weekly supervision meetings and videotaping of counselling sessions allowed the intern to critically evaluate her counselling behaviors, to identify her strengths as well as weaknesses, and to further refine her counselling skills. The intern feels that she met her goals for the internship. Overall it was a very positive experience which she would highly recommend to other Educational Psychology Graduate students considering the internship option.

The research study undertaken by the intern was required as part of the internship option. This study allowed the intern to undertake research with 29 of her clients in the area of counselling process.

A comparison of counsellor and client perceptions of the initial session showed a significant positive correlation. Significant positive correlations were also found on four of the six factors: counsellor and client liking for each other; estimates of counsellor and client liking by the other; counsellor and client ratings of level of understanding felt by each other; and, counsellor and client ratings of counsellor accurate understanding. The strongest relationship on the initial session existed between counsellor and client ratings of counsellor accurate understanding and the weakest relationship was found to be between counsellor and client desire to see each other again.

A comparison of means and standard deviations showed significant differences between counsellor and client ratings on liking for each other across all sessions. Desire to see each other again, showed a significant difference in mean ratings for the first session but not subsequent sessions. Estimates of liking by the other showed a significant difference between counsellor and client ratings for all sessions as did rating of counsellor performance. In all cases, where the difference between counsellor and client ratings was significant (except for the counsellor's estimate of client liking for the counsellor) the counsellor ratings were lower than client ratings.

Counsellor and client ratings both showed significant changes over time on some factors but not all. There was no significant relationship between



clients' perceived age difference and client perceptions of the counsellor. However, results showed the female (same-sex) ratings were significantly higher than male (opposite-sex) ratings for Factor 4, client rating of level of understanding felt by the counsellor and Factor 6, client rating of counsellor accurate understanding. No significant correlations were found between counsellor and client ratings and premature termination, but some observations were made about a possible relationship between negative reactions and premature termination.

Overall the results showed that the intern and the clients generally reacted favourably to each other, and the changes over time were generally in a positive direction.

### **Recommendations**

The intern recommends conducting a research study which is relevant to both the intern's interests and internship setting. This type of study could be carried out in any setting where individual counselling sessions are conducted. The intern provides the following list of recommendations for further research:

1. Investigate the relationship between client perceptions at the initial session and following termination by having clients complete a follow-up rating form.
2. Investigate whether patterns begin to emerge over time in counsellor and client perceptions by increasing the number of times the rating scales are administered.
3. Invite clients to provide additional comments or explanations by leaving space on the rating form.
4. Compare the ratings of those clients who consented to being videotaped with those who did not.
5. Increase the sample size to improve the generalizability of results.
6. Investigate the relationship between client perceptions and other variables such as counsellor attire and status.
7. Use follow-up procedures such as mail questionnaires to ascertain the reasons for premature termination.
8. Obtain independent judge's ratings of counsellor performance to determine the relationship between judge's ratings, clients' ratings and counsellor's ratings.

9. Establish the factors of the CPF empirically and reword the items that need updating and clarity.
10. Develop further studies of this type which attempt to control for the fact that some of the significant differences reported above might be due to chance effect.

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**Appendix A****Annotated Bibliography of Readings Completed  
During the Internship**

- Baier, J. L., Rosenzweig, M. G. & Whipple, E. G. (1991). Patterns of sexual behavior, coercion and victimization of university students. Journal of College Student Development, 32, 310-322.
- This study of 702 university students explored the students' level of sexual activity in the six months prior to study and the degree to which they experienced sexual coercion and assault both before and since entering college. The results showed that not only were 80% of all students in the sample sexually active in the preceding six months, but many also had multiple partners. Freshmen were found to have a higher number of partners than graduate students. The study also showed that sex and sexual orientation are directly related to victimization rates. Based on the legal definition of rape, 11.9% of the female students indicated they had been victims of rape and 18.8% of attempted rape. Results also showed that gay/bisexual students experienced greater sexual victimization than did heterosexual students. An important finding of this study was that more than half of the acts

of sexual coercion and victimization occurred prior to entering college. The authors suggest that these data have implications for practitioners in relation to sex and sexual abuse education. The high percentage of sexually active students, particularly with multiple partners, raises concerns regarding students' awareness of the risk of sexually transmitted diseases such as AIDS (Acquired Immune Deficiency Syndrome).

