博士（人間科学）学位論文

Immediate Effects of Counselor Interventions on Client Verbal and Covert Behaviors

カウンセラーの介入がクライエントの言語および内面行動に及ぼす即時的効果

２００７年 ７月

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TABLE OF CONTENTS

Chapter

I. INTRODUCTION AND PURPOSE……. 1

Process and Outcome Research of Counseling……..… 1
Discovery-Oriented and Theory-Testing Research……..... 5
Client Verbal and Covert Behaviors……. 6
Distinctions Among Counseling Outcomes……..…..... 9
Purposes of the Research……..... 12

II. MEASURING THE EFFECTIVENESS OF COUNSELING SESSIONS (STUDY 1)…… 17

Method……....…… 19
Results……..... 23
Discussion……..... 27

III. CATEGORIZING COUNSELOR INTERVENTIONS (STUDY 2)……..... 30

Method……....…… 32
Results……..... 37
Discussion……..... 46

IV. CATEGORIZING CLIENT VERBAL BEHAVIORS (STUDY 3)……....… 50

Method……....…… 52
Results……..... 55
Discussion……..... 61

V. IMMEDIATE EFFECTS OF COUNSELOR INTERVENTIONS ON CLIENT VERBAL BEHAVIORS (STUDY 4)…….....……....…… 64

Method……....…… 69
Results……..... 74
Discussion……..... 83

VI. IMMEDIATE EFFECTS OF COUNSELOR INTERVENTIONS ON CLIENT COVERT BEHAVIORS (STUDY 5)……..… 89

Method……...…… 92
Results……..... 96
Discussion……... 103

VII. SUMMARY AND GENERAL DISCUSSION……. 113

Summary……... 113
General Discussion…… 117

REFERENCES……. 120

APPENDIX

A. HELPFUL EXPERIENCE SCALE…… 138
B. MANUAL FOR THE HELPING SKILLS SYSTEM – MODIFIED ……..… 139
C. MANUAL FOR THE CLIENT RESPONSE MODES SYSTEM……. 147
D. SESSION RECALL QUESTIONNAIRE……... 151
E. POSITIVE AND NEGATIVE EFFECTS TAXONOMY……... 153

LIST OF TABLES

Table

1-1. Measures of Process Variables…….. 4

2-1. Helpful Experience Scale Items and Factor Loadings…….. 24

2-2. Means, Standard Deviations, Coefficient Alphas, and Correlations of HES Subscales, CSQ-8J, and CRF-SJ……... 26

3-1. Categories of the Helping Skills System - Modified (HSS-M)……...…… 34

3-2. Proportions of Counselor Interventions Agreed upon by Judges for Each Category……. 39

3-3. Proportions of Counselor Interventions in Person-Centered and REBT Sessions……...…….. 41

3-4. Proportions of Counselor Interventions in Each Category for Thirds of Sessions……. 42

4-1. Categories of the Client Response Modes System (CRMS)……. 54

4-2. Proportions of Advisee or Client Verbal Behaviors Agreed upon by Judges for Each Category……..…… 57

4-3. Proportions of CRMS Categories in the Conversation and Counseling Dyad……..…… 58

4-4. Proportions of CRMS Categories in Each Category for Thirds of Sessions…… 59

5-1. Summary of One-way Repeated Measures Analysis of Variance on the Counselor Interventions for Thirds of Sessions…...……...…… 76

5-2. Means and Standard Deviations for Counselor Interventions by Thirds of Sessions……. 77

5-3. Summary of One-way Repeated Measures Analysis of Variance on the Client Verbal Behaviors for Thirds of Sessions…….....…... 78

5-4. Means and Standard Deviations for Client Verbal Behaviors by Thirds of Sessions…….. 79

5-5. Correlations Between the Proportions of Client Verbal Behaviors and Session Effects Measures……....…… 81

5-6. Sequential Analysis of the Effects of the Counselor Interventions on the Subsequent Client Verbal Behaviors…….. 82

6-1. Descriptions, Frequencies, and Proportions of the Positive Effects Categories……... 94

6-2. Descriptions, Frequencies, and Proportions of the Negative Effects Categories……... 95

6-3. Point-Biserial Correlations between the Positive and Negative Effects Taxonomy and Session Effects Measures…… 97

6-4. Proportions of the Helpful and Hindering Interventions…….....……. 99

6-5. Sequential Analysis of the Counselor Interventions Associated with the Positive Effects…….. 101

6-6. Sequential Analysis of the Counselor Interventions Associated with the Negative Effects……... 102

7-1. Summary of the Immediate Effects of Counselor Interventions on Client Verbal and Covert Behaviors……....……... 116

LIST OF FIGURES

Figure

1-1. Relation among Immediate Effects, Session Effects, Eventual Effects, and Extratherapeutic Influences…….. 10

1-2. Overview of the Research……. 16

3-1. Change Across Thirds of Sessions in the Counselors' Usage of Interventions……. 45

C H A P T E R I

INTRODUCTION AND PURPOSE

PROCESS AND OUTCOME RESEARCH OF COUNSELING

In 1952, a shocking study by Eysenck demonstrated that recovery from neuroses was unrelated to whether a client received any form of psychological interventions. Eysenck's challenge to the effectiveness of counseling influenced a number of researchers to examine the outcome of counseling. They attempted to determine whether clients improved significantly from the beginning to the end of counseling. Over the years, a substantial amount of knowledge has been accumulated using sophisticated research methodologies. There is now little doubt that counseling is generally beneficial (e.g., Barker, Funk, & Houston, 1988; Lipsey & Wilson, 1993; McDermut, Miller, & Brown, 2001). This type of counseling research is called outcome research.

One of the main purposes of outcome research has been to examine which treatments are effective with which types of psychological problems (Heppner, Kivlighan, & Wampold, 1999). The results of individual outcome studies may appear to indicate that outcome researchers have been successful in their attempts to achieve this purpose. However, the findings of meta-analysis research do not support the outcome researchers' attempts (e.g., Ahn & Wampold, 2000; Wampold et al., 1997). Wampold et al. (1997) meta-analyzed outcome studies that compared the effectiveness of two or more treatments of different theoretical approaches. The results of the analysis indicated that the differences in outcome among treatments were not statistically significant.

One of the most common investigation strategies of outcome research is the component research, which involves comparisons between a treatment package and a treatment package without a theoretically important component or a treatment package with an added component. It uses experimental designs to test whether the component is necessary to produce therapeutic benefit (Heppner et al., 1999). A meta-analysis study by Ahn and Wampold (2000) found that the effect size for the difference between packages with and without the critical components was not significantly different from zero, indicating that theoretically purported important components were not responsible for therapeutic benefits.

The results from the previous studies suggest that counseling has positive effects but we still do not know the mechanisms of change, i.e., what it was in counseling that worked and how it worked. This critical problem in the existing outcome research is related to its research methodology. Outcome research usually determines the effectiveness of counseling by comparing the client's pre- and post-treatment scores on outcome measures (Hill, & Lambert, 2004). Much valuable information may be lost when researchers examine the outcome question from a pre- and post-perspective only. To explain the mechanisms of change, researchers need the data from the process of counseling, i.e., what occurs between the counselor and client (Greenberg, 1986).

Process research investigates what happens in counseling sessions, especially in terms of counselor behaviors, client behaviors, and the interaction between counselors and clients, while outcome research typically examines changes that occur as a result of the process of counseling (Hill & Corbett, 1993). Process can be distinguished from input variables and extratherapy variables. Input variables involve the characteristics of counselors and clients such as personality, demographics, expectations and world views.

Extratherapy variables refer to what happens to clients outside counseling sessions, which can help or hinder the therapeutic process and outcome (Hill & Williams, 2000).

Process variables listed by Heppner et al. (1999) and Hill and Lambert (2004) include (a) ancillary behaviors such as speech dysfluency or nonverbal behaviors such as the body-lean of the counselor, (b) verbal behaviors such as response modes of the counselor and client, (c) covert behaviors such as counselor intentions to support or challenge, (d) content, which examines the topic of discussion, (e) quality of involvement such as helpfulness of counselor interventions and depth of clients' self-exploration, and (f) interpersonal manner such as empathy and dominance. Measures of these process variables are presented in Table 1-1.

The development of process research benefited by the advent of audio recording, which enabled researchers to obtain moment-by-moment observation data from counseling events (Kiesler, 1973). Carl Rogers (1942) persuasively described the benefits of recordings for training and research, allaying some of the initial apprehension surrounding recording. Thus, began the empirical study of the counseling process, with Rogers being generally credited with founding process research.

The general goal of process research is to describe what happens within counseling sessions and how it leads to the client's change by observing the process variables (Hill, 1982; Martin, Martin, & Slemon, 1989). As mentioned above, one of the weaknesses of outcome research is related to its inability to explain what it was in counseling that worked and how it worked. To say that something worked without being able to specify what it was that worked is equivalent to "giving blue and green pills to patients in a drug study without knowing the contents of the pills" (Greenberg, 1986, p. 6). Suppose

Table 1-1

Measures of Process Variables

Process variable	Measure
Ancillary behaviors	Vocal Quality (Rice & Kerr, 1986)
	Emotional Facial Action Coding System (Friesen & Ekman, 1984)
Verbal behaviors	Helping Skills System (Hill & O'Brien, 1999)
	Verbal Response Modes (Stiles, 1992)
	Hill Client Verbal Response Modes Category Systems (Hill, 1986)
	Client Behavior System (Hill, Corbett, Lightsey, & Gomez, 1992)
Covert behaviors	Therapist Intentions List (Hill & O'Grady, 1985)
	Taxonomy of Helpful and Nonhelpful Events (Elliott, 1985)
Content	Counseling Topic Classification System (Richards & Lonborg, 1996)
	Hill Interaction Matrix (Hill, 1965)
Quality of involvement	Helpfulness Scale (Elliott, Barker, Caskey, & Pistrang, 1982)
	Client Experiencing Scale (Klein, Mathieu-Coughlan, & Kiesler, 1986)
Interpersonal manner	Structural Analysis of Social Behavior (Benjamin, 1974)
	Interpersonal Communication Rating Form (Strong & Hills, 1986)

researchers have found that cognitive therapy is more effective in treating depression than person-centered therapy. If they cannot specify what actually occurred in the respective therapies, their findings may not be able to help counselors plan and revise their interventions.

Another problem that challenges outcome research is related to its inability to examine whether the client receives and absorbs the interventions that the counselor offered. Even if clients suffering from psychological problems improve at the end of counseling, outcome researchers cannot confidently declare that their positive change has been caused by counselor interventions, because numerous extratherapeutic factors, such as having a good support system, may affect the client's improvement (Lambert & Barley, 2002). Without observing and analyzing the clients' reactions to counselor interventions within counseling sessions, there is no way to examine this problem. Therefore, researchers must pay attention to the client process that is induced by counselor interventions and associated with the client's change.

To sum up, counseling researchers need to examine the in-session behaviors of counselors and clients in order to explain the mechanisms of change.

DISCOVERY-ORIENTED AND THEORY-TESTING RESEARCH

Discovery-oriented research describes what occurs within counseling sessions from a nontheoretical stance (Hill, 1990). There are two approaches to this research. One is to provide a closer, discovery-oriented look into therapeutic events including participants' behaviors and experiences; the other is to discover the relations among therapeutic conditions, operations, and consequences (Mahrer, 1988a). Researchers

often develop their own scales or categories to code occurrences of participants' behaviors and experiences in the session (e.g., Elliott, 1985; Lee, Hallberg, Kocsis, & Haase, 1980; Wilcox-Matthew, Ottens, and Minor, 1997). Ideally, researchers maintain an attitude of openness to learning about the process from their observations (Elliott, 1984).

Because discovery-oriented research is not based on any particular counseling theory, researchers can explain findings using many different theories. Given the aforementioned lack of proven outcome differences among approaches to counseling (Wampold et al., 1997), using many perspectives to examine data makes sense.

In contrast with discovery-oriented research, the major aim of theory-testing research is to confirm or disconfirm the theoretical propositions (Mahrer, 1988a). Theory-testing investigators are often testing theories that are already being used by counselors (Hill & Corbett, 1993). Consequently, theory-testing research may be lagged behind the practice of counseling. It may explain why counselors generally use their values and clinical judgment to determine what intervention or theory to use rather than basing on their judgments on the scientific evidence.

Discovery-oriented research can contribute to the discovery of something new and practical about counseling process and outcome. In conclusion, the development of the field of counseling will benefit more from discovery-oriented research than theory-testing research.

CLIENT VERBAL AND COVERT BEHAVIORS

In counseling process research, the exploration of the mechanisms of change is of

great importance, though the investigation of the mechanisms of symptom formation and pathology is also important. It is the client who changes and the goal of counseling research should be explaining how this change happens (Greenberg, 1986). To achieve this goal, researchers need to examine the client's in-session behaviors that may facilitate or hinder the change.

Counseling process consists of interaction between counselor and client behaviors, which can be either overt or covert (Hill & O'Grady, 1985; Martin, Martin, & Slemon, 1989). The overt behaviors can be observed in various ways such as facial expressions, body postures, voice tones, and so on; however, the most important aspect of overt behaviors may be the verbal behaviors, because much part of the communication between the counselor and client relies on the verbal behaviors.

The verbal behaviors are commonly categorized in terms of response modes, which refer to the grammatical structure or form of the verbal behaviors (Hill, 1982). Elliott et al. (1987) reported that more than 30 systems had been developed to assess counselor response modes since the 1940s. Unlike counselor verbal behaviors, client verbal behaviors have received little research attention. Thus, few systems have been developed to categorize client verbal behaviors (Hill & Lambert, 2004) and few studies have examined the relationship between the client verbal behaviors and other aspects of counseling, such as counseling outcome and counselor interventions. However, the lack of research attention does not imply that client verbal behaviors are not worth investigating. The client verbal behaviors are an important process variable because they reflect the client's style of involvement and ability to participate in a verbal interaction with the counselor (Hill, 1986). Research on the client verbal behaviors can be used to describe the client verbal behaviors and examine the ways in which these

behaviors are related to the process and outcome variables of counseling. Previous studies, although small in number, have suggested that the client verbal behaviors occurring during counseling sessions may affect counseling outcome (e.g., Hill, Carter, & O'Farrell, 1983; Lee, 2005).

Covert behaviors refer to thoughts, feelings, and perceptions (Highlen, & Hill, 1984). As Martin (1984) noted, limiting the investigations of counseling session to the overt behaviors is to ignore psychological processes. The client's covert behaviors can be examined through the client's reports of what she or he experienced during the counseling sessions. The client's reports are the most direct source of information about the client's experiences of counseling sessions. Clients can supply their evaluations of the significant aspects of counseling process, including their immediate, uncensored and unexpressed reactions to therapeutic interventions or events (e.g., Elliott, Barker, Caskey, & Pistrang, 1982; Paulson, Truscott, & Stuart, 1999; Wilcox-Matthew, Ottens, & Minor, 1997), and the perceived effectiveness of counseling sessions (e.g., Elliott & Wexler, 1994; Stiles, 1980).

Previous research indicates clear differences in ratings of counseling process and outcome by the clients, counselors and nonparticipant observers; in addition, the client's perceptions of the counseling process have been shown to predict outcome, often better than ratings by the counselors or observers (Caskey, Barker, & Elliott, 1984; Horvath, & Symonds, 1991; Orlinsky & Howard, 1986; Orlinsky, Ronnestad, & Willutzki, 2004).

Under some circumstances, however, clients may be an imperfect source of information. Clients may not be conscious of or may not remember particular aspects or events in counseling sessions. They will sometimes deliberately or unconsciously limit or distort information given to the researcher. Their reports may be biased by

preexisting beliefs and ideas, and self-presentation style. Their reliability may be reduced by external influences, shifting evaluation criteria, lack of vocabulary, or lack of interest in reporting tasks.

Despite these limitations, clients' reports are a rich source of information. After all, it is their experience, and the farther researchers move from the clients' experience, the more inferential are the conclusions of counseling research.

DISTINCTIONS AMONG COUNSELING OUTCOMES

Counseling outcome refers to the client's changes that occur directly or indirectly as a result of counseling (Hill & Williams, 2000). Although most outcome researchers have assessed counseling outcome in terms of eventual effects at the end of an entire treatment, process researchers have emphasized the need to pay attention to the immediate effects and session effects of counseling that can be measured during or immediately after sessions.

Immediate effects refer to the therapeutic effects which specific counselor interventions bring about in clients during their delivery or shortly afterward (Elliott, James, Reimschuessel, Cislo, & Sack, 1985). The concept can be thought of as therapeutic consequences at the level of the specific counselor responses such as asking questions, paraphrasing the client's statements, and giving advice. Immediate effects can be measured on any of the client process measures presented in Table 1-1.

Session effects are assessed immediately after each counseling session. The measurement of session effects is usually made in terms of the client's or counselor's evaluation of the effectiveness or quality of the therapeutic interactions within the

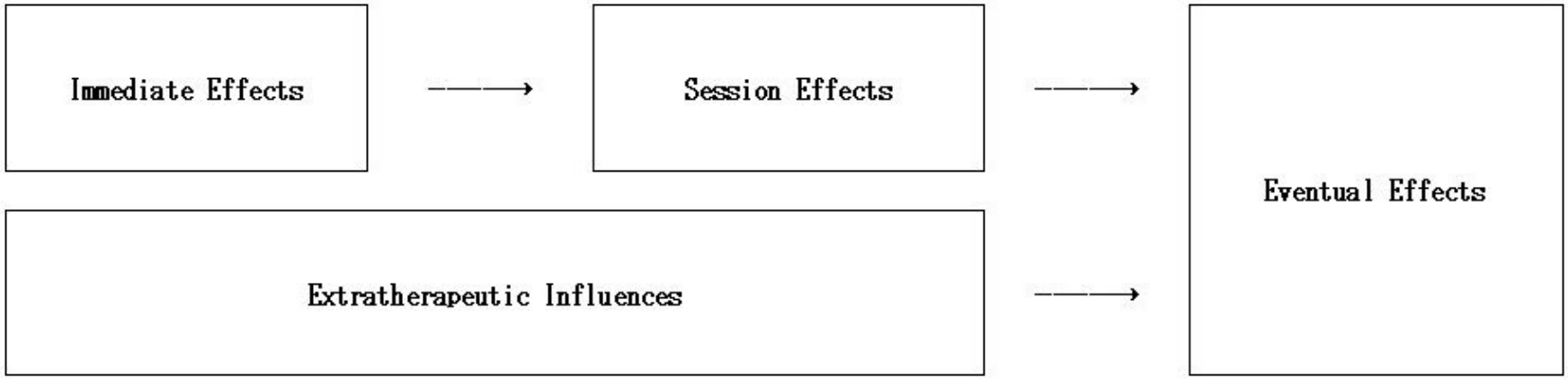

Figure 1-1

Relation among immediate effects, session effects, eventual effects, and extratherapeutic influences

session (Mallinckrodt, 1994). The measures of session effects, which have been used by process researchers, include the Session Impacts Scale (Elliott & Wexler, 1994), Session Evaluation Questionnaire (Stiles, 1980), and Therapeutic Realizations Scale-Revised (Kolden et al., 2000).

Eventual effects are related to the common concept of counseling outcome, which refers to the client's changes that occur as a result of an entire treatment. Operations for eventual effects typically would consist of the dependent measures in the outcome research, which include some measures of psychological function or dysfunction, such as depression, anxiety, or achievement of psychotherapeutic goals (Hill & Lambert, 2004).

The process researchers' postulation concerning the relation among the above-mentioned outcomes is that the accumulation of immediate effects leads to session effects and then the accumulation of session effects influences eventual effects (Kolden et al., 2000; Martin, 1984; Stiles, 1980).

Researchers need to consider the influences of extratherapeutic events on the counseling outcome. Immediate and session effects focus only on the changes that occur during the counseling session, as distinguished from the extratherapeutic influences (Mallinckrodt, 1994; Stiles, 1980). However, eventual effects of counseling may be greatly affected by extratherapeutic events outside of the counseling sessions (Greenberg, 1986; Lambert & Barley, 2002). The relation among the counseling outcomes and extratherapeutic influences is given in Figure 1-1.

Although eventual effects are useful in evaluating the effectiveness of an entire treatment, the effects of a particular intervention, which was delivered during a particular session, may be greatly diluted if they are examined at the end of the entire

counseling because of the cumulative effects of other interventions and extratherapeutic influences.

PURPOSES OF THE RESEARCH

The present research consists of five counseling process studies. The purposes of each study include the development of measures for session effects, counselor interventions and client behaviors, and the exploration of the immediate effects of counselor interventions on client verbal and covert behaviors.

Study 1

Counseling outcomes measured at the end of the entire treatment, i.e., eventual effects, are not relevant to the investigation of the effectiveness or productiveness of moment-to-moment interactions occurring during the counseling sessions. Eventual outcome may be affected by numerable factors such as the cumulative effects of therapeutic encounters and extratherapeutic events. To examine what it works and how it works in counseling sessions, the measure of the smaller unit of outcome focusing only on what occurs within counseling sessions are necessary. However, such measures have not been yet developed in Japan. The purpose of Study 1 is to develop the Helpful Experience Scale for measuring the effectiveness of counseling sessions in terms of the client’s experience.

Study 2

Needless to say, counselor interventions exercise a significant impact on the

counseling process and outcome. The first step for exploring the effects of counselor interventions is to develop the measure of the counselor interventions. The Helping Skills System developed by Hill and O'Brien (1999) was found to have good reliability and validity. However, the system contains two heterogeneous interventions in one category, which are conceptually different and might have a different impact on the client. Therefore, the first purpose of Study 2 is to modify the system, produce the Japanese manual for it, and demonstrate interjudge agreement levels. The second purpose is to verify the validity of the modified system by examining whether it is capable of describing the differences in the counselor interventions from different theoretical orientations.

Study 3

Counseling outcome is the result of the interaction between counselor and client. Therefore, client verbal behaviors occurring during this interaction may influence the counseling outcome. Despite their therapeutic importance, they have not received much attention from researchers. Moreover, not even a system of client verbal behaviors has emerged as a standard measure in the field. The existing measures have shortcomings such as inability to describe the variety of client verbal behaviors and unsatisfactory interjudge reliability. Study 3 has two goals: the first goal is to develop a measure for categorizing client verbal behaviors by selecting appropriate categories from the existing systems and to produce the Japanese manual for it; the second goal is to establish the reliability and validity of the system by comparing the differences in verbal behaviors between the casual conversation and counseling session.

Study 4

The main purpose of process research is to explain the mechanisms of change. To achieve this goal, researchers need to observe counselor interventions and client behaviors, and find the relation between them. The Study 4 and 5 follow a two-step strategy: the first step is to identify client behaviors that may facilitate or hinder the effectiveness of the counseling session; the next step is to explore the immediate effects of counselor interventions on these client behaviors.

Verbal interaction between counselor and client is the major feature of the counseling process. Understanding the effects of counselor interventions on client verbal behaviors is important, because the client's verbal involvement during a particular session may influence the effectiveness of that session, which consequently may have an effect on the eventual outcome of counseling. Therefore, the first purpose of Study 4 is to identify client verbal behaviors that are positively or negatively correlated to session effects measures. The second purpose is to examine the immediate effects of counselor interventions on the occurrence of these client verbal behaviors.

Study 5

Client verbal reactions do not explain all the immediate effects of counselor interventions. To get a better picture of the immediate effects of counselor interventions, client covert reactions to counselor interventions need to be explored. Client covert reactions can be examined though the clients' reports about their perceptions of what was helpful and how they were helped in the counseling session. The therapeutic importance of client covert reactions have been suggested by many researchers (e.g., Elliott, 1985; Paulson, Truscott, & Stuart, 1999; Yalom, 1995). Study 5 also follows the

two-step strategy used in Study 4. The first goal of Study 5 is to develop a taxonomy for classifying clients' covert reactions to counselor interventions that they perceive to be helpful or unhelpful; the second goal is to investigate how particular counselor interventions are associated with these covert reactions.

OVERVIEW OF THE RESEARCH

Figure 1-2 presents the overview of the present research. In chapter 1, important issues related to the present research are introduced; then the purposes of this research are stated. Chapter 2 describes the process of developing the Helpful Experience Scale for measuring the effectiveness of counseling sessions. Chapter 3 and 4 focus on the development of category systems for classifying counselor interventions and client verbal behaviors. In chapter 5 and 6, the effects of counselor interventions on client verbal and covert behaviors are explored. Chapter 7 summarizes research findings and discusses general issues related to the present research.

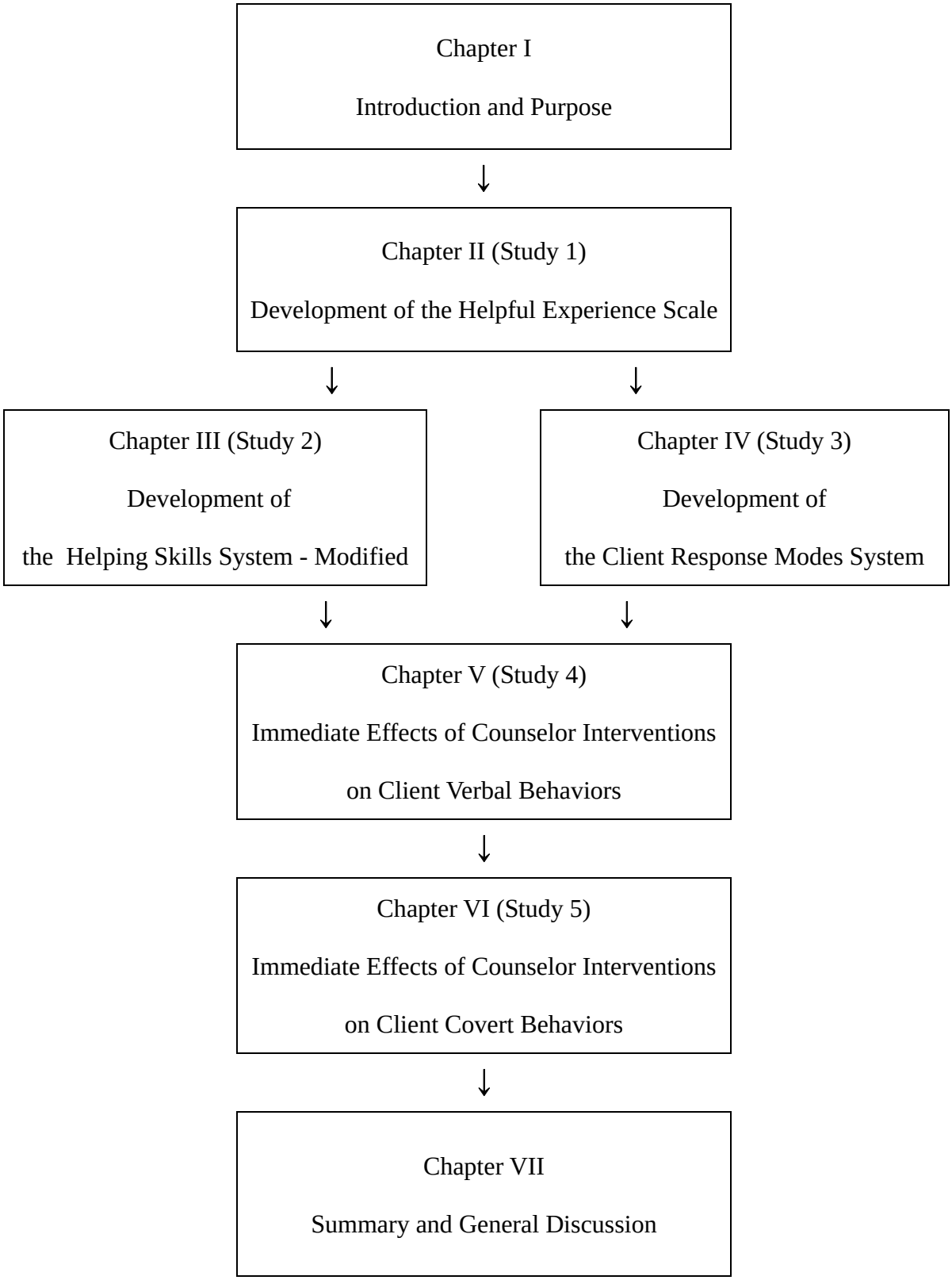

Figure 1-2

Overview of the research

CHAPTER II

MEASURING THE EFFECTIVENESS OF COUNSELING SESSIONS (STUDY 1)

Which ways of spending a therapy hour are beneficial? What works in counseling? Is it more productive to focus on the client's emotions? Is giving advice harmful? Many counselors and counseling trainees may have asked themselves these questions because they need to know the answers to these fundamental questions to be more effective with their clients.

To answer these questions, counseling researchers need to observe what goes on in the counseling process and relate them to the counseling outcome (Greenberg & Pinsof, 1986). The counseling outcome is usually measured in terms of eventual effects, i.e., the client's changes that occur as a result of an entire treatment. The eventual effects have been referred to as treatment outcome, eventual outcome, final outcome or simply outcome (Elliott & James, 1989). However, linking the counseling process directly to the eventual effects may not be feasible because the eventual effects cannot be assessed until long after any particular intervention or interaction and may then reflect the cumulative effects of diverse in-therapy and out-of-therapy variables (Stiles, 1980). If a session effects measure that can assess the effectiveness of counseling immediately after a particular session rather than at the end of an entire treatment is developed, it may enable us to find answers to the above-mentioned questions, namely, the relation between the counseling process and outcome.

The session effects have been variously called session outcome, session impacts, or therapeutic realizations (Elliott & James, 1989; Orlinsky, Ronnestad, & Willutzki, 2004).

An important assumption related to the session effects is that productive sessions have beneficial effects that are perceptible by the clients immediately, even though the resultant changes in symptoms or problems require incubation or cumulation to some critical mass (Stiles, 1980). This assumption has been supported by numerous empirical studies that proved the significant relation between the session effects and the eventual effects of counseling (e.g., Mallinckrodt, 1993; Oclatis, Bernard, Schwartz, & Stiner, 1980; Stiles, Shapiro, & Firth-Cozens, 1990; Tryon, 1990). In considering the importance of the session effects, it is disappointing that the measure of the session effects has not been developed in Japan.

The two most important and frequently used measures of session effects are the Session Evaluation Questionnaire (SEQ; Stiles, 1980) and the Session Impacts Scale (SIS; Elliott & Wexler, 1994). The SEQ is a global measure of session effects, which emphasizes overall evaluation of a session and immediate postsession mood. In contrast to the SEQ, the SIS is a content-specific measure of change in the client's way of thinking and feeling about presenting problems, the counselor, and the counseling as a result of the interactions occurring during a single session of counseling.

Although both measures have been shown to possess solid internal consistency and stable factor structures, there are limitations of each. First, the immediate postsession mood measured by the SEQ can be influenced by a host of factors other than what just has happened in the session (Mallinckrodt, 1994). Therefore, the immediate postsession mood score may not properly reflect the effectiveness of a session. Second, each of the SIS items consists of long descriptions about the client's experience of a session, which can be inefficient and confuse respondents.

The purpose of the current study was to develop the Helpful Experience Scale

(HES) for measuring the session effects of counseling in terms of the client's experience of a counseling session. The wording of the HES items was made short and clear, and focused respondents' attention on changes only due to their experience of the session. The factor structure, internal consistency, and convergent validity of the HES were examined by asking participants to complete the HES after viewing the video of a counseling interview. This analogue research method may not be the best way to conduct counseling research, because the generalizability of the research findings can be seriously limited (Heppner et al., 1999). However, practical obstacles related to gaining cooperation from counseling centers, counselors and, above all, distressed clients, and collecting data from large samples enough to perform statistical analyses, made many counseling researchers settle for second best, i.e, using the interview videos and client surrogates (e.g., Corrigan & Schmidt, 1983; Douglas & Pecnik, 1985; LaCrosse & Barak, 1976; Miyamoto, Fujioka, & Hirayama, 2003).

METHOD

Item Generation

Positive session effects of counseling that have consistently been reported to be related to the eventual outcome include insight, catharsis, resolution of interpersonal conflicts, experience of self-efficacy in problem solving, and enhanced feelings of hope and determination to carry on (see Orlinsky at al., 2004, for a review of these findings). 10 clinical psychology graduate students were presented with a brief description of the concept and examples of the session effects, and requested to generate as many answers as possible to the following question:

Imagine that you are a client seeking counseling for a personal problem. After a helpful session, how will you describe your experiences during the session? List appropriate expressions with which to complete the following sentence:

AS A RESULT OF THIS SESSION, I _____.

Unclear expressions were eliminated; statements with highly similar content were grouped together and the most appropriate ones were selected. This process produced an initial pool of 18 items.

The relevance and the clearness of the potential 18 items was investigated by asking 20 clinical psychology graduate students to rate each item on a scale of 1 (not at all) to 5 (very) on the following two questions: (a) Is the meaning of this item clear?; (b) Is this item relevant to the clients' experiences in helpful sessions?

The criterion used for item selection was that items with a mean rating of 4 or above both on the two questions were retained. Items that received a mean rating of less than 4 on any of the two questions were discarded. Of the original 18 items rated by the 20 graduate students, 14 met the criterion.

Participants

Participants were 101 students (30 men, 71 women; average age = 23.86, *SD* = 3.78 years) enrolled either in clinical psychology classes for undergraduates (*n* = 73) or graduate level training in clinical psychology (*n* = 28).

Instruments

Helpful Experience Scale (HES). A brief client-report measure, which could be completed after sessions to assess the perceived helpfulness of sessions, was developed. The HES consists of 14 items that describe the clients' experiences in helpful counseling sessions. Participants respond by indicating their level of agreement with each item on a 6-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). Higher scores are assumed to reflect greater helpfulness of counseling sessions.

Japanese Version of Client Satisfaction Questionnaire 8 (CSQ-8J). Tachimori and Ito (1999) developed the CSQ-8J, i.e., the Japanese version of the Client Satisfaction Questionnaire 8 (CSQ-8; Larsen, Attkison, Hargreaves, & Nguyen, 1979). The CSQ-8J is an 8-item Likert-type questionnaire that measures the consumer's satisfaction with the mental health treatment. It evaluates various dimensions of client satisfaction in areas such as physical surroundings, type of treatment, treatment staff, quality and quantity of service, outcome of service, and general satisfaction with mental health services. The scores for each item ranges from 1 to 4; higher scores reflect a greater satisfaction with the treatment. The CSQ-8 scores were found to be positively correlated with symptom changes (Deane, 1993; Hasler, Moergeli, & Schnyder, 2004; Wise, 2003) and negatively correlated with dropout rates (Attkisson & Zwick, 1982; Kokotovic & Tracey, 1987; Larsen, et al., 1979). The internal consistency coefficient of the Japanese version, i.e., the CSQ-8J, was reported to be .82 (Tachimori & Ito, 1999). For the current study, a Cronbach's alpha of .89 was obtained.

Japanese Version of Counselor Rating Form-Short (CRF-SJ). The Counselor Rating Form-Short (CRF-S; Corrigan & Schmidt, 1983) is a 12-item, 7-point Likert type scale, ranging from 1 (not very) to 7 (very) , that measures the three dimensions of

counselor characteristics perceived by clients, namely, perceived counselor attractiveness, expertness, and trustworthiness. The CRF-S was developed based on the Strong's (1968) hypothesis that a counselor's power or ability to influence a client was related to the aforementioned three characteristics of the counselor. According to Strong, attractiveness refers to clients' feeling of liking, admiration, and desire to be similar to their counselor. Expertness is defined as clients' beliefs that their counselor has the knowledge and skills to help them deal effectively with their problems. Trustworthiness is defined as clients' perceptions of their counselor's sincerity, openness, and absence of motives for personal gain. Higher scores on each of the subscales correspond to higher ratings of the perceived counselor characteristic. The CRF-S was created by shortening the Counselor Rating Form (CRF; Lacrosse & Barak, 1976) in order to improve the utility of the CRF without sacrificing the reliability and validity of the original instrument. In the validation sample, reliability coefficients for the CRF-S ranged from .85 to .91, and confirmatory factor analysis indicated that the CRF-S possessed adequate construct validity. In the current study, 12 items corresponding to the CRF-S items were selected from the Japanese version of the CRF developed by Miyamoto et al. (2003). In the present study, reliability coefficients for the three subscales ranged from .79 to .84.

Procedure

Participants saw the interview given by Rogers from the film *Three Approaches to Psychotherapy* (Shostrom, 1966/1980). Only the interview was presented to participants. The prologue and epilogue segments were not shown. After viewing the video for about 40 minutes, participants completed the HES, the CSQ-8J, and the CRF-SJ from a

client's perspective.

RESULTS

Factor Analysis

An exploratory factor analysis was conducted on the HES ratings of the 101 participants to examine the dimensions of helpful experiences. A principal components analysis with a promax rotation revealed three factors with eigenvalues greater than one, accounting for 65% of the variance (Table 2-1).

In deciding which items loaded which factor, two criteria were adopted: (a) an item had to have a loading of .50 or higher on that specific factor, and (b) an item had to load at least .15 higher on the designated factor than on any other factor. The semantic meaning of the three factors was ascertained by examining the items that loaded highly on each factor. Thus, the three subscales of the HES were formed.

The first factor was made up of six items that were related to the cognitive aspects of the helpful experiences. It seemed to measure the insight or awareness that the client gained with regard to his or her feelings, thoughts behaviors, or the progress that she or he made toward understanding how to cope with the problem in question. This factor was labeled as Problem-Understanding.

The second factor contained five items that were related to the affective aspects of helpful experiences. It appeared to examine the degree to which the client felt motivated or found her or his concerns less overwhelming than perceived initially. This factor was labeled as Positive Affect.

The above-mentioned two factors, i.e., Problem-Understanding and Positive Affect,

Table 2-1

Helpful Experience Scale Items and Factor Loadings

Item	I	II	III
I. Problem-Understanding			
7. I have become clearer about my experiences	**.92**	-.15	.00
12. Now I understand my experiences that I have not understood so far	.77	-.09	.14
3. I have realized something new	**.72**	-.11	.19
9. I have a clearer sense of what I need to do to solve my problems	**.71**	.09	-.12
13. I have figured out possible ways of coping with my problems	**.65**	.29	-.11
1. I can define problems for me to work on	**.60**	.30	-.11
II. Positive Affect			
4. I feel motivated	-.13	**.89**	.03
6. I feel optimistic	-.11	**.86**	.09
2. I feel relieved	.04	**.82**	-.06
11. I feel hopeful	.21	**.69**	.05
10. I feel refreshed	.21	**.61**	.06
III. Positive Relationship			
8. I feel closer to my counselor	.01	-.04	**.83**
14. I feel supported	-.15	.21	**.80**
5. I feel understood	.18	-.04	**.78**

Note. $N = 101$. Japanese items (See Appendix A) were translated into English. The Problem-Understanding, Positive Affect, and Positive Relationship factors accounted for 46%, 11%, and 8%, respectively, of the total variance. Factor loadings were obtained with the pattern matrix of the Promax oblique solution. Numerals in boldface indicate substantial factor loadings and item membership on each of the three factors.

involved direct work or progress on the client's presenting problems; that is, they were problem-oriented.

The third factor consisted of three items that were clearly relationship-oriented. It seemed to assess the degree to which the client felt closer to or understood by the counselor. This factor was labeled as Positive Relationship.

Means, Internal Consistency, and Intercorrelations of Subscales

Subscale scores were formed by summing the values of items and then dividing them by the number of items in the subscale. A coefficient alpha was calculated for the items that made up each of these three subscales. Table 2-2 contains the means, standard deviations, coefficient alphas and correlations for the three scales.

A repeated measures ANOVA confirmed significant differences between the means of the HES subscale scores (F [2, 200] = 49.50, p <.01). Fisher's LSD tests indicated that the Positive Relationship subscale received the highest ratings; no significant difference was found between the means of the Problem-Understanding subscale and the Positive Affect subscale.

All of the HES subscales had good coefficient alphas ranging from .78 to .88.

The three subscales were intercorrelated from .41 to .67, sharing 17-45% of the variance, suggesting that the subscales were related but distinct.

Convergent Validity

The aspects of helpful experiences measured by the HES were examined in relation to the client's satisfaction with the counseling and the client's evaluation of the counselor's behavior assessed by the CSQ-8J and the CRF-SJ, respectively. Table 2-2

Table 2-2

Means, Standard Deviations, Coefficient Alphas, and Correlations of HES Subscales, CSQ-8J, and CRF-SJ

Measure	*M*	*SD*	*α*	1	2	3	4	5	6	7
1. HES Problem-Understanding	4.09	.78	.86							
2. HES Positive Affect	4.09	.85	.88	.67						
3. HES Positive Relationship	4.76	.83	.78	.41	.54					
4. HES composite	12.94	2.05	.91	.83	.89	.78				
5. CSQ-8J	23.08	3.72	.89	.71	.78	.41	.76			
6. CRF-SJ Expertness	17.85	3.12	.84	.28	.40	.45	.45	.40		
7. CRF-SJ Attractiveness	23.08	3.72	.83	.38	.46	.55	.56	.54	.47	
8. CRF-SJ Trustworthiness	15.50	3.32	.79	.39	.54	.60	.62	.52	.74	.64

Note. $N = 101$. Correlations are all significant at $p < .01$. HES = Helpful Experience Scale; CSQ-8J = Japanese Version of Client Satisfaction Questionnaire 8; CRF-SJ = Japanese Version of Counselor Rating Form-Short.

contains correlations of the HES to the CSQ-8J and the CRF-SJ. All HES subscales were significantly correlated with the CSQ-8J and the CRF-SJ. The problem-oriented HES subscales, i.e., Problem-Understanding and Positive Affect, tended to show larger correlations with the CSQ-8J (*r*s = .71 to .78) than with the CRF-SJ subscales (*r*s = .28 to .54); conversely, the relationship-oriented HES subscale, i.e., Positive Relationship, tended to produce larger correlations with the CRF-SJ subscales (*r*s = .45 to .60) than with the CSQ-8J (*r* = .41). The HES composite score that was obtained by summing the three subscale scores, showed a very large correlation with the CSQ-8J (*r* = .76) and moderate to large correlations with the CRF-SJ subscales (*r*s = .45 to .60).