Bass, E., & Davis, L. (1988). The courage to heal. New York: Harper and Row Publishers.

This book was written for women survivors of sexual abuse by survivors. It provides the reader with hope and assures the survivor that healing is possible. A special chapter was written for the counsellor which provides basic guidelines for dealing with the sexual abuse survivor. This book provides hope for all.

Benedict, H. (1985). Recovery: How to survive sexual assault for women, men, teenagers, their friends and families. New York: Doubleday & Co. Inc.

The author provides both comfort and information to rape survivors and their loved ones. Benedict compiled this book with the help of survivors and counsellors. While she recognizes that every victim has

a different experience there are common reactions and needs. This book provides an insight into how victims can become survivors.

Bower, S. A., & G. H. (1976). Asserting yourself: A practical guide for positive change. Massachusetts: Addison Wesley Publishers Co. The authors provide a step-by-step program for becoming more assertive. The book presents numerous examples of how to apply the skills suggested to improve self-esteem, cope with stress, and make more friends. Written in workbook style, readers are given the opportunity to complete practice exercises which will assist them in integrating the techniques presented. One of the most valuable exercises presented involves a scripting technique known as the "DESC script" which is a very practical tool for dealing with interpersonal conflict.

Cesari, J. P. (1986). Fad bulimia: A serious and separate counselling issue. Journal of College Student Personnel, 27, 255-159.

The author describes bulimic-like behaviors that are being observed on college campuses. These behaviors have been termed "fad bulimia" not to undermine the seriousness of the issue but to describe the onset, perpetuation, and dynamics of the behavior. While many of the symptoms and behaviors of



fad bulimia are superficially similar to clinical bulimia, the author describes how fad bulimia can be detected by careful interviewing, assessment measures, and the client's response to counselling. A common practice in college residences is for a group of students to plan a binge-purge session. The author suggests a role for residence hall personnel to intervene and prevent fad bulimia through "wellness" activities. A number of questions are raised about the need for further research in the area of fad bulimia, eating disorders, and their subtypes.

Courtois, C. A. (1988). Healing the incest wound: Adult survivors in therapy. Markham, ON: Penguin Books.

The author of this book provides a thorough review of the theory and research on incest. The characteristics and dynamics of incest are provided along with the symptoms and aftereffects. The section on incest therapy covering not only philosophy, process, and goals but also general treatment strategies and techniques as well as special treatment issues provides valuable information for anyone working with adult survivors of incest. The chapter on the effects of abuse dynamics or therapy was particularly interesting to the intern.

Crespi, T. D. (1990). Becoming an adult child of an alcoholic. Springfield, Illinois: Charles C. Thomas.

This book provides practical information for adults who have grown up with an alcoholic parent and how it affects their personality development. The issue of psychological maltreatment is presented to help those who work with ACOA's to understand the pain they feel. The author uses a case study approach showing one woman's struggle towards recovery as a way of linking the concepts of real life situations. This is a valuable book for both professionals such as psychologists, counsellors, social workers, or psychiatrists and for those who have grown up in an alcoholic home.

Davis, L. (1990). The courage to heal workbook. New York: Harper and Row Publishers.

This workbook written for both men and women survivors of sexual abuse builds on the concepts and ideas of "The Courage to Heal." While it is designed as a companion to the book, it can be used separately. The book is presented in a spiral format which encourages the reader to fill in the blanks and complete the exercises. It provides some practical tools for overcoming the effect of child sexual abuse. While it is written for survivors, therapists or counsellor may also find

it useful to use along with their clients. The book may also appeal to survivors of emotional abuse whose healing follows a similar course.