DISSCUSSION

The purpose of this study was to develop the HES for measuring the effectiveness of counseling sessions. The HES items were written to reflect the positive session effects as experienced by clients. Participants completed the HES after viewing the video footage of the interview given by Rogers.

Psychometric Status of the HES

The analyses presented supported the internal consistency and convergent validity of the HES. Factor analysis indicated two problem-oriented subscales, i.e., Problem-Understanding and Positive Affect, and one relationship-oriented subscale, i.e., Positive Relationship. The three HES subscales were internally consistent and moderately to highly intercorrelated. Scores on all HES subscales and the composite HES scores were significantly correlated with the evaluation of the counselor behaviors (CRF-SJ) and

satisfaction with the counseling (CSQ-8J). It needs to be noted that the Positive Relationship subscale showed large correlations with the evaluation of the counselor behaviors, especially the trustworthiness. In addition, the highest ratings were obtained for the Positive Relationship subscale, which fit in Rogers' emphasis on the quality of the interpersonal encounter with the client (Nelson-Jones, 2006).

Research Applications of the HES

The session effects can be used as both dependent and independent variables in the counseling research. As has been mentioned previously, the counseling process can not be directly linked to the eventual effects because the eventual effects can not be measured immediately after any therapeutic events. The session effects offer the possibility of bridging the gap between the counseling process and the eventual effects (Elliott & Wexler, 1994). By using the HES as dependent variables, the relation of counseling process variables (e.g., client's verbal or nonverbal behaviors, topics of discussion, counselor's intentions, and counseling modalities) to the HES ratings can be examined; by utilizing the HES as independent variables, the influence of the HES ratings on the various eventual effects of counseling (e.g., symptom reduction, enhancement of functioning, and self efficacy) can also be investigated. These are important topics of the counseling research because they may provide answers to the long-sought questions about the mechanisms of therapeutic change (Greenberg & Pinsof, 1986).

Practical Applications of the HES

The HES provides a tool which will help the counselors evaluate the productivity

of counseling sessions from the clients' perspective. The clients' views on the counseling process can be useful to the counselors because a considerable amount of evidence suggests that the clients and counselors have different views of what happens in counseling (Dill-Standifond, Stiles, & Rorer, 1988; Eugster & Wampold, 1996; Tichenor & Hill, 1989). Furthermore, the relation of the session effects to the eventual effects from the clients' perspective is far more consistent than that from the counselors' perspective (Elliott & Wexler, 1994; Kivlighan, Multon, & Patton, 2000; Stiles et al., 1994).

Limitations and Recommendations

A major limitation of this study pertains to the generalization of the research findings. Since the counseling video and the surrogate clients were used, the psychometric status of the HES found in this study may differ from those observed in real counseling. Future research is required to confirm the findings of the current study.

Second, the predictive validity of the HES was not examined in this study, although the HES was found to correlate with the client's evaluation of the counselor's behavior and the client's satisfaction with the counseling. To establish the predictive validity of the HES, the HES ratings need to be investigated in relation to the measures of the eventual effects of counseling such as symptom distress and functioning levels.

CHAPTER III

CATEGORIZING COUNSELOR INTERVENTIONS (STUDY 2)

Counselor interventions have been identified as a central component of effective counseling because they can exercise a significant impact on the process and outcome of counseling (Elliott, 1985; Hill, Carter, & O'Farrell, 1983; Hill & Gormally, 1977). Research has frequently attempted to evaluate the effectiveness of counselor interventions of different theoretical approaches by comparing the entire course of counseling (e.g., Barker, Funk, & Houston, 1988; Lipsey & Wilson, 1993; McDermut, Miller, & Brown, 2001). One of the weaknesses of this macroanalytic approach is related to its inability to explain exactly what counselors were doing during sessions and how they worked. According to Greenberg's (1986, p. 6) metaphor, to say that something worked without being able to specify its contents is equivalent to "giving blue and green pills to patients without knowing the contents of the pills". Recognizing this problem, researchers began to pay attention to counselors' technical activity in moment-to-moment interactions (e.g., Edwards, Boulet, Mahrer, Chagnon, & Mook, 1982; Lonborg, Daniels, Hammond, Houghton-Wenger, & Brace, 1991; Shechtman, 2004). This microanalytic approach has used various category systems of counselor response modes to operationalize counselor interventions. The greatest strength of using the response modes category systems is their conceptual clarity, which enables reliable and objective classification of counselors' technical activity during sessions (e.g., Hill & O'Brien, 1999; Friedlander, 1982; Stiles, 1979). Although more than 30 category systems have been developed to date, most of them were used for only one or two studies, which made it difficult to compare results across studies (Hill, 2001; Elliott et.

al., 1987). Therefore, it is necessary to select well-established category systems appropriate for the purpose of research rather than develop new systems.

The Helping Skills System (HSS) that was developed by Hill and O'Brien (1999) is one of the well-established measures for categorizing counselor interventions. It has a long history of development and revision, which started from Hill's (1978) pioneering attempt to incorporate the components of existing systems (e.g., Goodman & Dooley, 1976; Snyder, 1945). The categories of the HSS are nominal, mutually exclusive, and operationally anchored in observable behaviors so that minimal inference of client dynamics or counselor intention is necessary. Many studies have used the current or earlier version of the HSS and proved its utility (e.g., Hill, Charles, & Reed, 1981; Hill, Thames, & Rardin, 1979; Leichtentritt, & Shechtman, 1998; Shechtman, 2004).

Although previous research found acceptable levels of content validity and agreement levels between judges, there is a problem with one of the categories of the HSS, i.e., the Information category that refers to supplying information in the form of data, facts, resources, opinions, and feedback. In order to obtain a better description of the counselor interventions, it seems to be necessary to divide the Information category into two subcategories, i.e., Objective Information and Subjective Information. The former is related to providing objective facts, data, or resources, while the latter is related to presenting the counselor's opinions regarding the problems brought up during the interaction with the client or feedback on the client. What is provided to the client though Objective and Subjective Information is conceptually different and might have a different effect on the client.

Therefore, the first purpose of the present study was to modify the HSS and develop the Japanese manual for it; the second purpose was to demonstrate interjudge

agreement levels on it; the third purpose of the current study was to verify the validity of the modified system by examining whether it was capable of describing the differences in the counselor interventions from different theoretical orientations.

METHOD

Development of the Japanese Manual for the Helping Skills System - Modified

Initial version of the Japanese manual. In the current study, the HSS (Hill & O'Brien, 1999) was modified to divide the Information category into two subcategories, i.e., Objective Information and Subjective Information. Thus, the Modified HSS (HSS-M) included 13 counselor interventions, which refer to what counselors say during sessions to help clients: Approval-Reassurance, Closed Question, Open Question, Restatement, Reflection of Feelings, Challenge, Interpretation, Self-Disclosure, Immediacy, Objective Information, Subjective Information, Direct Guidance, and Other. The descriptions of each category were given in Table 3-1. Descriptions and examples of each category of the HSS-M were produced in Japanese by the investigator.

Two graduate students in clinical psychology were given the Japanese descriptions and provided comments on their clarity; and the descriptions were reworded according to their comments. Next, the same graduate students were asked to match the reworded descriptions with the examples provided by the investigator. Only the examples, for which both of the graduate students cited the same description, were included in the initial version of the Japanese manual.

Refined version of the Japanese manual. The interventions of four exemplary counselors, i.e., Rogers, Saji, Ellis, and Goldfried on Japanese transcripts (see ***Materials***) were categorized by a team of three judges using the initial version of the

Japanese manual (see ***Coding Procedures***). Low interjudge agreement levels were indicated for the five categories of the HSS-M, i.e., Restatement, Reflection of Feelings, Interpretation, Challenge, and Subjective Information, which seemed to be caused by confusion among these categories. After discussion with the judges, the descriptions and examples of the five categories were revised.

A different team of three judges classified the counselor interventions on the same transcripts according to the revised descriptions and examples. Interjudge agreement levels were compared with the results obtained by the previous team of the judges, which indicated improvement through the refinement of the initial manual. Through this process, the refined version of the Japanese manual for the HSS-M was produced (see Appendix B).

Materials

According to the Japanese manual of the HSS-M, the transcripts of four exemplary counseling sessions were analyzed: (a) two sessions of person-centered therapy conducted by Carl Rogers (Shostrom, 1966/1980) and Moruo Saji (Uchida, 2001); and (b) two sessions of rational emotive behavior therapy (REBT) conducted by Albert Ellis (Shostrom, 1966/1980) and Marvin Goldfried (Vandenbos, Frank-McNeil, Norcross, & Freedheim, 2000/2003). Except the transcript of Saji's session, translated transcripts were used in this study because the absence of microanalytic perspective on the counselor interventions and the strong emphasis on the protection of clients' privacy, which is prevalent among Japanese researchers and counselors, allowed only limited access to the transcripts of counseling sessions conducted by prominent Japanese counselors who can represent the two theoretical approaches of counseling. In the

Table 3-1

Categories of the Modified Helping Skills System (HSS-M)

Category	Description
Approval-Reassurance	Provides emotional support, reassurance, encouragement, or reinforcement
Closed Question	Requests limited or specific information or data, usually a one- or two-word answer, a “yes” or “no,” or a confirmation
Open Question	Asks the client to clarify or to explore thoughts and feelings
Restatement	Repeats or rephrases the content or meaning of the client’s statements
Reflection of Feelings	Identifies the client’s feelings
Challenge	Points out discrepancies, contradictions, defenses, or irrational beliefs which the client is unaware of, unable to deal with, or unwilling to change
Interpretation	Goes beyond what the client has overtly stated or recognized and gives a new meaning, reason, or explanation for behaviors, thoughts, or feelings so the client can see the problem in a new way
Self-Disclosure	Reveals something personal about the counselor’s nonimmediate experiences or feelings
Immediacy	Discloses the counselor’s immediate feelings about self in relation to the client, about the client, or about the therapeutic relationship

Table 3-1 (*continued*)

Category	Description
Objective Information	Provides information about the process of counseling, objective facts, data, or resources
Subjective Information	Presents the counselor's opinions regarding the problems brought up during the interaction with the client or feedback about the client
Direct Guidance	Provides suggestions, directives, instructions, or advice about what the client should do to change
Other	Includes the counselor's statements that are unrelated to the client's problems

present study, it was hypothesized that the use of the translated transcripts would not affect judges' categorization of counselor interventions, though the translation might cause slight difference in the meaning of counselors' utterance. For example, a counselor statement classified as Interpretation in the original transcripts would not be judged Open Question in the translated transcripts.

Coding Procedures

Two teams of judges, each of which consisted of three undergraduate students, judged all counselor response units on the aforementioned four transcripts. One intervention was judged as occurring in every grammatical sentence. This judgment was a description of the presence or absence of a counselor intervention. Minimal verbal encouragers (e.g., "um-hmm") were not counted as separate units unless they were responses to the client's questions. For the purpose of refining the Japanese manual for the HSS-M and obtaining high interjudge levels, coding procedures included a two-step process: preliminary and final coding.

Preliminary coding. A team of three judges conducted the preliminary coding. For training, the three judges read and discussed the initial version of the Japanese manual for the HSS-M, and practiced on a sample transcript. On the transcripts for the present study, the three judges independently categorized all counselor response units. A criterion for deciding the categories of the counselor interventions was established that at least two of the three judges had to agree that the counselor intervention belonged in a particular category. Any counselor intervention on which all three judges disagreed was discussed to determine the most appropriate category. Interjudge agreement levels for both the entire system and the individual categories were examined.

Final coding. According to the descriptions and examples of the refined version of the Japanese manual, a team of three different judges carried out the final coding using the same procedures and transcripts as the preliminary coding. The results of the final coding were used to investigate the validity of the HSS-M.

Analysis of Data

Each of the four sessions was divided into thirds according to the total number of lines on the transcript so that the changes over time could be examined, although no statistical analysis was conducted because of the small number of sessions being analyzed. The proportions of individual categories in the entire session and in each third of the session were studied.

RESULTS

Agreement Levels for the Entire System

The total number of counselor responses was 600, each of which was independently judged by three judges. Cohen's kappa (Cohen, 1960) was computed to determine the interjudge agreement levels for the entire system. Kappa is an indicator of the proportion of agreement between two judges after chance agreement has been removed from consideration (Bakeman & Gottman, 1997). A kappa can vary from -1.00 to 1.00. A kappa of 0 indicates that the observed agreement is exactly equal to the agreement that could be observed by chance. A negative kappa indicates that the observed agreement is less than the expected chance agreement. A kappa of 1.00 indicates perfect agreement between judges. Fleiss (1981) characterized kappas of .40 to .60 as fair, .60 to .75 as good, and over .75 as excellent. The kappas for the

preliminary coding were .61, .63, and .71; the kappas for the final coding were .76, .84, and .89.

Agreement Levels for the Individual Categories

Agreement levels for the individual categories for all sessions combined were determined by the proportion of counselor responses within a category that two or three judges could agree upon, which was calculated by dividing the number of counselor responses that two or three judges agreed to place in a particular category by the total number of counselor responses finally classified as that category. The greater the proportion of counselor responses within a category that all three judges could agree upon, the easier the Japanese description of that category was to understand. The greater the proportion of counselor responses placed in a category only after discussion, the more confusing the Japanese description of that category was. Table 3-2 presents the results of this analysis.

The preliminary coding indicated low interjudge agreement levels for Restatement, Reflection of Feelings, Challenge, Interpretation and Subjective Information: the proportions of counselor responses within these five categories, which were agreed upon by at least two judges, ranged from .70 to.78; the proportions of unanimous agreement among the three judges were especially low, which ranged from .21 to 30. Discussion with the judges indicated two possible patterns in these disagreements: confusion among Restatement, Reflection of Feelings, and Interpretation; and confusion among Challenge, Interpretation and Subjective Information.

Based on the results of the initial coding and discussion with the judges, the Japanese manual were refined: First, vague expressions were revised; second, more detailed descriptions and new examples of the five categories were included.

Table 3-2

Proportions of Counselor Interventions Agreed Upon by Judges for Each Category

	Preliminary coding					Final Coding				
		Agreement			After		Agreement			After
Category	*n*	3 judges	2 judges	Total	discussion[a]	*n*	3 judges	2 judges	Total	discussion[a]
Approval-Reassurance	24	.92	.08	1.00	.00	24	.83	.17	1.00	.00
Closed Question	74	.81	.19	1.00	.00	73	.84	.16	1.00	.00
Open Question	38	.76	.24	1.00	.00	41	.82	.18	1.00	.00
Restatement	117	.27	.50	.78	.22	129	.51	.38	.89	.11
Reflection of Feelings	56	.27	.46	.73	.27	50	.57	.24	.82	.18
Challenge	10	.30	.40	.70	.30	11	.64	.27	.91	.09
Interpretation	12	.25	.50	.75	.25	9	.56	.33	.89	.11
Self-Disclosure	5	.80	.20	1.00	.00	4	1.00	.00	1.00	.00
Immediacy	11	.73	.18	.91	.09	12	.83	.17	1.00	.00
Objective Information	74	.81	.19	1.00	.00	74	.73	.20	.93	.07
Subjective Information	71	.21	.56	.77	.23	67	.51	.30	.81	.19
Direct Guidance	90	.92	.08	1.00	.00	88	.87	.13	1.00	.00
Other	18	.89	.11	1.00	.00	18	.83	.17	1.00	.00

[a]Proportions of counselor interventions that were discussed to determine the most appropriate category due to the disagreement among all three judges.

The final coding conducted with a team of three different judges obtained improved interjudge agreement levels for the five categories: the proportions of agreement ranging from .81 to.93 and the proportions of unanimous agreement ranging from .51 to .64.

Comparison Between the Person-Centered Therapy and REBT

The proportions of counselor responses used in the person-centered therapy sessions and REBT sessions were compared (Table 3-3). Formal statistics were not used because of the small number of sessions being analyzed. Rather, a difference was estimated to be large only if the proportions of a particular category in both of the person-centered therapy sessions were different from those in both of the REBT sessions.

The person-centered therapy sessions had more Restatements, Reflection of Feelings, and Others. These three categories accounted for 65% of Rogers' responses, 86% of Saji's responses, 11% of Ellis' responses, and 14% of Goldfried's responses.

The REBT sessions had more Approval-Reassurance, Open Questions, Objective Information, Subjective Information, and Direct Guidance. These five categories accounted for 16% of Rogers' responses, 4% of Saji's responses, 73% of Ellis' responses, 64% of Goldfried's responses.

Usage of Counselor Interventions Across Thirds of Each Session

The proportions of counselor responses within each category to the total counselor responses per third of each session were computed (Table 3-4). To get a simple and clear view of the change over time in the counselors' usage of interventions, similar

Table 3-3

Proportions of Counselor Interventions in Person-Centered Therapy and REBT Sessions

Category	Person-centered		REBT	
	Rogers (n = 99)	Saji (n = 92)	Ellis (n = 137)	Goldfried (n = 272)
Approval-Reassurance[b]	.03	.01	.07	.04
Closed Question	.04	.08	.06	.20
Open Question[b]	.01	.00	.04	.13
Restatement[a]	.40	.65	.05	.08
Reflection of Feelings[a]	.20	.14	.02	.05
Challenge	.03	.00	.05	.00
Interpretation	.01	.00	.04	.01
Self-Disclosure	.00	.02	.00	.01
Immediacy	.10	.00	.01	.00
Objective Information[b]	.06	.00	.36	.07
Subjective Information[b]	.06	.02	.13	.15
Direct Guidance[b]	.00	.01	.13	.25
Other[a]	.05	.07	.04	.01

[a] The proportions of the counselor intervention in both of the person-centered therapy sessions were larger than those in both of the REBT sessions.

[b] The proportions of the counselor intervention in both of REBT sessions were larger than those in both of the person-centered therapy sessions.

Table 3-4

Proportions of Counselor Interventions in Each Category for Thirds of Sessions

Category	Counselor	Initial third	Middle third	Final third
Approval-Reassurance	Rogers	.03	.00	.05
	Saji	.00	.03	.00
	Ellis	.07	.09	.07
	Goldfried	.00	.04	.05
Closed Question	Rogers	.03	.10	.00
	Saji	.06	.06	.15
	Ellis	.05	.09	.05
	Goldfried	.17	.29	.15
Open Question	Rogers	.00	.03	.00
	Saji	.00	.00	.00
	Ellis	.05	.06	.02
	Goldfried	.25	.09	.08
Restatement	Rogers	.43	.26	.50
	Saji	.82	.55	.55
	Ellis	.12	.00	.03
	Goldfried	.11	.12	.03
Reflection of Feelings	Rogers	.13	.35	.13
	Saji	.03	.26	.13
	Ellis	.00	.09	.00
	Goldfried	.06	.10	.01

Table 3-4 (*continued*)

Category	Counselor	Initial third	Middle third	Final third
Challenge	Rogers	.03	.06	.00
	Saji	.00	.00	.00
	Ellis	.10	.09	.00
	Goldfried	.00	.01	.00
Interpretation	Rogers	.00	.03	.00
	Saji	.00	.00	.00
	Ellis	.07	.03	.02
	Goldfried	.00	.00	.03
Self-Disclosure	Rogers	.00	.00	.00
	Saji	.00	.00	.07
	Ellis	.00	.00	.00
	Goldfried	.00	.02	.00
Immediacy	Rogers	.10	.03	.16
	Saji	.00	.00	.00
	Ellis	.00	.00	.03
	Goldfried	.00	.00	.00
Objective Information	Rogers	.07	.10	.03
	Saji	.00	.00	.00
	Ellis	.27	.29	.46
	Goldfried	.03	.01	.14

Table 3-4 (*continued*)

Category	Counselor	Initial third	Middle third	Final third
Subjective Information	Rogers	.00	.03	.13
	Saji	.06	.00	.00
	Ellis	.12	.14	.13
	Goldfried	.00	.11	.26
Direct Guidance	Rogers	.00	.00	.00
	Saji	.00	.00	.04
	Ellis	.10	.09	.18
	Goldfried	.38	.20	.23
Other	Rogers	.17	.00	.00
	Saji	.03	.10	.07
	Ellis	.05	.06	.02
	Goldfried	.00	.00	.02

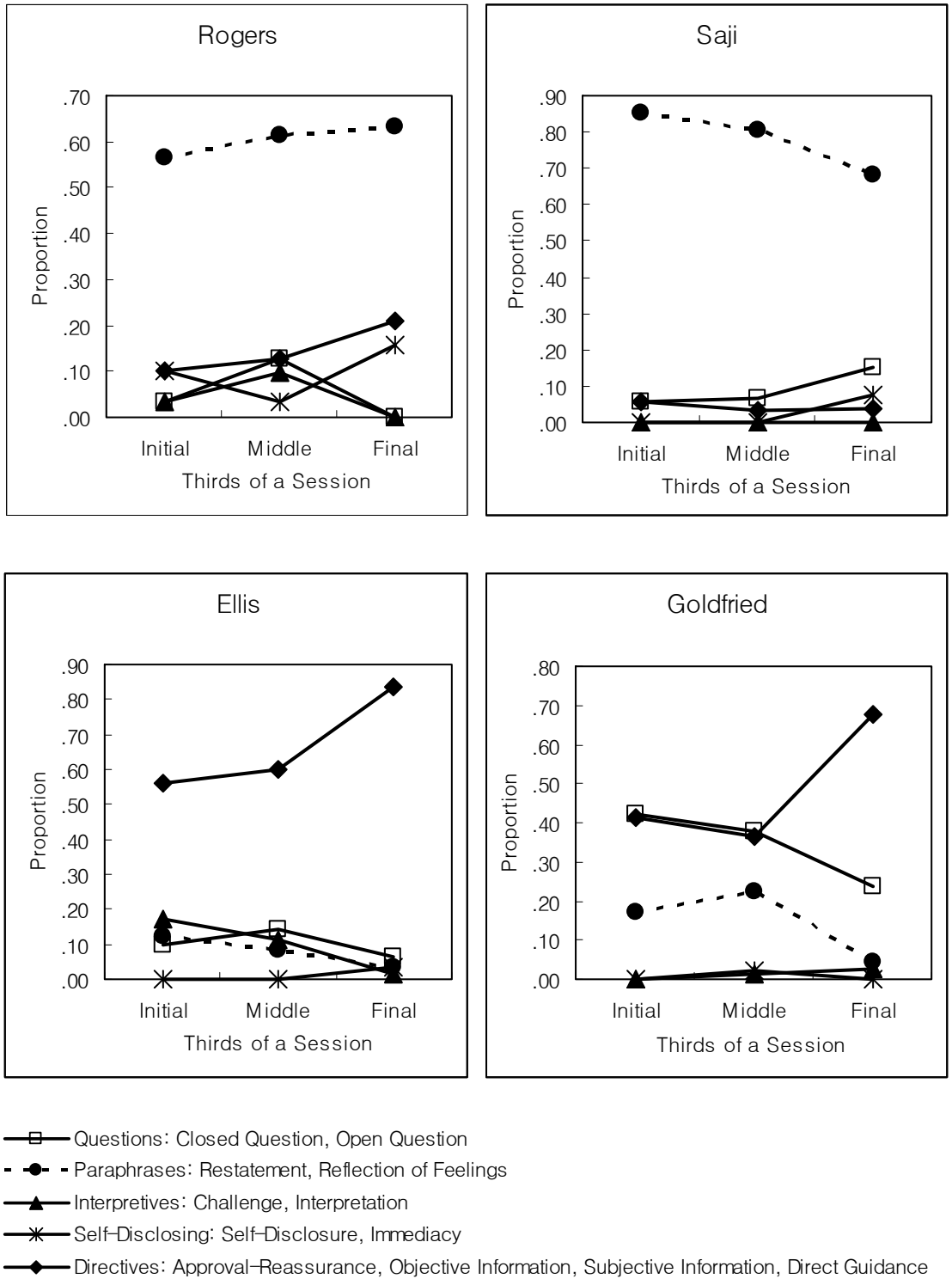

Figure 3-1

Change across thirds of sessions in the counselors' usage of interventions

categories were collapsed according to the suggestion of Hill (1986), which resulted in five groupings: 1. Questions = Closed Question, Open Question; 2. Paraphrases = Restatement, Reflection of Feelings; 3. Interpretives = Challenge, Interpretation; 4. Self-Disclosing = Self-Disclosure, Immediacy; 5. Directives = Approval-Reassurance, Objective Information, Subjective Information, Direct Guidance. The proportions of the categories within each grouping were summated in each third and plotted in Figure 3-1.

Questions. Rogers, Ellis, and Goldfried frequently used Questions in the initial and middle thirds compared with the final third, while Saji increased Questions in the final third.

Paraphrases. Saji, Ellis, and Goldfried decreased Paraphrases in the final third, while Rogers steadily increased in the proportion of Paraphrases over time.

Interpretives. Rogers and Ellis used Interpretives mainly in the initial and middle thirds. Saji and Goldfried rarely used Interpretives.

Self-Disclosing. Self-Disclosing did not happen frequently except in Rogers' session where Self-Disclosing accounted for 16% of his total responses in the final third.

Directives. Rogers, Ellis, and Goldfried indicated great increase in the use of Directives in the Final third. Saji rarely used Directives in his session.

DISCUSSION

The goals of the present study were to produce the Japanese manual for the HSS-M and to establish the reliability and validity of the modified system.

The Japanese manual was refined through the two-step process of preliminary and final coding, during which the reliability of the HSS-M was examined. To establish the

validity of the HSS-M, counselor interventions in the transcripts of exemplary counseling sessions were analyzed. The analysis focused on verifying whether the HSS-M was capable of describing the differences between the person-centered therapy and REBT sessions, and the change across thirds of sessions in counselor interventions.

Agreement Levels for the Entire System and Individual Categories

The refinement of the Japanese manual for the HSS-M resulted in improved interjudge agreement levels for both the entire system and individual categories.

High agreement levels for the entire system were found in the final coding conducted with the refined version of the Japanese manual (κs = .76 to .89). An analysis of individual categories suggested that the agreement levels for individual categories that were determined by the proportion of counselor responses in each category on which at least two judges agreed were generally high in the final coding, but that the proportions of unanimous agreements for the five categories, i.e., Restatement, Reflection of Feelings, Challenge, Interpretation, and Subjective Information, which ranged from .51 to .64, were relatively low compared with other categories, although considerable improvements on these categories were made compared with the preliminary coding. Previous studies that utilized the previous or current version of the HSS also have also reported low interjudge agreement levels for these categories (Hill, 1978; Hill, Charles, & Reed, 1981; Hill & O'Brien, 1999; Hill, Thames, & Rardin, 1979). It seems that judges have difficulty in differentiating these categories because they are more difficult to define operationally and require more inference by judges compared with other categories (Hill, 1986). Hill and O'Brien (1999) recommended that at least three and preferably four or five judges should be used for coding counselor

interventions because having more opinions typically leaded to better final category judgments.

The results indicate high interjudge agreement levels for both the entire system and individual categories, which suggests that the descriptions and examples of the HSS-M categories in the Japanese manual are appropriate.

Comparison Between the Person-Centered Therapy and REBT

The person-centered therapy and REBT indicated differences in the proportions of counselor interventions delivered during a session. These differences seemed to correspond with the counselors' theoretical positions.

The Counselors of the person-centered therapy do not tell clients what they should do or how to do it. They encourage their clients to assume responsibility for the contents of the counseling sessions, assist their clients to express, experience and explore feelings, and avoid any interpretations or placing external constructions on what their clients reveal (Nelson-Jones, 2006). The results of the present study were generally consistent with this theoretical orientation in that both Rogers and Saji mainly restated and reflected. These two interventions do not demand any particular response from clients, but facilitate clients' exploration of thoughts, behaviors and feelings (Hill, 2004; Friedlander, 1982).

The REBT is an active and directive counseling approach that challenges the client's irrational beliefs and thoughts in order to help clients solve their problems. The REBT counselors focus on eliciting information about the client's problems and adopting an educational approach to teaching clients how to change irrational beliefs (Nelson-Jones, 2006). The results of this study indicated that Ellis and Goldfried mainly

used Objective Information, Subjective Information, Direct Guidance, and Questions, which seemed congruent with the active and educative aspects of the REBT.

Usage of Counselor Interventions Across Thirds of Each Session

The examination of the change across thirds of each session in counselor interventions seemed to reflect common tendencies among the four counselors rather than differences. Questions and Paraphrases were used mainly in the initial and middle third, and Directives in the final third. Questions and Paraphrases can encourage clients to tell their stories and explore their thoughts and feelings; Directives can assist clients in deciding actions necessary to solve their problems (Egan,1998; Hill, 2004). The results concurred with Hill's (2004) three-stage model of helping, which divides the general process of counseling into three stages: an exploration stage, an insight stage, and an action stage. It seems that HSS-M is able to describe counselor interventions in a way that makes good clinical sense.

In conclusion, these results suggest that the categories of the HSS-M described in the Japanese manual have adequate reliability and validity. However, it should be noted that the HSS-M measures only one aspect of counselor interventions, i.e., the form of verbal behaviors. A more complete description of counselor interventions requires additional ratings of timing, appropriateness, or effectiveness (Elliott et al., 1987; Hill, 1988).

CHAPTER IV

CATEGORIZING CLIENT VERBAL BEHAVIORS (STUDY 3)

Counseling refers to the helping interaction between counselors and clients (Hoyt, 1996; Strong, 1968). Given that much part of the interaction occurs through verbal exchange, it is reasonable to assume that client verbal behaviors occurring during this interaction may influence the counseling outcome (Greenberg, 1986; Orlinsky, Ronnestad, & Willutzki, 2004). Client verbal behaviors can be categorized through response modes, which refer to the grammatical structure or form of the verbal behaviors (Hill, 1982). The client response modes reflect the client's style of involvement and ability to participate in a verbal interaction with the counselor (Hill, 1986). Research on the client response modes can be used to describe a client's verbal behaviors and examine the ways in which these behaviors are related to the process and outcome variables of counseling.

In considering the importance of the client verbal behaviors, it is disappointing that they have received limited attention from researchers. In fact, with regard to the client response modes, there is not even one measure that can be considered to be the standard in the field (Hill et al., 1992).

The Hill Client Verbal Response Category System (HCVRCS; Hill, 1986) is one of the handful of client response modes measures, which has been utilized by several researchers (e.g., Hill, Carter, & O'Farrell, 1983; Lee, 2005; Martin, Martin, & Slemon, 1989). The categories of the system were derived primarily from person-centered and psychodynamic orientations focusing on clients' experiencing and gaining insight (Hill, 1986). Therefore, the system may fail to describe client verbal behaviors valued in

cognitive or behavioral therapies, such as clients' exploration of their thoughts or behaviors.

Although adequate interjudege agreement levels with regard to the HCVRCS were obtained from previous studies (κs = . 71 to .92; Hill, et al., 1983; Lee, 2005; O'Farrell, Hill, & Patton, 1986), the HCVRCS has a critical drawback, which is related to the inability of the HCVRCS to reflect various client verbal behaviors. More than 50% of the client response modes in the aforementioned studies fell into the Description category.

Noting these problems, Hill et al. (1992) developed a revised version, the Client Behavior System (CBS). Hill et al. suggested that the categories of the revised system are more clinically meaningful. However, they displayed lower interjudge agreement levels (κs = .48 to .54) due to the difficulty in differentiating between the categories (Hill, et al., 1992). Compared with the prior system, the CBS seems to require more inference about the client's covert reactions in order to make category judgments.

Therefore, a combination of categories from both of the systems may help achieve two purposes: high interjudge agreement levels and description of various client verbal behaviors. In the current study, an attempt was made to develop the Client Response Modes System by selecting appropriate categories from the HCVRCS and the CBS and produce the Japanese manual for it; and then the reliability and validity of the system was investigated by analyzing conversations between university students and an exemplary counseling session conducted by a prominent counselor.

METHOD

Development of the Japanese Manual for the Client Response Modes System

The Client Response Modes System (CRMS; Table 4-1) was developed by employing seven mutually exclusive categories (Simple Response, Request, Insight, Discussion of Plans, Discussion of Client-Counselor Relationship, Silence, and Other) from the HCVRCS and three mutually exclusive categories (Recounting, Cognitive-Behavioral Exploration, and Affective Exploration) from the CBS. The CRMS categorizes every client response unit, i.e., a grammatical sentence in the verbatim transcripts of counseling sessions. The descriptions and examples of each category of the CRMS were produced in Japanese by the investigator.

One undergraduate and one graduate student in clinical psychology were given the Japanese descriptions and provided comments on their clarity; and then the descriptions were reworded according to their comments. Next, the same students were asked to match the reworded descriptions with the examples provided by the investigator. Only the examples, for which both of the students cited the same description, were included in the Japanese manual.

To refine the Japanese descriptions and examples of the CRMS, conversations between undergraduate volunteers, which will be presented below, were analyzed with the system. The results of this analysis indicated high levels of interjudge agreement, which led the investigator to decide that refinements might not be necessary.

Conversation Sessions Between University Students

Two pairs of undergraduate volunteers (three men and one woman), who received no training in counseling, were asked to discuss imaginary interpersonal concerns with

their partners for 30 minutes. The conversations were held in a university counseling center. One person of each dyad was asked to play the role of an adviser and the other an advisee. The advisers were asked to do whatever they thought would be helpful just as they would do to their friends.

The conversation sessions were audio recorded. Verbatim transcripts were typed from the audio recordings.

An Exemplary Counseling Session

The transcript of an exemplary counseling session conducted by Moruo Saji (Uchida, 2001) was analyzed. The session lasted for 50 minutes. The client was a 31-year-old married male who had two children. He talked about his desire for support from others and tried to understand his feelings towards others and himself.

Coding Procedures

Three undergraduate students served as judges. For training, the three judges read and discussed the Japanese manual of the CRMS (see Appendix C), and practiced on a sample transcript. On the transcripts for the present study, the three judges independently categorized all verbal responses emitted by the advisee or client. One category was judged as occurring in every grammatical sentence. For the purpose of describing the data, a criterion was established that at least two of the three judges had to agree that the response belonged in a particular category. Any response, on which all three judges were discrepant, was discussed to determine the most appropriate category. Interjudge agreement levels for both the entire system and the individual categories were examined.

Table 4-1

Categories of the Client Response Modes System (CRMS)

Category	Description
Simple Response	A short and limited phrase (typically one or two words) which do not indicated feelings, description, or exploration of the problem
Request	An attempt to obtain information or advice or place responsibility for solution of the problem on the counselor
Recounting	Gives factual information about past events
Affective Exploration	Indicates that the client is currently involved and exploring feelings about therapeutically significant material
Cognitive-Behavioral Exploration	Indicates that the client is currently involved and exploring therapeutically significant thoughts or behaviors
Insight	Indicates that the client understands or is able to see themes, patterns, or causal relationships in his or her behaviors or personality
Discussion of Plans	Refers to action-oriented plans, decisions, future goals, and possible outcomes of plans
Discussion of Client-Counselor Relationship	Indicates feelings, reactions, attitudes, or behaviors related to the counselor or the counseling situation
Silence	A pause of about five seconds
Other	Statements that are unrelated to the client's problem, such as small talk or salutations

Analysis of Data

Each transcript was divided into thirds according to the total number of lines on the transcript so that the changes over time could be examined, although no statistical analysis was conducted because of the small number of sessions being analyzed. The proportions of individual categories in the entire sessions and in each third of the sessions were studied.

RESULTS

Agreement Levels for the Entire System and the Individual Categories

The total numbers of advisee or client verbal responses in the conversation dyad 1, dyad 2, and the counseling dyad were 132, 150, and 163 respectively. Each of the verbal responses was independently judged by three judges. The kappas for the independent judges on all categorizations for all possible combinations of judges were .80, .83, and .88 in the conversation dyads, and .83, 85, and .90 in the counseling dyad.

Agreement levels for individual categories were determined by the proportion of verbal responses within a category that two or three judges could agree upon, which was calculated by dividing the number of verbal responses that two or three judges agreed to place in a particular category by the total number of verbal responses finally classified as that category. The greater the proportion of a response within a category that all three judges could agree upon, the more reliable that category was. Table 4-2 presents the results of this analysis. The proportions of the CRMS categories that were agreed upon by three judges were all higher than .50 except Insight. All categories were agreed upon by at least two judges but Recounting: 6% of the Recounting responses in the counseling dyads were determined after discussion.

Proportions of CRMS Categories for the Entire Session

The proportions of advisee or client verbal responses in the conversation dyads and counseling dyad were compared (Table 4-3). Formal statistics were not used because of the small number of sessions being analyzed. A difference was estimated to be large only if the proportions of a particular category in both of the conversation dyads were different from the counseling dyad.

The conversation dyads had more Requests and Recounting. These two categories accounted for 63% of the advisee verbal responses in the conversation dyads, and 39% of the client verbal responses in the counseling dyad.

The counseling session had more Affective Explorations and Cognitive Behavioral Explorations. These two categories accounted for 41% of the client verbal responses in the counseling dyad, and 17% of the advisee verbal responses in the conversation dyads.

Proportions of CRMS Categories Across Thirds of Each Session

Changes in the proportions of advisee or client verbal responses within each category to the total advisee or client verbal responses per third of each session were computed (Table 4-4).

The conversation dyad 1 indicated that Simple Responses occurred more in the initial third, and that Requests, Insights, Affective Explorations, Discussion of Plans, and Discussion of Client-Counselor Relationship occurred more in the middle or final third. The conversation dyad 2 did not indicate clear changes in the proportions of the advisee verbal responses.

Table 4-2

Proportions of Advisee or Client Verbal Behaviors Agreed upon by Judges for Each Category

	Conversation dyad					Counseling dyad				
		Agreement			After		Agreement			After
Category	*n*	3 judges	2 judges	Total	discussion[a]	*n*	3 judges	2 judges	Total	discussion[a]
Simple Response	34	.85	.15	1.00	.00	22	1.00	.00	1.00	.00
Request	27	1.00	.00	1.00	.00	0	-	-	-	-
Recounting	162	.77	.17	.94	.06	64	.85	.15	1.00	.00
Affective Exploration	15	.73	.27	1.00	.00	20	.70	.30	1.00	.00
Cog-Beh Exploration	26	.69	.31	1.00	.00	44	.77	.33	1.00	.00
Insight	2	.50	.50	1.00	.00	3	1.00	.00	1.00	.00
Discussion of Plans	5	.60	.40	1.00	.00	0	-	-	-	-
Relationship	2	1.00	.00	1.00	.00	0	-	-	-	-
Silence	2	1.00	.00	1.00	.00	7	1.00	0.00	1.00	.00
Other	7	1.00	.00	1.00	.00	3	1.00	0.00	1.00	.00

Note. Cog-Beh Exploration = Cognitive-Behavioral Exploration; Relationship = Discussion of Client-Counselor Relationship.

[a]Proportions of client verbal behaviors that were discussed to determine the most appropriate category due to the disagreement among all three judges.

Table 4-3

Proportions of CRMS Categories in the Conversation and Counseling Dyad

Category	Conversation		Counseling dyad
	Dyad 1	Dyad 2	
	(*n* = 132)	(*n* = 150)	(*n* = 163)
Simple Response	.10	.14	.13
Request[a]	.11	.08	.00
Recounting[a]	.52	.63	.39
Affective Exploration[b]	.04	.07	.12
Cog-Beh Exploration[b]	.13	.06	.27
Insight	.02	.00	.02
Discussion of Plans	.04	.00	.00
Relationship	.02	.00	.00
Silence[b]	.02	.00	.04
Other	.02	.03	.02

Note. Cog-Beh Exploration = Cognitive-Behavioral Exploration; Relationship = Discussion of Client-Counselor Relationship.

[a] The proportions of the client verbal behavior in both of the conversation dyads were larger than the counseling dyad.

[b] The proportions of the client verbal behavior in both of the conversation dyads were smaller than the counseling dyad.