Davis, M., Eshelman, E. R., & McKay, M. (1988). The relaxation and stress reduction workbook. Oakland, California: New Harbinger Publications, Inc.

This workbook provides a comprehensive program for managing stress. It includes a variety of relaxation techniques such as progressive relaxation, breathing, meditation, visualization, self-hypnosis, and autogenics. A number of exercises are presented which involve becoming aware of one's own sources of stress, stressful thoughts, and beliefs. Techniques such as thought-stopping and refuting irrational ideas are also presented.

Some of the methods described to reduce stress include coping skills training, assertiveness training, and time management. The chapter on recording your own relaxation tape provides excellent sample scripts. In addition to the above techniques, chapters are included on the principles of nutrition and exercise which are basic to effective stress management. Finally, the chapter on getting unstuck has some very practical suggestions to help you out when you find your efforts to counter stress are becoming blocked.

This is an excellent resource book for every counsellor.

Farmer, S. (1989). Adult children of abusive parents: A healing program for those who have been physically, sexually, or emotionally abused. New York: Ballantine Books.

The author, who draws upon his extensive work with Adult Children and his own experiences as a survivor of emotional neglect, presents some of the traits of an abusive family. Some of these traits include lack of boundaries, chaos, and denial. He describes the invisible scars such as inability to trust, depression, eating disorders, alcohol or drug abuse, and relationship problems. The author presents exercises and journal work which integrate aspects of spiritual, physical, and emotional healing. Best of all, the book offers hope for survivors that they too can recover the lost self of childhood.

Feather, F. (1987). Tomorrow's best Canadian careers. Thornhill, ON: Global Management Bureau.

This book explains the changing job market and where the best jobs and career markets can be found. It describes current and future trends in Canada and the world from a social, technological, economical, and political perspective, and how these trends are restructuring the job market. The author compares the stages of career development from

an Industrial Age mind-set, as they have been traditionally presented, with the mind-set of the Information Age. He explains how to prepare for the jobs of the future. The intern found this to be an excellent resource for career planning.

Hudson, P. O. & O'Hanlon, W. H. (1991). Rewriting love stories: Brief marital therapy. New York: W. W. Norton & Co.

The authors, a wife and husband team, use solution oriented strategies to help couples who face marital deadlocks. They combine hopeful positive approaches with humor to help couples find problems that can be solved. The book includes specific tasks to change destructive patterns. The authors suggest that four factors are involved in making a good lasting relationship: skills, ethics, commitment, and a sense of humor. This book would be of interest to both therapists and clients.

Jakubowski, P., & Lange, A. J. (1978). The assertive option. Champaign, Illinois: Research Press Co.

The authors provide a comprehensive guide to becoming more assertive. Through a variety of practical exercises, self-assessment questionnaires and specific techniques, they present an approach whereby readers can learn to change their thoughts, feelings, and behaviors. Based on the experiences of people who have attended their

workshops, they present types of assertive behavior in specific situational contexts. This book is a classic on the topic of assertiveness training and recommended basic reading for the assertiveness training leader.

Jenike, M. A., Baer, L., Minichiello, W. (1990). Obsessive-compulsive disorders: Theory and management. Chicago: Year Book Medical Publishers Inc.

This book is a comprehensive compilation of the knowledge on obsessive-compulsive disorder from the leading researchers in the field. The book is divided into four sections: clinical picture, possible causes and assessment, treatment, and patient and clinic management. The intern found the section on treatment to be particularly helpful and the behavior therapy chapter to provide an excellent guide. The book also includes six different rating scales, information on self-help groups, as well as a sample of the Beck Depression Inventory.

Rapoport, J. L. (1989). The boy who couldn't stop washing: The experience and treatment of obsessive-compulsive disorder. New York: E. P. Dutton.