Table 4-4

Proportions of CRMS Categories in Each Category for Thirds of Sessions

Category	Dyad	Initial third	Middle third	Final third
Simple Response	Conversation dyad 1	.17	.08	.06
	Conversation dyad 2	.14	.17	.12
	Counseling dyad	.17	.11	.13
Request	Conversation dyad 1	.05	.14	.15
	Conversation dyad 2	.07	.10	.07
	Counseling dyad	.00	.00	.00
Recounting	Conversation dyad 1	.50	.54	.51
	Conversation dyad 2	.60	.58	.68
	Counseling dyad	.52	.38	.28
Affective Exploration	Conversation dyad 1	.00	.08	.04
	Conversation dyad 2	.07	.06	.07
	Counseling dyad	.09	.05	.22
Cog-Beh Exploration	Conversation dyad 1	.19	.11	.09
	Conversation dyad 2	.09	.06	.03
	Counseling dyad	.19	.35	.28
Insight	Conversation dyad 1	.00	.00	.04
	Conversation dyad 2	.00	.00	.00
	Counseling dyad	.00	.00	.06

Table 4-4 (*continued*)

Category	Dyad	Initial third	Middle third	Final third
Discussion of Plans	Conversation dyad 1	.00	.05	.06
	Conversation dyad 2	.00	.00	.00
	Counseling dyad	.00	.00	.00
Relationship	Conversation dyad 1	.00	.00	.04
	Conversation dyad 2	.00	.00	.00
	Counseling dyad	.00	.00	.00
Silence	Conversation dyad 1	.05	.00	.00
	Conversation dyad 2	.00	.00	.00
	Counseling dyad	.02	.09	.02
Other	Conversation dyad 1	.05	.00	.02
	Conversation dyad 2	.02	.02	.03
	Counseling dyad	.02	.02	.02

Note. Cog-Beh Exploration = Cognitive-Behavioral Exploration; Relationship = Discussion of Client-Counselor Relationship.

DISCUSSION

The goals of the current study were to produce the CRMS and the Japanese manual for it, and to examine the reliability and validity of the system. To this end, conversations between university students and an exemplary counseling session by Saji were analyzed according to the Japanese manual of the CRMS.

Agreement Levels for the Entire System and Individual Categories of the CRMS

The results concerning the agreement levels for the entire system and individual categories of the CRMS indicated that each of the CRMS categories can be reliably and clearly differentiated. The kappas for the entire system ranged from .80 to .90, which indicate excellent reliability according to Fleiss (1981). The interjudge agreement levels for the individual categories also indicated high proportions of agreement among judges. However, these results should be viewed with caution, because Insight, Discussion of Plans, and Discussion of Client-Counselor Relationship occurred only 5 times at the most in each session accounting for 4% or less of the total advisee or client verbal behaviors. These three categories were employed from the HCVRCS. Previous studies (Hill et al., 1983; O'Farrell et al., 1986) that classified client verbal behaviors according to the HCVRCS also reported low occurrence for these categories, which ranged from 0% to 3% of the total client verbal response modes. Analysis of more counseling sessions seems to be necessary to examine the agreement levels concerning these categories.

Validity of the CRMS

The differences in the proportions of the CRMS categories for the entire and each third of the conversation and counseling session seem to support the validity of the CRMS in that the differences reflect the characteristics of client verbal behaviors observed in successful counseling sessions.

First, the differences in the proportions of the verbal responses for the entire session indicated that the advisees in the conversation dyads spent more time giving factual information concerning past events and asking for information and advice, while Saji's client engaged more in the exploration of his feelings, thoughts, and behaviors. The importance of the client's focusing on and probing their feelings, thoughts, and behaviors have been emphasized by a host of counseling researchers (e.g., Elliott, 1985; Klein, Mathieu-Coughlan, & Kiesler, 1986; Mahrer, 1988b; Wiser & Goldfried, 1998). It seems that Saji's interventions delivered during the counseling session encouraged the client to focus on the self rather than external events and to take responsibility for his problems instead of depending on the counselor.

Second, the changes in the proportions of the CRMS categories over the three segments of Saji's session concurred with the major features of a successful session reported in the previous studies (Hill et al., 1983; Lee, 2005) in that the client became more involved in the exploration of feelings, thoughts, and behaviors as the session progressed and gained insight about himself in the final third of the session. Although some changes over time in the proportions of the advisee verbal behaviors were also observed in the conversation dyad 1, they seem to be different from Saji's session: the focus of the advisee's statement was on the external events throughout the thirds of the conversation session with little exploration of feelings, thoughts, and behaviors; the

occurrence of Insight and Discussion of Plans in the latter two thirds of the session seems to be related to the increase of Request asking for advice and information.

Third, the examination of the proportions of the CRMS categories for the entire session indicated that the system was able to describe a more complete range of client verbal behaviors than the HCVRCS. Whereas more than 50% of the client verbal behaviors obtained in previous studies utilizing the HCVRCS were in one category, i.e., Description (Hill, et al., 1983; Lee, 2005; O'Farrell, Hill, & Patton, 1986), more diverse features of client verbal behaviors in Saji's session were described using categories such as Recounting, Cognitive-Behavioral Exploration, and Affective Exploration accounting for 39%, 27%, and 12% of the total client verbal behaviors, respectively. Although the proportions of Recounting, which involves giving factual information about past events, were still over 50% of the total advisee verbal behaviors in the conversation dyads, it might be interpreted as one of the characteristics of casual conversations between ordinary people.

In summary, the categories of the CRMS described in the Japanese manual appear to have adequate reliability and validity; the CRMS seems to have successfully handled the two major problems with the HCVRCS and the CBS, from which the categories of the CRMS were selected, in that the current study described a wider range of client verbal behaviors than the HCVRCS and obtained higher interjudge agreement levels than the CBS.

CHAPTER V

IMMEDIATE EFFECTS OF COUNSELOR INTERVENTIONS ON CLIENT VERBAL BEHAVIORS (STUDY 4)

The effects of particular counselor interventions can be measured in terms of immediate effects or delayed effects (Hill & Williams, 2000; Orlinsky, Ronnestad, & Willutzki, 2004). The delayed effects include session effects and eventual effects of counseling. Although the delayed effects are important for the client's change, the effects of a specific intervention may be obscured if counseling outcome is examined in terms of the delayed effects because the delayed effects are probably affected by the cumulative effects of other interventions in conjunction with other process variables and extratherapeutic influence. Therefore, it may be the immediate effects that are most relevant to the counselors in guiding or revising intervention strategies during particular counseling sessions (Elliott et al., 1985; Greenberg & Pinsof, 1986; Hill et al., 1988).

The immediate effects of interventions can be investigated through the two aspects of client behaviors: overt and covert reactions. The overt reactions can be observed through the client verbal behaviors that occur as a result of particular interventions, while the covert reactions can be examined through the client's descriptions of what she or he experienced immediately after a particular intervention. This chapter focused on the client's overt reactions to counselor interventions. The covert reactions were discussed in the next chapter, Study 5. Although the data for Study 5 were obtained from the same counseling interviews analyzed in the current study, the discussion on the covert reactions was treated as an independent study for the following reasons: first, a different research question, i.e., the immediate effects of counselor interventions on

client covert behaviors, was discussed in Study 5; second, different forms of data were analyzed: the audio recordings of counseling interviews in the current study and clients' reports of their reactions to counselor interventions in Study 5, which entailed different procedures for the analysis of data.

Verbal interaction between the counselor and client is the major feature of the counseling process. Understanding the effects of the counselor interventions on the client verbal behaviors is important, because the client's verbal involvement during a particular session may influence the effectiveness of that session, which consequently may have an effect on the eventual outcome of counseling. Two case studies (Hill, Carter, & O'Farrell, 1983; Lee, 2005) provided promising support for this supposition. They compared the client verbal behaviors of two best sessions with those of two worst sessions by using the Hill Client Verbal Response Category System (HCVRCS; Hill, 1986). Hill et al. (1983) determined the best sessions and the worst sessions according to the session effectiveness ratings of the counselor and the client on the Therapy Session Report (Elliott, 1980) and Lee (2005) according to the depth and smoothness of sessions rated by the client on the Korean version (Lee & Kim, 1993) of the Session Evaluation Questionnaire (Stiles, 1980). Hill et al. and Lee found that the proportions of the client response modes that indicated the client's active involvement in the verbal interaction were larger in the best sessions than the worst sessions. The findings of these two case studies are consistent with the good client behaviors that have been proposed by many counseling researchers (e.g., Elliott, 1985; Klein, Mathieu-Coughlan, & Kiesler, 1986; Mahrer, 1988b; Wiser & Goldfried, 1998); however, these findings need to be confirmed by future research, because formal statistics were not used due to the small number of sessions being analyzed. Therefore, a difference was estimated to be

large if the proportions of the client response modes in both of the best sessions were different from those in both of the worst sessions. Another drawback of these findings is related to the inability of the HCVRCS to reflect the various aspects of client verbal behaviors. More than 50% of the client response modes in the two studies fell into the Description category.

Despite the therapeutic importance of the client's verbal involvement, the lack of a standard measure that can adequately describe the variety of the client verbal behaviors has discouraged researchers from examining the effects of the counselor interventions on the client verbal behaviors (see Chapter 4). Moreover, previous attempts to handle this topic have methodological problems such as the use of overly simple measures of the counselor or client verbal behaviors (e.g., Hill and Gormally, 1977; Hawks, 1987; Tracy, 1985), and the adoption of the case study method (e.g., Hill et al., 1983; Lee 2005; Reandeau & Wampold, 1991). The former may oversimplify the counseling process by ignoring the diverse aspects of the verbal behaviors; a major limitation related to the latter is the generalizability of the research findings to other individuals or situations (Heppner, Kivlighan, & Wampold, 1999).

Hill and Gormally (1977) conducted an analogue study to test the effects of the counselor's reflection, restatement, and open question on the client's affective self-referents which were thought to reflect the client's exploration of feelings. The rule for the classification of client verbal behaviors was very simple: To be classified as an affective referent, a client response had to begin with an "I" or "We", followed by a feeling word. Clients participated in a half-hour analogue counseling session, which was divided into four time periods: baseline, counselor intervention, baseline, and counselor intervention. Open questions were found to result in more discussion of feelings than

did either reflections or restatements. However, it should be noted that clients did not discuss feelings very often in any of the conditions, perhaps because of the artificial nature of the analogue counseling and possible inappropriateness of the counselors.

Tracey (1985) observed the verbal interaction in 15 dyads of time-limited counseling and rated each speaking turn of counselors and clients as either a topic-initiation or a topic-following response on whether it had a different content, different person as subject, different time reference, or a different level of specificity from the immediately preceding speaking turn. If any of these criteria were met, a topic initiation was considered to have occurred. The extent to which each participant's topical response was predictable based on the other's previous response was calculated. These two indexes of dependence, one for the client and one for the counselor, were then compared for differences. The results demonstrated that counselors were dominant in successful dyads, where as dependency were equal in unsuccessful dyads.

Hawks (1987) assessed the verbal interaction patterns between leaders and members in six T-groups. Verbal behaviors were coded self- or other-directed and facilitative or nonfacilitative. Lag sequential analysis was used to examine the influence of leader verbal behaviors on member verbal behaviors. When the leaders were facilitative and directed their communication to the group, the members were significantly more facilitative than when the leaders referred to themselves or expressed nonfacilitative communication.

Two case studies (Hill et al., 1983; Lee 2005) used the above-mentioned HCVRCS to classify client verbal behaviors and conducted lag sequential analyses of the immediate effects of the counselor interventions on the client verbal behaviors in time-limited counseling. Hill et al. (1983) found that closed questions increased the

probability of the client's story telling behaviors; open questions increased the probability of insight. Wampold and Kim (1988) reanalyzed the data in Hill et al. with different analysis methods, which led to finding that the counselor's minimal encourager reinforced the client's story telling behaviors. In Lee's (2005) study, it was indicated that the client's exploration of emotions and insight responses were more likely to be associated with the counselor's antecedent paraphrases and interpretation, but were less likely to follow the counselor's closed questions.

Another case study conducted by Reandeau and Wampold (1991) examined within-session interactional behaviors in four brief therapy cases. Two cases were characterized by high alliance and two by low alliance between the counselor and client. Verbal behaviors were coded along the dimensions of power and involvement according to the Penman Classification Scheme (Penman, 1980) designed to analyze marital interactions. The results showed that high-alliance cases had a stronger pattern of counselor high-power messages followed by client low-power and high-involvement messages than did the low-alliance cases, which were characterized by greater client avoidance and less likelihood that the client would give a high-involvement response to therapist high-power messages.

To sum up, the results of the previous studies suggest that there may be differences in the client verbal behaviors between effective and ineffective counseling sessions and that the client verbal behaviors may be affected by the counselor interventions. However, the previous findings need to be confirmed by future research using better measure of the response modes and involving a larger number of participants.

The current study had two goals. First, an attempt was made to identify the relationship between the client response modes and the effectiveness of counseling

sessions. However, due to the aforementioned absence of a standard measure, the Client Response Modes System (see Chapter 4), which adopted appropriate categories from both the HCVRCS and the Client Behavior System (Hill, et al., 1992), was used in order to classify the client verbal behaviors. Second, a sequential analysis was conducted to explore the influence of counselor interventions on the likelihood of the client response modes that were related to the effectiveness of counseling sessions.

METHOD

Participants

32 undergraduate and graduate volunteers (11 men and 21 women; mean age = 23.0, *SD* = 3.2) from various majors of two universities in Japan and Korea were recruited via campus fliers and electronic mail notices, inviting them to participate as clients in a one-session counseling analogue. All of them were Japanese students, 16 of whom were studying in Korea. Volunteers enrolled for a study on the process and outcome of counseling. They were informed that they would be asked to discuss real or imaginary interpersonal problems and that all information given by the participants would be kept confidential as well as test scores and other research data concerning the participants. Prospective participants were asked to submit a detailed description of their problems and to rate their current level of distress with the problems on a 7-point Likert scale, with anchors 0 (no distress) and 6 (extremely distressed). Volunteers with purely vocational information concerns or with distress ratings of 3 or less were screened out. This measure was taken to create atmosphere that resembles actual counseling circumstances. Approximately one-third of the applicants for the study were eliminated in this way.

Two counselors, one male and one female, participated. Both were counseling psychology doctoral students in their early thirties and had an eclectic theoretical orientation. Each counselor saw 16 clients.

Process Measures

Helping Skills System - Modified (HSS-M). The HSS-M (see Appendix B) was used to classify counselor interventions. The HSS-M includes 13 nominal and mutually exclusive categories: Restatement, Reflection of Feelings, Open Question, Closed Question, Interpretation, Challenge, Subjective Information, Objective Information, Direct Guidance, Self-Disclosure, Immediacy, Approval-Reassurance, and Other. Adequate interjudge agreement levels with regard to the HSS-M were obtained in Study 2 (κs = .69 to 74; see Chapter 3).

Client Response Modes System (CRMS). The CRMS (see Appendix C) was employed for the classification of client verbal behaviors. The CRMS includes 10 nominal and mutually exclusive categories: Simple Response, Request, Recounting, Cognitive-Behavioral Exploration, Affective Exploration, Insight, Discussion of Plans, Discussion of Client-Counselor Relationship, Silence, and Other. In Study 3, interjudge agreement levels (κs) for the CRMS ranged from .89 to .92, which could be considered excellent (see Chapter 4).

Session Effects Measures

Helpful Experience Scale (HES). The HES (see Appendix A) is a self-report measure that assesses the positive effects of counseling sessions from the client's perspective. The HES comprises 14 items rated on a 6-point Likert scale, with anchors 1

(strongly disagree) and 6 (strongly agree). An exploratory factor analysis indicated three subscales, Problem-Understanding, Positive Affect, and Positive Relationship, which were internally consistent (αs = .76 to .86) and moderately to highly intercorrelated (rs = .28 to .55). The Problem-Understanding subscale measured the insight or awareness that the client gained with regard to her or his feelings, thoughts, and behaviors, or the progress that she or he made toward understanding how to cope with the problem in question. The Positive Affect subscale examined the degree to which the client felt motivated or found her or his concerns less overwhelming than perceived initially. The Positive Relationship subscale assessed the degree to which the client felt closer to or understood by the counselor. The three subscales were significantly related to the client's evaluation of the counselor's behavior and satisfaction with the counseling (see Chapter 2).

Japanese Version of Client Satisfaction Questionnaire 8 (CSQ-8J). The CSQ-8J (Tachimori & Ito, 1999) was employed for the current study. The CSQ-8J is an 8-item Likert-type questionnaire that measures the consumer's satisfaction with the mental health treatment. It evaluates various dimensions of client satisfaction in areas such as physical surroundings, type of treatment, treatment staff, quality and quantity of service, outcome of service, and general satisfaction with mental health services. The scores for each item ranges from 1 to 4; higher scores reflect a greater satisfaction with the treatment. The scores of the original version (Larsen, Attkison, Hargreaves, & Nguyen, 1979) were found to be positively correlated with symptom changes (Deane, 1993; Hasler, Moergeli, & Schnyder, 2004; Wise, 2003) and negatively correlated with dropout rates (Attkisson & Zwick, 1982; Kokotovic & Tracey, 1987; Larsen, et al., 1979). The internal consistency coefficient of the Japanese version was .82 (Tachimori

& Ito, 1999). Although the CSQ-8J was not designed to measure the effectiveness of individual sessions, it was assumed that the CSQ could serve as a measure of session effects for a single-session counseling because the cumulative effects of other sessions and out-of-therapy variables might be excluded or kept minimal in the single session counseling.

Procedure

Counseling interviews. All the counseling interviews were conducted at a university counseling center, either in Japan or in Korea. Each session lasted for a period of 50 minutes, and during this period, the volunteer clients were asked to discuss real or imaginary interpersonal problems. A supportive atmosphere was maintained, and generally, the counseling approach was insight-oriented. All the sessions were audio recorded, and after each session, the volunteer clients completed the HES and the CSQ-8J.

Coding procedures. Transcripts were typed from the audio recordings of each of the 32 sessions. The counselor and client statements were divided into response units based on the procedure proposed by Hill and O'Brien (1999). Three undergraduate students who were unaware of the purpose of the study served as judges for the client response units. For training, the three judges practiced on three transcripts from a previous study until they reached an agreement level of 80%. After the extensive training, one of the three judges coded each session. To examine interjudge reliability, a randomly selected 20% segment of each session was coded independently by a second judge. The original judge did not know which segment would be checked for reliability. Having two judges independently code randomly selected segments is a method that has

been used in previous research that analyzed the counselor and client response modes (Johnson & Jacob, 2000; Reandeau & Wampold, 1991; Wiser & Goldfried, 1998).

A group of three different undergraduate students served as judges for the counselor response units. Training and procedures for rating the transcripts followed the same procedure noted above. Interjudge reliability was assessed using Cohen's kappa (Cohen, 1960) and was found to be acceptable with regard to both client and counselor responses.

Sequential Analysis

Sequential analysis is a statistical method to determine the degree to which the occurrence of an event depends on the immediately preceding event (Lichtenberg & Heck, 1986). If the occurrence of the event is independent of the antecedent event, the subsequent event will occur on a totally random basis. Sequential analysis has been used to analyze the interactional process between counselors and clients (e.g., Wampold & Kim, 1989; Bischoff & Tracey, 1995) and between supervisors and counselor trainees (e.g., Holloway, 1982; Holloway & Wampold, 1983).

In the current study, 13 × 10 (counselor interventions × client verbal behaviors) transition frequency matrices from lag 1 to 3 were generated. By utilizing the unidirectional tests of independence and the transformed kappas (Wampold & Margolin, 1982), a sequential analysis was performed to determine which of the counselor interventions increased the likelihood of the client verbal behaviors that significantly correlated with the session effects measures. The transformed kappa ranges from –1.00 to +1.00. A positive transformed kappa indicates the degree to which the subsequent client verbal behavior followed the antecedent counselor intervention more frequently

than would have occurred by chance. A negative transformed kappa, on the other hand, indicates the degree to which the subsequent client verbal behavior followed the antecedent counselor intervention less frequently than would have occurred by chance.

RESULTS

Descriptive Data

The 32 sessions comprised a total of 3,353 counselor response units and 5,672 client response units. Kappas for the independent judgments for all pairs of the three judges on the HSS-M were .72, .79 and .81; kappas for the independent judgments for all pairs of the three judges on the CRMS were .70, .77 and .78.

Description of Counselor Interventions. Overall, the most frequent counselor intervention was Restatement; this was followed in descending order by Open Question, Closed Question, Reflection of Feelings, Interpretation, Subjective Information, Approval-Reassurance, Direct Guidance, Challenge, Objective Information, Self-Disclosure, and Immediacy (Table 5-2).

Changes in the proportions of counselor interventions were examined by dividing sessions into thirds. The proportions of counselor response units within categories of the HSS-M to the total counselor responses per third of each session were used to compute the relative usage of each intervention category. Because of the possible skewing of the data with proportion scores, arc sine transformations were performed on the proportion scores and then 13 one-way repeated measures analyses of variance (RM ANOVAs) were conducted with the transformed data. The *F* ratios for 10 of the 13 categories were significant (Table 5-1): Restatement, Reflection of Feelings, Open Question, Closed Question, Interpretation, Challenge, Subjective Information, Direct Guidance,

Approval-Reassurance, and Other. 10 Fisher's LSD tests were performed as post-hoc tests on these significant RM ANOVAs (Table 5-2). Results indicated decreases in the proportions of Restatement, Reflection of Feelings, Open Question and Closed Question, and increases in the proportions of Interpretation, Challenge, Subjective Information, Direct Guidance, Approval-Reassurance, and Other from the initial third to the final third of sessions.

Description of Client Verbal Behaviors. Generally, the clients used Cognitive-Behavioral Exploration in the highest proportion, followed in descending order by Recounting, Affective Exploration, Simple Response, Insight, Silence, Request, Discussion of Plans, and Discussion of Client-Counselor Relationship (Table 5-4).

Changes in the proportions of client verbal behaviors were examined by dividing sessions into thirds. Arc sine transformations were performed on the proportion scores and then 10 one-way RM ANOVAs were conducted with the transformed data. The *F* ratios for 6 of the 10 categories were significant (Table 5-3): Request, Recounting, Insight, Discussion of Plans, Silence and Other. 6 Fisher's LSD tests were performed as post-hoc tests on these significant RM ANOVAs (Table 5-4). Results indicated a decrease in Recounting and increases in Request, Insight, Discussion of Plans, Silence and Other from the initial third to the final third of sessions.

Session Effects Measures. The mean scores of the HES Problem-Understanding, the HES Positive Affect, the HES Positive Relationship, and the CSQ-8J were 4.24 (*SD* = .83), 4.18 (*SD* = .93), 4.83 (*SD* = .91), and 24.50 (*SD* = 4.03), respectively.

Table 5-1

Summary of One-Way Repeated Measures Analysis of Variance on the Counselor Interventions for Thirds of Sessions

Variable	*F*
Restatement	19.44**
Reflection of Feelings	16.15**
Open Question	15.50**
Closed Question	5.05**
Interpretation	12.01**
Challenge	6.10**
Subjective Information	19.16**
Objective Information	.83
Direct Guidance	7.06**
Self-Disclosure	1.91
Immediacy	1.12
Approval-Reassurance	8.00**
Other	218.60**

Note. For all analyses $df = 2, 62$.

*$p < .05$. **$p < .01$.

Table 5-2

Means and Standard Deviations for Counselor Interventions by Thirds of Sessions

	Initial third		Middle third		Final third		Total		Comparison
Counselor intervention	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	among thirds[a]
Restatement	.33	.11	.26	.13	.15	.09	.24	.06	I > M > F
Reflection of Feelings	.14	.10	.10	.08	.06	.05	.09	.06	I > M > F
Open Question	.21	.10	.14	.09	.11	.07	.15	.06	I > M > F
Closed Question	.16	.09	.14	.10	.10	.07	.13	.06	I, M > F
Interpretation	.04	.06	.10	.09	.13	.10	.09	.06	I < M, F
Challenge	.01	.02	.04	.05	.03	.05	.03	.04	I < M, F
Subjective Information	.03	.05	.09	.09	.17	.11	.10	.05	I < M < F
Objective Information	.02	.03	.02	.03	.03	.04	.02	.03	
Direct Guidance	.01	.02	.03	.06	.05	.05	.03	.03	I < M, F
Self-Disclosure	.00	.02	.02	.05	.02	.04	.02	.02	
Immediacy	.00	.01	.01	.02	.00	.01	.00	.01	
Approval-Reassurance	.06	.06	.07	.05	.13	.10	.09	.05	I, M <F
Other	.00	.00	.00	.01	.03	.01	.01	.00	I, M <F

Note. $N = 32$ cases.

[a]Results of the post-hoc fisher's LSD tests on the proportions of the counselor interventions in the initial, middle and final thirds that were significant at $p < .05$.

Table 5-3

Summary of One-Way Repeated Measures Analysis of Variance on the Client Verbal Behaviors for Thirds of Sessions

Variable	*F*
Simple Response	.88
Request	6.48**
Recounting	5.56**
Affective Exploration	.20
Cognitive-Behavioral Exploration	2.90
Insight	9.50**
Discussion of Plans	4.46*
Discussion of Client-Counselor Relationship	.30
Silence	5.75**
Other	126.79**

Note. For all analyses $df = 2, 62$.

*$p < .05$. **$p < .01$.

Table 5-4

Means and Standard Deviations for the Client Verbal Behaviors by Thirds of Sessions

	Initial third		Middle third		Final third		Total		Comparison
Client verbal Behavior	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	among thirds[a]
Simple Response	.09	.07	.10	.08	.10	.12	.10	.08	
Request	.01	.02	.02	.03	.04	.04	.02	.02	I, M < F
Recounting	.42	.27	.34	.20	.30	.27	.34	.20	I > M, F
Affective Exploration	.11	.08	.11	.09	.10	.09	.11	.06	
Cog-Beh Exploration	.40	.20	.37	.15	.31	.18	.35	.12	
Insight	.00	.00	.03	.12	.09	.13	.04	.07	I, M < F
Discussion of Plans	.00	.00	.01	.02	.01	.02	.01	.01	I < F
Relationship	.00	.01	.00	.01	.00	.01	.00	.01	
Silence	.02	.06	.05	.06	.06	.07	.04	.05	I < M, F
Other	.00	.00	.00	.00	.02	.01	.01	.00	I, M < F

Note. N = 32 cases. Cog-Beh Exploration = Cognitive-Behavioral Exploration; Relationship = Discussion of Client-Counselor Relationship.

[a]Results of the post-hoc fisher's LSD tests on the proportions of the client verbal behaviors in the initial, middle and final thirds that were significant at p <.05

Client Verbal Behaviors in Relation to Session Effects Measures

The correlations between the proportions of client verbal behaviors and the session effects measures are presented in Table 5-5. Recounting was significantly negatively related to all the session effects measures (*r*s = –.48 to –.70), whereas Affective Exploration and Cognitive-Behavioral Exploration were significantly positively related to all the session effects measures (*r*s = .37 to .54). Insight and Discussion of Plans were significantly positively related to the HES Problem-Understanding and the HES Positive Affect (*r*s = .39 to .44).

The Effects of Counselor interventions on Client Verbal Behaviors

Table 5-6 presents the transformed kappas and the significance levels for transitions from counselor interventions to client verbal behaviors.

Recounting was likely to occur after Closed Question (lag 1, transformed κ = .27, z = 10.25, p < .01; lag 2, transformed κ = .25, z = 5.69, p < .01; lag 3, transformed κ = .11, z = 3.21, p < .01) and Open Question (lag 1, transformed κ = .08, z = 3.59, p < .01; lag 2, transformed κ = .10, z = 3.01, p < .01; lag 3, transformed κ = .09, z = 2.77, p < .01).

Affective Exploration was likely to occur after Reflection of Feelings (lag 1, transformed κ = .40, z = 20.05, p < .01; lag 2, transformed κ = .15, z = 5.99, p < .01; lag 3, transformed κ = .09, z = 4.45, p < .01).

Cognitive-Behavioral Exploration was likely to occur after Open Question (lag 1, transformed κ = .18, z = 6.53, p < .01; lag 2, transformed κ = .11, z = 2.91, p < .01; lag 3, transformed κ = .09, z = 2.74, p < .01) and Restatement (lag 1, transformed κ = .12, z = 5.00, p < .01; lag 2, transformed κ = .07, z = 2.14, p < .05; lag 3, transformed κ = .07, z = 2.68, p < .01).

Table 5-5

Correlations Between the Proportions of Client Verbal Behaviors and Session Effects Measures

	Session effects measures			
	Helpful Experience Scale			CSQ-8J
Client verbal behavior	Problem-Understanding	Positive Affect	Positive Relationship	
Simple Response	.06	.05	.00	.10
Request	-.03	-.03	-.03	-.03
Recounting	-.66**	-.70**	-.48**	-.60**
Affective Exploration	.53**	.50**	.42*	.52**
Cognitive-Behavioral Exploration	.49**	.54**	.37*	.46**
Insight	.42*	.41*	.23	.30
Discussion of Plans	.44*	.39*	.18	.21
Exploration of Client-Counselor Relationship	-.11	.01	-.12	-.08
Silence	.01	.11	.17	.07
Other	.22	.24	.11	.13

Note. $N = 32$ cases. CSQ-8J = Japanese version of Client Satisfaction Questionnaire 8.

*$p < .05$. **$p < .01$.

Table 5-6

Sequential Analysis of the Effects of the Counselor Interventions on the Subsequent Client Verbal Behaviors

	Client verbal behavior														
	Recounting			Affective Exploration			Cog-Beh Exploration			Insight			Discussion of Plans		
Counselor intervention	Lag 1	Lag 2	Lag 3	Lag 1	Lag 2	Lag 3	Lag 1	Lag 2	Lag 3	Lag 1	Lag 2	Lag 3	Lag 1	Lag 2	Lag 3
Restatement	-.09**	-.05	-.04	-.15**	.01	-.01	.12**	.07*	.07**	-.24**	-.23**	-.16**	-.12	-.04	-.20
Reflection of Feelings	-.16**	-.07	-.03	.40**	.15**	.09**	-.26**	-.04	-.09	-.12**	-.03	-.06	-.12	-.09	.00
Open Question	.08**	.10**	.09**	-.05	-.04	.00	.18**	.11**	.09**	-.19**	-.20**	-.13**	.15	.09	.06
Closed Question	.27**	.25**	.11**	-.06*	-.02	.00	-.05	-.07	-.04	-.17**	-.12**	-.11**	.04	.02	.20
Interpretation	-.21**	-.19**	-.12**	-.03	-.04	-.04	.00	.01	-.04	.31**	.21**	.18**	.12	-.02	-.09
Challenge	.05	.06	.04	-.07	-.01	-.06	.02	.04	-.07	.03	.07*	.03	-.03	-.03	-.03
Subjective Information	-.06	-.15**	-.07	-.09**	-.01	-.03	-.15**	-.16**	-.10*	.21**	.22**	.17**	-.09	-.10	-.11
Objective Information	.00	-.14	-.06	.00	.00	-.07	-.08	.07	.21*	-.03	-.05	-.04	-.02	-.03	-.02
Direct Guidance	-.17*	-.23*	-.22*	-.07	-.02	.03	-.03	-.11	-.11	.04	.07*	.04	.04	.04	-.02
Self-Disclosure	.06	-.02	-.08	-.05	-.03	-.09	-.19	.07	.06	.02	-.01	.01	-.01	.05	.01
Immediacy	.12	.51	.21	-.03	-.11	.01	-.19	-.08	-.17	-.04	-.05	-.03	-.01	-.02	.00
Approval-Reassurance	-.01	.05	-.04	-.04	-.01	.01	-.05	-.16**	-.06	.08**	.04	.06*	.05	.12	.03
Other	.12	.20	.15	-.07	-.11	.00	-.12	.26	-.06	-.05	-.05	-.04	-.01	-.01	-.01

Note. Cog-Beh Exploration = Cognitive Behavioral Exploration. lag 1 = first response unit following a counselor intervention; lag 2 = second response unit following a counselor intervention; lag 3 = third response unit following a counselor intervention. The figures in the table refer to the transformed kappa for an antecedent counselor intervention to a subsequent client verbal behavior.

*p < .05. **p < .01

Insight was likely to occur after Interpretation (lag 1, transformed $\kappa = .31$, $z = 11.66$, $p < .01$; lag 2, transformed $\kappa = .21$, $z = 6.44$, $p < .01$; lag 3, transformed $\kappa = .18$, $z = 5.88$, $p < .01$), Subjective Information (lag 1, transformed $\kappa = .21$, $z = 7.56$, $p < .01$; lag 2, transformed $\kappa = .22$, $z = 6.57$, $p < .01$; lag 3, transformed $\kappa = .17$, $z = 4.93$, $p < .01$), Challenge (lag 2, transformed $\kappa = .07$, $z = 2.22$, $p < .05$), Direct Guidance (lag 2, transformed $\kappa = .07$, $z = 2.40$, $p < .05$) and Approval-Reassurance (lag 1, transformed $\kappa = .08$, $z = 3.19$, $p < .01$; lag 3, transformed $\kappa = .06$, $z = 2.13$, $p < .05$).

None of the counselor interventions were found to increase the likelihood of Discussion of Plans.

DISCUSSION

The goals of this study were to examine the relationship between the client verbal behaviors and the session effects, and the influence of counselor interventions on the client verbal behaviors that correlated with the session effects.

Description of Counselor Interventions and Client Verbal Behaviors

The counselors in this study showed significant changes in their usage of interventions over the three segments of the counseling interviews. In the initial thirds, the counselors mainly engaged in interventions for promoting the client's exploration of feelings, thoughts and behaviors, and gathering information about the client's problems by utilizing Restatement, Reflection of Feelings, Open Question and Closed Question in the high proportions. As the session progressed, the counselors increased the usage of more active interventions such as Interpretation, Challenge, Subjective Information,

Direct Guidance, and Approval-Reassurance, which are expected to promote and reinforce insight into the problems.

The client's usage of verbal response modes also changed across the three thirds of the sessions. The clients deceased story-telling behaviors that gives factual information about past events, and increased silence and requests for information or advice related to their problems. Moreover, insight into the problems and discussion of plans for action began to appear from the middle thirds of the sessions. The results might indicate that the clients became more involved in the therapeutic process as the session progressed.

Client Verbal Behaviors in Relation to Session Effects Measures

The cases that were characterized by less Recounting and more Affective Exploration, Cognitive-Behavioral Exploration, Insight, and Discussion of Plans were associated with higher client ratings of helpfulness and satisfaction measured by the HES and CSQ-8J respectively.

Recounting involves statements regarding factual information in a storytelling style rather than an active exploration of feelings, thoughts and behaviors (Hill, et al., 1992). Recounting was included in the Description category in the HCVRCS—the previous version of the CBS. Two case studies (Hill, et al., 1983; Lee, 2005) that classified client verbal behaviors based on the HCVRCS indicated that in sessions that the counselor or the client perceived to be productive, clients provided fewer Descriptions. Affective Exploration and Cognitive-Behavioral Exploration indicate active engagement in the counseling process and suggest a good therapeutic process (Gomes-Schwartz, 1978; Klein, et al., 1986; Stiles, Shankland, Wright, & Field, 1997; Wiser & Goldfried, 1998). Affective Exploration is valued in person-centered or psychodynamic therapies,

whereas Cognitive-Behavioral Exploration is valued in cognitive or behavioral therapies (Hill, et al., 1992). Insight indicates that clients understand themes, patterns, or causal relationships in their behaviors or in others' behaviors (Hill, 1986). Researchers (Elliott, 1985; Paulson, Truscott, & Stuart, 1999; Wilcox-Matthew, Ottens, & Minor, 1997) have consistently reported that clients perceive insight to be one of the helpful effects of counseling. Discussion of Plans rarely occurred in the sessions (about 1% of the total client response modes). However, its positive correlation with the HES Problem-Understanding and the HES Positive Affect seems to be worth mentioning, since Discussion of Plans indicates that clients have a problem-solving attitude (Hill, 1986).

These findings agree with Hill's (2004) three-stage model of helping, which suggests that facilitating exploration, insight, and action is the key to the success of counseling. This study provides empirical support for the therapeutic contributions of the client response modes that indicate an exploration of feelings, thoughts, and behaviors, insight into problems, and a problem-solving attitude.

The Effects of Counselor Interventions on Client Verbal Behaviors

In the above-mentioned analysis, it was found that the occurrences of Recounting, Affective Exploration, Cognitive-Behavioral Exploration, Insight, and Discussion of Plans were related to the session effectiveness measured by HES and CSQ-8J. The next step was to identify which counselor interventions influenced the likelihood of the above-mentioned client response modes. The results of the sequential analysis suggested that based on the counselor's antecedent interventions, the occurrences of the client verbal behaviors were not random, but rather, they were predictable to a modest degree.

Recounting seems most likely to follow Closed Question. Although Recounting occurred after Closed Question and Open Question, the transformed kappas for Open Question to Recounting (transformed κs = .08 to .10) were relatively small compared with the transformed kappas for Closed Question to Recounting (transformed κs = .11 to .27). The association between Closed Question and Recounting has also been found in the previous case studies (e.g., Hill et al., 1983; Lee, 2005).

Affective Exploration seems to be facilitated by Reflection of Feelings, while Cognitive-Behavioral Exploration seems to be facilitated by Restatement and Open Question. In other words, this result suggests that Reflection of Feelings may encourage clients to clarify and experience feelings in the immediate moment; Open Question may enable clients to think about many aspects of their problems.

Insight occurred frequently after Interpretation, Subjective Information, Challenge, and Approval-Reassurance. However, this result should not be interpreted as simply suggesting that frequent use of these interventions increases the probability of the client's Insight responses. Interpretation, Subjective Information and Challenge present more of the counselor's perspective and must be presented cautiously, with great attention to remaining empathic and collaborative. Hill (1986) suggested that counselors should do plenty of Reflection of feelings before delivering Interpretation. Previous counseling process studies (Joyce, Duncan & Piper, 1995; Olson & Claiborn, 1990) found that Interpretation was most effective when the clients demonstrated a readiness for Interpretation and invite counselors to use it. We need to be also careful when interpreting the association between Approval-Reassurance and Insight because the former is generally used for providing emotional support and not for facilitating insight (Egan, 1998; Hill, 2004; Hill & O'Brien, 1999). With regard to this unexpected

association, it was hypothesized that Insight responses were not initiated but were reinforced by Approval-Reassurance after the clients had already begun providing these responses; this generated a circular pattern, i.e., Insight was followed by Approval-Reassurance, which in turn was followed by Insight, which was again followed by Approval-Reassurance, and so on. In order to test this hypothesis, a sequential analysis had to be conducted for both the transition from Insight to Approval-Reassurance and from Approval-Reassurance to Insight. Since the transition from Approval-Reassurance to Insight was significant (lag 1, transformed $\kappa = .08$, $z = 3.19$, $p < .01$; lag 3, transformed $\kappa = .06$, $z = 2.13$, $p < .05$), the kappa was calculated for the transition from Insight to Approval-Reassurance. Accordingly, this reverse transition was found to be also significant (lag 1, transformed $\kappa = .16$, $z = 5.30$, $p < .01$; lag 2, $\kappa = .07$, $z = 1.97$, $p < .05$); therefore, this supported the hypothesis.

The counselor interventions for facilitating Discussion of Plans were not identified; this was believed to be due to the low frequency of Discussion of Plans.

The above findings suggest the different effects of counselor interventions on client verbal behaviors. Previous attempts to examine this topic generally involved an analysis of single or multiple case studies (Hill, et al., 1983; Lee, 2005; Reandeau & Wampold, 1991), and we cannot assume that the findings from a single case or several cases represent all the patterns of verbal interactions between counselors and clients. Therefore, the current study analyzed the data obtained from 32 dyads and suggested the counselor interventions facilitating clients' exploration and insight.

Limitations and Recommendations

A major limitation of this study pertains to the generalization of the research

findings. Since one-session counseling analogues with university student volunteers were analyzed, the relation between the client response modes and the session effects measures or the effects of the counselor interventions on the client verbal behaviors found in this study may differ from those observed in real counseling that is carried out with distressed clients. Generalization is also limited by the fact that only two counselors with an eclectic theoretical orientation interviewed all the clients. It has been noted that counselors from different theoretical orientations display different profiles of response modes that fit in with their theoretical viewpoints (Elliott, Hill, Stiles, Friedlander, Mahrer, & Margison, 1987; Hill, 1986).

Second, due to the small number of clients who participated in this study, the correlations between the client verbal behaviors and the session effects measures must be considered as exploratory in nature. Research involving a larger number of clients is needed.

Finally, the causal relations with regard to the verbal interactions between the counselors and clients cannot be unequivocally established unless sequential analyses are used in the context of an experimental design (Wampold & Kim, 1989). Although the evidence with regard to the effects of the counselor interventions on the client verbal behaviors was persuasive, the current findings must be confirmed by experimentally inducing changes in the counselor interventions and observing the subsequent changes in the client verbal behaviors.