The author, who is both a child psychiatrist and research scientist at the National Institute of Mental Health in Bethesda, has written a very

readable and fascinating description of Obsessive-Compulsive Disorder (OCD) and how it manifests itself. She describes how these senseless thoughts and rituals invade people's lives. Some patients known as "checkers" repeatedly check lights, doors, locks, etc. -- ten, twenty or a hundred times. Some feel compelled to wash over and over again. The thoughts and rituals vary from person to person but among the most common themes are checking and washing. Numerous personal accounts are provided from those who have experienced these seemingly bizarre behaviors and thoughts. Dr. Rapoport cites many cases where patients have been treated with the drug Anofranil with varying degrees of success. Her belief is that OCD is biological in origin and can therefore be treated by drugs.

Unfortunately, she provides little information on successful psychological treatments such as behavior therapy. While the intern found this book to provide a wealth of information about the world of persons with OCD, she found it discouraging that possible psychological origins of the disorder were not presented.

Schepp, K. F. (1986). Sexuality counseling: A training program. Muncie, Indiana: Accelerated Development.

This book was designed to be a part of a course, practicum, or other training for counsellors. The book includes numerous activities which will assist the counsellor in dealing with sexuality issues. The first section "Self-Assessment of Foundation Skills" provides practical activities for the counsellor to assess and improve his/her comfort level with topics related to sexuality.

The second section presents an overview of types of sexual concerns expressed by clients to counsellors and the intern found the resources listed at the end of each chapter to provide excellent sources for further information.

Schoenberg, B. M. (Ed.) (1978). A handbook and guide for the college and university counselling centre. Westport: Greenwood Press. This book, edited by Dr. Schoenberg, Director of Memorial University's Counselling Centre, provides a broad range of information on the university counselling centre from its history and philosophy to trends and future directions. The intern was most interested in the formal and informal programs section which included chapters on individual and group counselling.



Stinson, M. H., & Hendrick, S. S. (1992). Reported childhood sexual abuse in university counselling centre clients. Journal of Counseling Psychology, 39, 370-374.

The results of this study, of the prevalence of childhood sexual abuse among college students, have important implications for university counselling centres. The findings indicate that approximately one third of those coming to a university counselling centre for personal counselling will have a history of childhood sexual abuse. This points to a need for counsellors to be trained in the area of childhood sexual abuse, as well as the need for support services such as survivors' groups. Another important finding of this study was that while clients may not spontaneously disclose previous childhood sexual abuse, they will disclose if they are asked. Therefore, it is recommended that counsellors ask for this information routinely as part of the intake process.

Strupp, H. H., & Binder, J. L. (1984). Psychotherapy in a new key: A guide to time-limited dynamic psychotherapy. New York: Basic Books, Inc.

This book provides an introduction to time-limited dynamic psychotherapy (TLDP). In addition to an overview of the topic, the authors use clinical examples to illustrate the approach. They provide

excellent insight into the therapeutic relationship through a discussion of transference and countertransference issues. The case history using the TLDP approach illustrates the various concepts outlined in the book and the authors present a valuable chapter on the psychology of termination. While this book would be an excellent resource for any therapist, it would be of particular interest to the novice therapist.

Suinn, R. M., & Deffenbacher, J. L. (1988). Anxiety Management Training. The Counseling Psychologist, 16, 31-49.

This article provides a detailed description of an anxiety management training program and demonstrates a model for the treatment of generalized anxiety, phobias, anger, and other stress-related disorders. The program is designed to lead to self-management whereby the client gradually assumes more and more responsibility. The authors provide a step-by-step guide for the therapist and a plan for 6-8 sessions which can be used individually or with groups.

Warchal, P., & Southers, S. (1986). Perceived importance of counseling needs among adult students. Journal of College Student Personnel, 27, 43-48.

A study of 878 adult students ranging in age from 18-62, failed to confirm the existence of major differences in the perception of

counselling needs attributable to developmental period. Results also showed that regardless of developmental period and sex, academic counselling needs were indicated to be most important. Younger students were more concerned than older students with job-finding skills and coping with leisure time. The author suggests that these results are interesting from the perspective that student services planners frequently assume that returning women students need assistance with job hunting. Similarly, it is often assumed that older adults need help with planning leisure activities. Results also showed that the older group were significantly higher than the younger group on their need to cope with parenting difficulties.