CHAPTER VI

IMMEDIATE EFFECTS OF COUNSELOR INTERVENTIONS ON CLIENT COVERT BEHAVIORS (STUDY 5)

Client verbal reactions do not explain all the immediate effects of counselor interventions. As counselors, we have a great interest in client covert behaviors caused by counselor interventions. Information about the client's covert reactions offers the possibilities for understanding how client change is facilitated or hindered by the counselor interventions. To obtain the information, researchers can rely on the client's report of what she or he feels and thinks after particular interventions have been delivered. The client's perspective of the counseling process is the most direct source of information about the effects of the counselor interventions (Elliott & James, 1989). It is particularly important to use the client's perceptions of the counselor interventions, because these perceptions often differ from those of the counselor and can serve as a better predictor of the eventual outcome of counseling (Horvath, & Symonds, 1991; Orlinsky & Howard, 1986; Orlinsky, Ronnestad, & Willutzki, 2004).

Early attempts to identify the client's covert reactions to the counselor interventions focused on the general helpfulness of counselor interventions which was perceived by the clients. For example, Elliott, Barker, Caskey, and Pistrang (1982) found that clients rated interpretation and advisement as the most helpful interventions and question as the least helpful interventions. Hill, Helms, Tichenor, Spiegel, and O'Grady (1988) reported that interpretation, approval, paraphrases, and self-disclosures were most helpful; open questions, confrontation, and information were moderately helpful; and direct guidance and closed questions were not helpful. These two

pioneering studies seem to lack clinical richness in that they simply investigated the general helpfulness of the counselor interventions. The findings from these studies did not explain how the counselor interventions helped the clients.

In order to provide counselors with practical information that is useful in planning and revising intervention strategies, we need to conduct research examining the specific effects of particular interventions on the various aspects of the client covert reactions. Most studies that handled this topic developed their own category system for classifying the client covert behaviors and examined how the counselor interventions were associated with the category system. Elliott (1985) developed a taxonomy of the client's covert reactions that assesses the client's subjective experience of the helpful and hindering events within sessions. Elliott's taxonomy divided the client's covert reactions into the Task (New Perspective, Problem Solution, Problem Clarification, and Focusing Attention), Interpersonal (Understanding, Reassurance, Involvement, and Personal Contact), and Hindering (Misperception, Negative Therapist Reactions, Unwanted Responsibility, Repetition, Misdirection, and Unwanted Thoughts) clusters. Elliott applied this taxonomy to the samples of significant counselor interventions taken from analogue counseling sessions to investigate how the client's covert reactions were associated with particular interventions. The Task cluster was associated with associated with open questions and general advisement; the Interpersonal cluster was associated with reflection, reassurance, and self-disclosure; The Hindering cluster was associated with reassurance, self-disclosure, and open questions.

Wilcox-Matthew, Ottens, and Minor (1997) used qualitative methods and identified several three-step patterns of helpful events in counseling, which involved the presenting issue, the counselor intervention, and the impact on the client. Three main

patterns of helpful events were identified: Dissonant, Question-Answer, and Congruent. In the Dissonant pattern, the client presented maladaptive view that was challenged by the counselor; consequently, the client altered view to accommodate the counselor's more flexible perspective. In the Question-Answer pattern, the client presented confusion and asked for explanation; the counselor provided answers, which were accepted by the client. In the Congruent pattern, the client's presenting issue was complemented and strengthened by the counselor.

Both Elliott (1985) and Wilcox-Matthew et al.(1997) were successful in identifying significant patterns between the counselor interventions and the client covert behaviors. However, the findings of the two studies do not seem to be enough to draw any conclusions about the effects of counselor interventions, because both studies did not have any hypotheses to test and their main purpose was to describe what occurred within counseling sessions. Therefore, these studies must be regarded as exploratory research. In exploratory research, observation of clinical phenomena leads to hypothesis formulation and testing, which leads to refinement of the hypotheses, replication of the results, and finally development of theory (Hill, 1990; Mahrer, 1988a). Because of the few replicated results, it seems to be appropriate to suppose that research concerning the effects of the counselor interventions on the client covert behaviors is presently in the observation and hypothesis-building stages, rather than the theory-development stage. Therefore, it is necessary to conduct more replicated research and accumulate findings.

The current study had two goals. First, an attempt was made to develop a taxonomy for classifying the positive and negative effects of counselor interventions by asking clients what they experienced directly after particular counselor interventions. Second, a sequential analysis was performed to explore how particular counselor

interventions were associated with the categories of the positive and negative effects.

METHOD

Participants

The data for this study were gathered from the 32 clients in the analogue counseling interviews analyzed in the previous chapter.

Process Measures

Helping Skills System - Modified (HSS-M). The HSS-M (see Appendix B) was used to classify counselor interventions.

Session Recall Questionnaire (SRQ). The SRQ (see Appendix D) was developed in this study to examine the client's covert reactions to counselor interventions. The questionnaire is open-ended and consists of two parts: positive effects and negative effects. Clients were asked to identify helpful interventions and hindering interventions, and then describe what they experienced directly after these interventions.

Session Effects Measures

The clients' scores on the Helpful Experience Scale (HES; see Appendix A*)* and the Japanese Version of the Client Satisfaction Questionnaire 8 (CSQ-8J; Tachimori & Ito, 1999), which were obtained in the previous chapter, were used.

Coding Procedures

Counselor interventions. The three undergraduate students who served as judges for the counselor interventions in the previous chapter independently categorized all

counselor interventions on the SRQ. For purposes of describing the data, a criterion was established that at least two of the three judges had to agree that the counselor intervention belonged in a particular category. Any counselor intervention on which all three judges were discrepant was discussed to determine the most appropriate category.

Positive and Negative Effects. The Positive and Negative Effects Taxonomy (PNET) was developed through the analysis of the SRQ containing the clients' descriptions of their reactions to helpful and hindering counselor interventions. No preexisting taxonomies were used for the classification of the positive and negative effects, because the intent of the discovery-oriented research is to allow categories to emerge from the data (Mahrer, 1988a). The clients' descriptions of their reactions to counselor interventions were typed onto index cards. Data analysis began with total immersion into the clients' descriptions written on the index cards. Two doctoral-level students in counseling psychology, first individually and then collectively, wrote on the back of the index cards, analytic memos concerning possible category labels for the clients' reactions. Because of the unclarity in the clients' descriptions, 11 statements about the positive effects and 4 statements about the negative effects were screened out, leaving 79 statements about the positive effects and 34 statements about the negative effects. Next, the index cards were sorted according to the similarities in the content of the memos. This process resulted in 11 categories for the positive effects (Table 6-1) and 4 categories for the negative effects (Table 6-2); the 11 categories of the positive effects were grouped into 3 dimensions: Affective, Cognitive, and Interpersonal dimensions. The Japanese descriptions of the PNET categories are presented in Appendix E.

Table 6-1

Descriptions, Frequencies and Proportions of the Positive Effects Categories

Category	Description	*n*	*P*
Cognitive dimension		**41**	**.52**
Awareness about Experience	Client notices the existence of her or his feelings, thoughts or behaviors.	7	.09
Awareness about Discrepancy	Client notices discrepancies among her or his feelings, thoughts, behaviors.	4	.05
Clarification of Problem	Client becomes clearer about the definition of her or his problems.	9	.11
Realization of Causality	Client understands how the problems are caused by her or his feelings, thoughts or behaviors.	8	.10
New Perspective	Client sees the problems from a new perspective and focuses on issues more crucial to problem resolution.	7	.09
New Behavior	Client learns possible ways of coping with her or his problems.	6	.08
Affective dimension		**32**	**.41**
Concern Attenuated	Client feels that concern is less overwhelming than perceived initially.	10	.13
Relief by Self-Approval	Client feels that her or his experience is normal, thereby experiencing a sense of relief from painful feelings.	17	.22
Motivated	Client feels eager and optimistic about coping with her or his problems.	5	.06
Interpersonal dimension		**6**	**.08**
Understood	Client feels understood, supported, or encouraged by the counselor.	4	.05
Trust	Client trusts or feels close to the counselor.	2	.03

Note. $N = 79$. P = proportion.

Table 6-2

Descriptions, Frequencies and Proportions of the Negative Effects Categories

Category	Description	*n*	*P*
Resistance	Client disagrees or refuses to cooperate with the counselor's interventions.	11	.32
Negative Thoughts or Feelings	Client comes to have unwanted negative thoughts or feelings about her or his problems.	4	.12
Confusion	Client does not understand what the counselor was trying to say, or how to response to it.	15	.44
Misdirection	Client feels that the counselor's intervention is not related to the most important point of her or his problems.	4	.12

Note. $N = 34$. P = proportion.

Sequential Analysis

The positive effects were associated with eight categories of the HSS-M and the negative effects the five categories of the HSS-M. A lag 1 transition matrix was generated for each of these two effects of the counselor interventions: a 8 × 11 (counselor interventions × positive effects) and a 5 × 4 (counselor interventions × negative effects) transition frequency matrix. By utilizing the unidirectional tests of independence and the transformed kappas (Wampold & Margolin, 1982), sequential analyses were performed to determine which of the counselor interventions tended to be associated with each category of the positive effects or the negative effects.

RESULTS

Agreement Levels for the HSS-M and the PNET

The kappas for the independent judgments on the HSS-M were .71, .72., and .81.The agreement levels for the PNET were established by comparing the initial classification done by the two doctoral students with those of two undergraduate judges. After reading the descriptions and examples of the PNET categories, the two judges separately sorted the clients' all statements about the positive and negative effects. The kappas for the PNET categories were computed based on the agreement levels between the initial classification and each judge's classification. The kappas for the positive effects were .65 and .68; the kappas for the negative effects were .70 and .75.

Table 6-3

Point-Biserial Correlations between the Positive and Negative Effects Taxonomy and Session Effects Measures

	Session effects measures			
	Helpful Experience Scale			CSQ-8J
Positive and Negative Effects Taxonomy	Problem-Understanding	Positive Affect	Positive Relationship	
Positive Effects				
Cognitive	.18	.12	-.06	-.10
Affective	.64**	.62**	.61**	.71**
Interpersonal	.35	.42*	.36*	.32
Negative Effects	-.36*	-.41*	-.42*	-.47**

Note. $N = 32$ cases.

*$p < .05$. **$p < .01$

Convergent Validity of the PNET

Cases were coded as 1 or 0 based on whether or not they contained descriptions about the three dimensions of the positive effects and the negative effects: If a case had descriptions about the Affective and Interpersonal dimensions of the positive effects and nothing related to the Cognitive dimension and the negative effects, the case was given 1 on these two positive effects dimensions and 0 on the Cognitive dimension and the negative effects. The relation between the PNET and the session effects measures was analyzed by correlating the 1 or 0 status of the three positive effects dimensions and the negative effects with the HES and the CSQ-8J. The point-biserial correlation coefficients obtained in this way are given in Table 6-3. The point-biserial correlation coefficients are used to determine the significance and effect size of differences between two groups, which is equivalent to running a series of *t* tests (Cohen, 2001). The Affective dimension of the positive effects was significantly positively related to all of the session effects measures (r_{pb}s = .61 to .71); the Interpersonal dimension of the positive effects was significantly positively related to the HES Positive Affect and Positive Relationship (r_{pb}s = .42 to .36). The negative effects were significantly negatively related to all of the session effects measures (r_{pb}s = -.36 to -.47).

Helpful and Hindering Interventions

Proportions of the counselor interventions perceived as helpful or hindering by the clients are presented in Table 6-4. Of the 79 counselor interventions perceived as helpful, Subjective Information accounted for 28%, which was followed in descending order by Interpretation (18%), Approval-Reassurance (18%), Open Question (14%), Direct Guidance (9%), Self-Disclosure (6%), Challenge (5%), and Reflection of Feelings (3%).

Table 6-4

Proportions of the Helpful and Hindering Interventions

	Helpful (*N* = 79)		Hindering (*N* = 34)	
Counselor intervention	*n*	*P*	*n*	*P*
Restatement	0	.00	1	.03
Reflection of Feelings	2	.03	1	.03
Open Question	11	.14	22	.65
Interpretation	14	.18	4	.12
Challenge	4	.05	0	.00
Subjective Information	22	.28	5	.15
Direct Guidance	7	.09	0	.00
Self-Disclosure	5	.06	0	.00
Approval-Reassurance	14	.18	1	.03

Note. *P* = proportion. Proportions were calculated based on the total number of the helpful interventions or the hindering interventions.

Of the 34 counselor interventions perceived as hindering, the most frequent counselor intervention was Open Question (65%), which was followed in descending order by Subjective Information (15%), Interpretation (12%), and Approval-Reassurance (3%).

Counselor Interventions Associated with the Positive Effects

The sequential analysis included a lag 1 unidirectional test of independence and a transformed kappa to test the strength of the association between the counselor interventions and the positive effects (Table 6-5).

Awareness about Experience was likely to occur after Interpretation (transformed κ = .48, z = 2.86, p < .01); Awareness about Discrepancy was likely to occur after Challenge (transformed κ = 1.00, z = 8.89, p < .01); Clarification of Problem was likely to occur after Open Question (transformed κ = .48, z = 3.83, p < .01) and Interpretation (transformed κ = .32, z = 2.23, p < .05); Realization of Causality was likely to occur after Interpretation (transformed κ = .39, z = 2.53, p < .05); New Perspective was likely to occur after Subjective Information (transformed κ = .61, z = 2.69, p < .01); New Behavior was likely to occur after Direct Guidance (transformed κ = .64, z = 5.18, p < .01); Concern Attenuated was likely to occur after Subjective Information (transformed κ = .44, z = 2.43, p < .05); Relief by Self-Approval was likely to occur after Self-Disclosure (transformed κ = .49, z = 2.16, p < .05) and Approval-Reassurance (transformed κ = .64, z = 5.01, p < .01); Motivated was likely to occur after Subjective Information (transformed κ = .72, z = 2.69, p < .01); Understood was like to occur after Reflection of Feelings (transformed κ = 1.00, z = 6.20, p < .01) and Self-Disclosure (transformed κ = .46, z = 3.68, p < .01); Trust was likely to occur after Approval-

Table 6-5

Sequential Analysis of the Counselor Interventions Associated with the Positive Effects

	Positive effects										
	Cognitive						Affective			Interpersonal	
Counselor intervention	1	2	3	4	5	6	7	8	9	10	11
Reflection of Feelings	-1.00	-.05	-1.00	-1.00	-1.00	-1.00	-.18	-.25	-.05	1.00**	-.05
Open Question	.00	-.18	.48**	-.01	.00	.04	-.05	-.28	.07	-.18	-.18
Interpretation	.48**	-.21	.32*	.39*	-.21	-.02	-.10	-.21	-.22	-.21	-.25
Challenge	-1.00	1.00**	-.14	-1.00	-1.00	-.08	-.14	-.29	-.08	-.05	-.05
Subjective Information	-.37	-.38	-.38	.14	.61**	-.40	.44*	-.06	.72**	-.38	-.43
Direct Guidance	.22	-1.00	-.13	-1.00	.06	.64**	-.15	-.27	-.09	-.11	-.11
Self-Disclosure	-.09	-.08	-.14	-1.00	-.09	-.09	-.14	.49*	-.06	.46**	-.05
Approval-Reassurance	-.21	-.21	-.22	-.21	-.21	-.22	.02	.64**	-.22	-.21	1.00**

Note. 1 = Awareness about Experience; 2 = Awareness about Discrepancy; 3 = Clarification of Problem; 4 = Realization of Causality; 5 = New Perspective; 6 = New Behavior; 7 = Concern Attenuated; 8 = Relief by Self-Approval; 9 = Motivated; 10 = Understood; 11 = Trust.

The figures in the table refer to the transformed kappa for an antecedent counselor intervention to a subsequent positive effect.

*p < .05. **p < .01

Table 6-6

Sequential Analysis of the Counselor Interventions Associated with the Negative Effects

	Negative effects			
Counselor intervention	Resistance	Negative Thoughts or Feelings	Confusion	Misdirection
Restatement	1.00	-1.00	-.67	-1.00
Reflection of Feelings	1.00	-1.00	-.67	-1.00
Open Question	-1.00**	1.00	.81**	-1.00
Interpretation	.41*	-.14	-.82	-1.00
Subject Information	.07	-.18	-.43	.41*
Approval-Reassurance	-1.00	-1.00	-.67	1.00**

Note. The figures in the table refer to the transformed kappa for an antecedent counselor intervention to a subsequent negative effect.

*p < .05. **p < .01

Reassurance (transformed $\kappa = 1.00$, $z = 3.09$, $p < .01$).

Counselor Interventions Associated with the Negative Effects

The sequential analysis included a lag 1 unidirectional test of independence and a transformed kappa to test the strength of the association between the counselor interventions and the negative effects (Table 6-6).

Resistance was likely to occur after Interpretation (transformed $\kappa = .41$, $z = 3.08$, $p < .01$); Confusion was likely to occur after Open Question (transformed $\kappa = .81$, $z = 3.10$, $p < .01$); Misdirection was likely to occur after Subjective Information (transformed $\kappa = .41$, $z = 2.12$, $p < .05$) and Approval-Reassurance (transformed $\kappa = 1.00$, $z = 2.78$, $p < .01$).

DISCUSSION

The major purposes of this study were to develop a taxonomy for classifying the positive and negative effects of counselor interventions on the client covert behaviors and to examine how particular counselor interventions were associated with the categories of the positive and negative effects.

Interjudge Agreement Levels and Convergent Validity of the PNET

The 15-category PNET with 11 positive effects and 4 negative effects was developed by asking clients to identify helpful and hindering interventions, and then describe what they experienced directly after these interventions. The positive effects comprised Cognitive, Affective, and Interpersonal dimensions.

Interjudge agreement levels for the 15 categories of the taxonomy (κs = .65 to .75)

were acceptable according to the criterion of Fleiss (1981). The relation between the presence of the PNET categories and the session effects measures indicated that the client's reports concerning the Affective and Interpersonal dimensions of the positive effects were associated with effective sessions, while the negative effects were associated with ineffective sessions. The Cognitive dimension was not found to be related to the session effectiveness, which may be explained by the fact that most clients reported at least one reaction related to the Cognitive dimension; the Cognitive dimension was the most frequently reported positive effects (52% of the total client reports of the positive effects). These results seem to support the convergent validity of the PNET.

Positive Effects Categories of the PNET

The positive effects categories are consistent with the previous research (Elliott, 1985; Wilcox-Matthew et al., 1997) that categorized the helpful elements of counseling, and extends understanding about what is helpful in counseling.

The positive effects categories have their own history in the counseling literatures. The Cognitive dimension includes the psychodynamic notion of insight (Nelson-Jones, 2006) as well as the contemporary notion of cognitive restructuring (Cormier & Cormier, 1991). The Affective dimension parallels the instillation of hope, which has been considered as one of the therapeutic factors of group counseling (Bloch, Reibstein, Crouch, Holroyd, & Themen, 1979; Yalom, 1995). The Interpersonal dimension corresponds to the empathy construct of the person-centered therapy (Barrett-Lennard, 1981).

The new categories of the positive effects identified in the current study include

Awareness about Discrepancy and Realization of Causality which did not emerge as separate categories in the previous research by Elliott (1985) and Wilcox-Matthew et al. (1997). These two categories are related to the clients' enhanced understanding of their problems and reflect important features of the client's insight experience. Clients' reactions that were classified into these categories indicated that the clients experienced a moment when separate elements of their problems seemed to come together and make sense.

Negative Effects Categories of the PNET

The investigation of the negative effects of counselor interventions can offer important information about how the clients may react to the inappropriate use of counselor interventions or how the clients may react when they are not yet ready for particular interventions. However, the negative effects have not received much research attention compared to the helpful effects (e.g., Paulson, Truscott, & Stuart, 1999; Wilcox-Matthew et al., 1997). The negative effects categories identified in the present study include Negative Thoughts or Feelings, Resistance, Confusion, and Misdirection. Except the Resistance category, these categories are generally consistent with the nonhelpful events described by Elliott (1985). The inclusion of the Resistance category may be considered as one of the new features of the PNET.

Counselor Interventions and the PNET

The contents of the positive and negative effects perceived by the clients were examined through the development of the PNET. The next step was to identify which counselor interventions are associated with each category of the positive and negative

effects. The results of the sequential analysis suggested the differential effects of various counselor interventions when they have positive or negative impacts on the clients. However, the results do not imply that particular counselor interventions will automatically lead to particular client impacts. Researchers have suggested that timing, context, and client readiness can play an important role in determining the effects of counselor interventions (e.g., Hill, 1986; Lambert, 1989; Sexton & Whiston, 1991; Yalom, 1980). This suggestion is supported by the result of the present study, which indicated that the three counselor interventions, i.e., Interpretation, Subjective Information, and Open Question that were most frequently perceived as helpful by the clients were the same as the three counselor interventions that were most frequently perceived as unhelpful by the clients. Nonetheless, the results of the present study provide some useful insight for counselors.