**Appendix B****Videotape/Audiotape Permission Form**

I, \_\_\_\_\_, grant permission to have my counselling sessions at the Memorial University Counselling Centre videotaped/audiotaped. I understand that the tapes will be used solely for the purposes of supervision. That is, the tapes will be viewed only by the counsellor, the counsellor's immediate supervisor(s) or in case conferences at the Centre. I can request that the taping cease at any time and/or that the tapes be erased.

I also understand that refusing to be taped will not affect access to counselling at the Centre.

Signature \_\_\_\_\_

Witness \_\_\_\_\_

Date \_\_\_\_\_

**Appendix C**  
**Case Summary Sheet**

CLIENT: \_\_\_\_\_ COUNSELLOR: \_\_\_\_\_

**General Presenting Concerns:** Academic, Career, Personal

**Dates Seen:**

1. _____	5. _____	9. _____
2. _____	6. _____	10. _____
3. _____	7. _____	11. _____
4. _____	8. _____	12. _____

**Tests Taken:**

**Case Summary:**

T.Co. T.Cl. T.M.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Appendix D**  
**Client Post-Counselling Form**  
*(Adapted from Sheppard, 1978)*

1	2	3	4	5	6
Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree

Be sure to indicate only one response to each item. Do not spend too much time on any one item. Try to respond to each statement in terms of your feelings during the counselling session.

- \_\_\_ 1. I had a very warm feeling towards this counsellor.
- \_\_\_ 2. This counsellor must have realized that she didn't understand me very well.
- \_\_\_ 3. There are other people I would feel it much easier to talk to.
- \_\_\_ 4. I really felt comfortable talking to this counsellor.
- \_\_\_ 5. I look forward to talking with this counsellor again.
- \_\_\_ 6. At times this counsellor seemed confused about what I was trying to say.
- \_\_\_ 7. I felt that this counsellor regards me as a likeable person.
- \_\_\_ 8. I see no point in seeing this counsellor again.
- \_\_\_ 9. I wish I had some friends who were as understanding as this counsellor.
- \_\_\_ 10. I wish I could spend more time with this counsellor.
- \_\_\_ 11. Many of the things this counsellor said just seemed to hit the nail right on the head.

.../2

- |  | 1                    | 2                      | 3                    | 4                 | 5                   | 6                 |
|--|----------------------|------------------------|----------------------|-------------------|---------------------|-------------------|
|  | Strongly<br>Disagree | Moderately<br>Disagree | Slightly<br>Disagree | Slightly<br>Agree | Moderately<br>Agree | Strongly<br>Agree |
- \_\_\_\_\_ 12. If I had someone else as a counsellor I might find it easier to discuss my feelings.
- \_\_\_\_\_ 13. It seemed that the counsellor understood me even when I didn't express myself very well.
- \_\_\_\_\_ 14. I'm not so sure that this counsellor liked me very much.
- \_\_\_\_\_ 15. The counsellor often misunderstood what I was trying to say.
- \_\_\_\_\_ 16. It was easier for me to talk with this counsellor than with most other people.
- \_\_\_\_\_ 17. This counsellor really has a lot on the ball.
- \_\_\_\_\_ 18. I guess I didn't like this counsellor very much.
- \_\_\_\_\_ 19. I would certainly recommend this counsellor to any friend who needed help.
- \_\_\_\_\_ 20. After the session with this counsellor I'm not sure that counselling can be very helpful.

### Counsellor Post-Counselling Form

*(Adapted from Sheppard, 1978)*

Indicate the response most representative of your present feelings. Your feelings may change but express your feelings right now at this point in your counselling with this client. There are six possible responses to each item.

1	2	3	4	5	6
Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree

Be sure to indicate only one response to each item. Do not spend too much time on any one item. Try to respond to each statement in terms of a comparison with other clients you may have had.

- \_\_\_ 1. I like this client more than most I have had.
- \_\_\_ 2. I look forward to talking with this client again.
- \_\_\_ 3. I couldn't seem to get very interested in this client.
- \_\_\_ 4. I feel fairly sure that this client would want to see me again if given an opportunity.
- \_\_\_ 5. I was seldom in doubt as to what this client was trying to say.
- \_\_\_ 6. I felt somewhat ineffective with this client.
- \_\_\_ 7. I would prefer working with this client more than with many of the clients I have had.
- \_\_\_ 8. It was often difficult for me to understand what this client was trying to communicate.
- \_\_\_ 9. I doubt whether this client saw me as a warm and accepting person.



.../2

	1	2	3	4	5	6
	Strongly Disagree	Moderately Disagree	Slightly Disagree	Slightly Agree	Moderately Agree	Strongly Agree
___ 10.						
___ 11.						
___ 12.						
___ 13.						
___ 14.						
___ 15.						
___ 16.						
___ 17.						
___ 18.						
___ 19.						
___ 20.						

**Appendix E**  
**Personal Data Collection**

Following the first session only, please provide the following information.

Your Age \_\_\_\_\_ Marital Status \_\_\_\_\_  
Your Gender \_\_\_\_\_ Faculty and Year \_\_\_\_\_

Do you come from a rural community or urban centre?

\_\_\_\_\_

Indicate in the appropriate space which description best reflects your perception of the counsellor's age.

About the same age as you \_\_\_\_\_  
Older than you - if yes, indicate # of years \_\_\_\_\_  
Younger than you - if yes, indicate # of years \_\_\_\_\_

**Appendix F**  
**Consent Form**

Dear Client:

I am a graduate student in the Faculty of Education at Memorial University. As part of my internship, I am undertaking a study to evaluate my effectiveness as a counsellor. I am requesting your participation in this study.

Your participation would involve completing a rating form up to three times: one immediately after the initial counselling session, one immediately after the third, and one immediately after the final session. The rating form will take approximately two to five minutes to complete each time. You will also be asked to complete a personal data sheet following the first session. Completion will be voluntary and will take less than a minute to answer. You may refrain from answering any question that you prefer to omit on either form.

The data gathered will be confidential and anonymous. I will not have access to any of the data until the study is completed at the end of the Spring Semester. In no way will the responses indicated on the form be linked to you. You may withdraw from the study at any time, simply by informing me that you no longer wish to complete further forms.

This study has received the approval of the Director of the Memorial University Counselling Centre and the Faculty of Education's Ethics Review Committee.

If you are in agreement with participating please sign below and return one copy to me. The other is for you.

Yours sincerely,

Patricia Rose, Counselling Intern

I \_\_\_\_\_ hereby agree to participate in a study to measure the counsellor's effectiveness. I understand that participation is entirely voluntary and that I may withdraw at any time. I am also aware that participation in this study is not a condition of receiving assistance at the Counselling Centre.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

## **Appendix G**

### **Directions for Client**

*Adapted from Short (1991)*

This study is designed to evaluate various aspects of the counselling you receive from the intern. The attached rating form and personal data (following 1st session only) are coded to ensure anonymity. The counsellor will not have access to this information until the end of the semester by which time the counselling relationship will be terminated. Your responses will be in no way linked to you as a client. Please follow the directions below and return the forms to the receptionist before leaving the Centre today. Your participation in this study is appreciated.

**Directions:** The personal information is to be completed following the first session only. On subsequent sessions, 3rd and fifth you will be asked to complete only the Client Post-Counselling Form (CPF). During counselling, people experience different reactions and feelings toward their counsellor. Indicate the response to each item which best reflects your personal feelings and reaction to the counselling you received today. Reflect only on how you experienced today's session. Your responses will remain confidential.

Thank you for taking the time to participate in this study.