Positive Effects of Counselor Interventions on the Cognitive Dimension

The Cognitive dimension of the positive effects seems to be facilitated by Open Question, Interpretation, Subjective Information, and Direct Guidance.

Open Questions seem to help clients clarify their problems, which may be the result of the clients' exploration and verbalization of their problems facilitated by Open Questions as was indicated in Chapter 4. This result is consistent with Hill's (2004) suggestion that Open Questions are useful for helping clients describe their problems when they are having difficulty articulating their thoughts and feelings.

Interpretation seems to help clients notice their behaviors, thoughts, and feelings, clarify their problems, and understand how their problems are caused by their behaviors, thoughts and feelings. From a psychoanalytic perspective, Interpretation has been

viewed as the central technique for producing self-knowledge and change (Nelson-Jones, 2006). The effectiveness of Interpretation has been indicated by past research (Elliott, 1985, Elliott el al, 1982; Hill at al., 1983).

Challenge seems to help client notice discrepancies among their feelings, thoughts, and behaviors. This finding is consistent with previous research by Olson and Claiborn (1990), which found that Challenge yielded high client arousal and made clients more open to subsequent Interpretation provided by counselors. However, Challenge must be given cautiously, because Challenge may lead to the client's negative reactions and defensiveness (Miller, Benefield, & Tonigan, 1993; Salerno, Farber, McCullough, Winston, & Trujillo, 1992).

Subjective Information is a newly created category for the HSS-M (see Chapter 3). Subjective Information is used to provide the counselor's opinions regarding the client's problems or feedback about the client. The effects of Subjective Information identified in this study are to help clients see their problems from a new perspective and focus on issues more crucial to problem resolution.

Direct Guidance seems to help clients learn possible ways of coping with their problems. Results of previous studies concerning the helpfulness of Direct Guidance are not consistent. In a study by Hill et al. (1988), Direct Guidance led to the lowest client helpfulness ratings, in contrast to the high helpfulness ratings found by Elliott et al. (1982) and Elliott (1985). These contradicting results may imply that the effectiveness of Direct Guidance is easy to be influenced by many factors such as the relevance of Direct Guidance to the client's problem and the client's readiness to change.

Positive Effects of Counselor Interventions on the Affective Dimension

The Affective dimension of the positive effects seems to be facilitated by Subjective Information, Self-Disclosure, and Approval-Reassurance.

Subjective Information seems to alleviate clients' concern and help them feel eager and optimistic about coping with their problems. Subjective Information was the only counselor intervention that was found to be associated with both the Cognitive and Affective dimensions. The investigator's speculation about these manifold effects of Subjective Information is that the above-mentioned affective reactions may be brought about by clients' cognitive change that involves adopting the counselor's opinion or feedback and changing the perspectives on their problems. In other words, the prerequisite for the helpful effects of Subjective Information on the Affective dimension may be the client's positive cognitive reaction to the counselor's Subjective Information.

Self-Disclosure and Approval-Reassurance seem to facilitate the enhancement of self-approval and, as a result, relief from painful feelings. This finding parallels humanistic theorists' view on the effects of Self-Disclosure, which suggests that Self-Disclosure helps clients feel less alone with their painful experiences and emotions, thereby confirming the humanness and universality of clients' experiences (Cornett, 1991; Goldstein, 1997). The positive effects of Approval-Reassurance on the Affective dimentsion identified in this study are consistent with Elliott's (1985) finding.

Positive Effects of Counselor Interventions on the Interpersonal Dimension

Although the Interpersonal dimension explained only 8% of the positive effects, its importance in the therapeutic process and outcome has been evidenced by a host of studies on empathy (e.g., Bohart, Elliott, Greenberg, & Watson, 2002; Orlinsky,

Ronnestad, & Willutzki, 2004; Watson, 1984) and working alliance (e.g., Horvath, Bedi, 2002; Horvath & Marx, 1991; Martin, Garske, & Davis, 2000).

The Interpersonal dimension of the positive effects seems to be facilitated by Reflection of Feelings, Self-Disclosure, and Approval-Reassurance.

Reflection of Feelings seems to make clients feel that their feelings are understood and supported. Perhaps, Reflection of Feelings demonstrates that the counselor is actively engaged in trying to understand the client (Hill, 2004). In addition, hearing the counselor calmly say the client's feelings may help the client see that such feelings are acceptable (Laing & Esterson, 1970).

The helpful effects of Self-Disclosure on the Interpersonal dimension resemble those of Reflection of Feelings. Clients seem to feel understood and encouraged when the counselor shares her or his experiences and personal sight to similar problems. Although psychoanalytic theorists argue that Self-Disclosure contaminates and interferes with the transference and demystifies the counselor (e.g., Curtis, 1981; Goldstein, 1997), a host of existing research on Self-Disclosure suggest that counselors' Self-Disclosure is experienced positively by clients (e.g., Dowd & Boroto, 1982; Knox, Hess, Petersen, & Hill, 1997; Watkins, & Schneider, 1989).

Approval-Reassurance seems to make clients feel close to counselors who empathize with clients and suggest that clients' feelings are normal and to be expected.

Negative Effects of Counselor Interventions

Counselor interventions may have both positive and negative effects on client covert behaviors. The association between counselor interventions and possible hindering effects were identified in the present study. Resistance and Confusion were

the two predominant categories of the negative effects, which accounted for 76 % of the clients' negative reactions. Research also suggests that clients' resistance may impede the achievement of therapeutic goals and that counseling works best if the counselor can avoid raising resistant behaviors (Beutler, Clarkin, & Bongar, 2000; Beutler, Goodrich, Fisher, & Williams, 1999).

Interpretation was significantly associated with Resistance. Previous research suggests that Interpretation can be helpful but needs to be delivered with care when clients indicated readiness and invite counselors to use it (Joyce, Duncan, & Piper, 1995; Olson & Claiborn, 1990). Bischoff and Tracey (1995) found that the probability of clients' resistance may be increased by directive interventions such as counselors' Interpretation.

Open Questions were significantly associated with Confusion. As mentioned above, Open Questions can be a helpful intervention that facilitates clients' exploration and verbalization of their problems. Hill et al. (1988) provided a possible explanation for the association between Open Questions and Confusion through the comparison between Open Questions and Closed Questions: With Closed Questions, the counselor wants a specific answer, but with Open Questions there is not an answer; thus, the client is invited to explore and may not be sure that she or he is saying what the counselor wants to hear; the feeling of confusion could have occurred in this way.

Subject Information and Approval-Reassurance were significantly associated with Misdirection, which implies that clients feel that the counselor's intervention is not related to the most important point of their issues. Subjective Information and Approval-Reassurance involves presenting the counselor's perspective or emotional support concerning clients' problems (Hill, 2004). The association between the two

interventions and Misperception suggests the importance of accurate focus on the current issue that the client is struggling with at the moment.

None of the counselor interventions were significantly associated with Negative Thoughts or Feelings, which is thought to be due to the low of occurrence of this category.

Limitations and Recommendations

Although the positive and negative effects of counselor interventions were identified in the current study, several methodological issues may limit the generalizability of the findings.

First, since the data were obtained from one-session counseling analogues, the types of client covert reactions may differ from those found in ongoing, real counseling sessions. Research on clients' reactions to counselor interventions observed in various phases of actual counseling, e.g., the initial, middle and final stage, may provide counselors with more practical information.

Second, another methodological shortcoming of the present study is related to its retrospective nature and reliance on the self-reporting of clients. Retrospective reporting can result in important aspects or nuances of particular experiences being forgotten or misremembered. In addition, client reports may be biased by preexisting beliefs and self-presentation style.

Third, a small number of counseling events were analyzed to examine the association between counselor interventions and subsequent client covert behaviors. Therefore, the findings of this study must be considered tentative. Research is needed on larger collections of counseling events.

Fourth, the findings of the current study may oversimplify the counseling process in that the investigator attempted to connect one counselor intervention to one client reaction. In fact, clients can simultaneously have more than one type of reactions to a particular intervention. Future research needs to develop research methods to handle this problem.

CHAPTER VII

SUMMARY AND GENERAL DISCUSSION

SUMMARY

This final chapter discusses several issues. First, the goals, methods, and major findings of the present research are summarized. Next, general issues related to the present research are discussed.

Study 1

In Study 1, the Helpful Experience Scale (HES) was developed to assess the effectiveness of counseling sessions. The HES consists of 14 items that describe the clients' experiences in helpful counseling sessions. The items of the HES were obtained from the clinical psychology graduate students' descriptions of the characteristics of effective counseling sessions. To examine the psychometric status of the HES, university students completed the HES after viewing the video footage of the interview given by Rogers.

Factor analysis indicated two problem-oriented subscales, i.e., Problem-Understanding and Positive Affect, and one relationship-oriented subscale, i.e., Positive Relationship. Scores on all HES subscales and the composite HES scores were significantly correlated with the evaluation of the counselor's behavior and satisfaction with the counseling. The results supported the internal consistency and convergent validity of the HES.

Study 2

Study 2 had three goals. The first goal was to modify the Helping Skills System (Hill & O'Brien, 1999) and produce the Japanese manual for it, the second goal to demonstrate interjudge agreement levels on it and the third goal to establish the validity of the system by describing the differences in the counselor interventions from different theoretical orientations using the modified system. To this end, the transcripts of person-centered and rational emotive behavior therapy (REBT) sessions were analyzed.

Acceptable interjudge agreement levels were obtained for the modified system. The analysis of the transcripts indicated that counselors used interventions that fit in with their theoretical orientations and changed the proportions of interventions over time during a session.

Study 3

The goals of Study 3 were to develop the Client Response Modes System (CRMS) for categorizing client verbal behaviors by selecting appropriate categories from the Hill Client Verbal Response Category System (HCVRCS; Hill, 1988) and Client Behavior System (CBS; Hill et al., 1992), and to establish the reliability and validity on it. To this end, the transcripts of casual conversations between university students and an exemplary counseling session conducted by Saji (Uchida, 2001) were analyzed.

Results indicated that the CRMS had higher interjudge agreement levels than the CBS and described more complete range of client behaviors than the HCVRCS.

Study 4

Study 4 had two goals. First, an attempt was made to identify the relationship

between the client verbal behaviors and the effectiveness of counseling sessions. Second, a sequential analysis was conducted to explore the influence of counselor interventions on the likelihood of the client response modes that were related to the effectiveness of counseling sessions. Student clients participated as clients in a one-session counseling analogue.

The cases that were characterized by less Recounting and more Affective Exploration, Cognitive-Behavioral Exploration, Insight, and Discussion of Plans were associated with higher client ratings of session effects.

The sequential analysis indicated that Recounting occurred after the counselor used Closed Question; Affective Exploration occurred after Reflection of Feelings; Cognitive-Behavioral Exploration occurred after Restatement and Open Question; Insight occurred after Interpretation, Subjective Information, and Challenge.

Study 5

The data for Study 5 were obtained from the above-mentioned counseling interviews. Study 5 had two goals. First, a 15-category Positive and Negative Effects Taxonomy (PNET), which includes 11 positive effects and 4 negative effects, was developed by asking clients to identify helpful and hindering interventions, and describe what they experienced directly after these interventions. The positive effects comprised Cognitive, Affective, and Interpersonal dimensions. Second, a sequential analysis was performed to explore how particular counselor interventions were associated with the categories of the positive and negative effects.

Acceptable interjudge agreement levels and convergent validity were obtained for the PNET. The results of sequential analysis indicated that the Cognitive dimension of

Table 7-1

Summary of the Immediate Effects of Counselor Interventions on Client Verbal and Covert Behaviors

	Client verbal behavior		Client covert behavior	
Counselor intervention	Positive[a]	Negative[b]	Positive[c]	Negative[d]
Restatement	Cog-Beh exploration			
Reflection of Feelings	Affective Exploration		Understood	
Open Question	Cog-Beh Exploration	Recounting	Clarification of Problem	Confusion
Closed Question		Recounting		
Interpretation	Insight		Awareness about Experience Clarification of Problem Realization of Causality	Resistance
Challenge	Insight		Awareness about Discrepancy	
Subjective Information	Insight		New Perspective Concern Attenuated Motivated	Misdirection
Direct Guidance	Insight			
Self-Disclosure			Relief by Self-Approval Understood	
Approval-Reassurance			Relief by Self-Approval Trust	Misdirection

Note. Cog-Beh Exploration = Cognitive-Behavioral Exploration. Entries refer to the client behaviors significantly associated with particular interventions presented on the left column of the table.

[a]Client verbal behaviors positively related to session effects; [b]client verbal behaviors negatively related to session effects; [c]client covert reactions to counselor interventions perceived as helpful by the clients; [d]client covert reactions to counselor interventions perceived as unhelpful by the clients.

the positive effects seems to be facilitated by Open Question, Interpretation, subjective information, and Direct Guidance; the Affective dimension of the positive effects seems to be facilitated by Subjective Information, Self-Disclosure, and Approval-Reassurance; the Interpersonal dimension of the positive effects seems to be facilitated by Reflection of Feelings, Self-Disclosure, and Approval-Reassurance. The associations between counselor interventions and negative effects were suggested: Counselors' Interpretation was associated with Resistance; Open Questions were associated with Confusion; Subject Information and Approval-Reassurance were associated with Misdirection.

A summary of the findings about the immediate effects of counselor interventions on client verbal and covert behaviors are presented in Table 7-1.

GENERAL DISCUSSION

The present research suggested the differential effects of various counselor interventions on the client verbal and covert behaviors. However, the findings of the present should not be interpreted as suggesting that particular counselor interventions will automatically lead to particular client reactions, because various factors such as timing, manner of delivery, context, stage of counseling, and client characteristics may affect the effectiveness of counselor interventions.

The most serious limitation of the present research is related to the generalization of the research findings. Since one-session counseling analogues with university student volunteers were analyzed, the relation between the counselor interventions and client behaviors found in this research may differ from those observed in ongoing real counseling that is carried out with distressed clients. Analogue methodology is surely

not the best way to conduct counseling research. However, practical constraints such as ethical obstacles, unavailability of counselors and clients, and financial limits often discourage ambitious researchers from examining actual counseling process and force them to settle for second best, i.e., analogue research (e.g., Elliott, 1985; Goodyear & Shumate, 1996; Hill & Gormally, 1977). It is generally questionable to generalize beyond the conditions or participants used in an analogue study (Heppner et al., 1999). Strong (1971) proposed five criteria that, if met, would increase the generalizability of analogue research: (a) Counseling takes the form of a conversation between or among persons; (b) status differences between or among interactants constrain the conversation; (c) the duration of contact between interactants in counseling varies and at times extended; (d) many clients are motivated to change; and (e) many clients are psychologically distressed and are heavily interested in the behaviors they seek to change. The present research generally satisfies the first four criteria. Despite the shortcomings of analogue methodology used in this research, the findings of the present research may provide some useful insight for counselors.

Another methodological issue related to the present research is the small number of counselors and clients who participated in the research. Therefore, the relation between counselor interventions and client behaviors must be considered exploratory. The small sample size is the one of the most common problems among process studies, because conducting a process research often involves coding participants' behaviors in tens or hundreds of hours of counseling sessions. This procedure is extremely time-consuming. For example, Elliott (1985) had the client go through the videotape of the session and rate the helpfulness of every counselor intervention, then had an interrogator go through the videotape with the client to elicit statements about the impact of the interventions,

and then had raters code the open-ended statements into Elliott's (1985) categories. Only the most dedicated and well-funded researchers can observe and code the enormous amount of data. To encourage researchers conduct more process research, more efficient methods of collecting and analyzing data need to be developed.

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APPENDIX A: Helpful Experience Scale

有益な経験尺度

今日のカウンセリングはどうでしたか？次の項目を読んで、今日のカウンセリングについてあなたが思っていることにもっともよくあてはまると思われる番号を○で囲んでください.

今日のカウンセリングはどうでしたか？	全くそう思わない	そう思わない	どちらかといえばそう思わない	どちらかといえばそう思う	そう思う	非常にそう思う
１．解決すべき問題が明確になった	1	2	3	4	5	6
２．気が楽になった	1	2	3	4	5	6
３．気づきがあった.	1	2	3	4	5	6
４．やる気が出た	1	2	3	4	5	6
５．理解してもらった	1	2	3	4	5	6
６．前向きな気持ちになった	1	2	3	4	5	6
７．あいまいだったことがはっきりした	1	2	3	4	5	6
８．カウンセラーを親しく感じた	1	2	3	4	5	6
９．問題を解決するために何をすべきかが分かった	1	2	3	4	5	6
１０．すっきりした	1	2	3	4	5	6
１１．希望が持てた	1	2	3	4	5	6
１２．　今まで理解できなかったことが理解できるようになった	1	2	3	4	5	6
１３．　問題にどう対処すればよいか要領が分かった	1	2	3	4	5	6
１４．　受け入れてもらった	1	2	3	4	5	6

APPENDIX B: Manual for the Helping Skills System - Modified

1. 支持（Approval-Reassurance）

情緒的支持，承認，または，励ましを提供するための介入である．クライエントの感情・思考・行動が自然であることを伝える，または，クライエントを安心させるために楽観的な言葉を提示する．

例1）
■カウンセラー：**試験前日に不安になるのは自然なことです．**
例2）
■カウンセラー：**一度くらい失敗したっていいじゃないですか？**
例3）
■カウンセラー：**大丈夫です．全てうまく行くと思います．**

2．閉じられた質問（Closed Question）

簡単な情報，または，短い答え（例えば、「はい」，「いいえ」，確認など）を要求する質問である．

例１）
■カウンセラー：**早めに引退を決められたわけですが，何か計画がおありですか？**
例２）
■カウンセラー：**昨日はどこに行かれたのですか？**
例３）
■カウンセラー：**お父さんのことが嫌いですか？**

3．開かれた質問（Open Question）

クライエントに 感情 ・思考・行動 の探索，または，明瞭化を要求する．クライエントに特定の情報を要求する質問ではない．クライエントの応答を「はい」と「いいえ」のような簡単な応答に制限しない．質問の形ではなくても，クライエントの発

話を促し， 感情 ・思考・行動の探索，または明瞭化を要求する場合は，「開かれた質問」と見なす.

例１）
■カウンセラー：**お怒りのようですが，どういうことなのか話してください.**
例２）
■カウンセラー：**どんな時に他人の目が気になるのですか？**
例３）
■カウンセラー：**父親に対する気持ちを言葉で表してください.**

4. 言い換え（Restatement）

クライエントが陳述したことをそのまま繰り返す、または陳述の内容・意味を，簡潔で明瞭な言葉で、換言・要約する.

例１）
■クライエント：私と妹が部屋の掃除をしないと，母に厳しく叱られました．しかし，母は私が困った時にいろいろと面度を見てくれました．面白いことは，父は強そうに見えたけど，母の言うことに何でも従ったのです．実は母に尻に引かれていました.
■カウンセラー：**母親は強くて，しつけに厳しい人ですね.**

例２）
■クライエント：過去の恋愛関係や家族のことを振り返ると，暗いことばかり思い出されます．暴力を振るう恋人が２人，健太郎も含めて３人いました．いえ，健太郎は違うわ．健太郎はそのカテゴリーには全く入らないわ．一人は私を殴ったので，そんな関係はよくないと思ってその人のもとを去りました．もう一人の男は言葉の暴力でした．このときもその男女関係は間違っていると気づきました．でも，健太郎と生活するのは違います．私たちは，たくさんのことを分かち合っていますよ.
■カウンセラー：**彼はいろいろな面で，あなたに優しいのですね.**

5. 反射（Reflection）

クライエントの陳述に表れているクライエントの感情を，クライエントが用いた言葉，または別の言葉で繰り返す．反射に用いられる言葉には，クライエントの感情が明確に反映されていなければならない．言葉で感情を明確に表現する場合もあるが，そうでない場合には，文脈または，非言語的行動（nonverbal behavior），声の調子などから推測する．

例１）

■クライエント：パパったら，私の着こなしが気に入らないって，昨年ずっと私を怒鳴り散らしていたのです．でもね，先週，パパが誰かに私の着こなしをほめているのを聞いてしまったんです．パパは妹にもやかましく言うんですよ．でもね，弟がだらしなくても，無視して何も言わないんですよ．時々はママにとても優しいんだけど，日によってひどいったらないの，押し付けがましくて，機嫌が悪くて，皮肉屋さんで！

■カウンセラー：**お父さんが首尾一貫したところがないので，いらついているんですね．**

例２）

■クライエント：彼氏を横取りされたんですよ．しかも，誰よりも信頼していた亜沙子に．

■カウンセラー：**親友にそんなことをされて，とてもショックが大きかったでしょうね．**

6．反論（Challenge）

クライエントがまだ気づいていない，または，認めようとしない感情 ・思考・行動の間の矛盾を指摘する，またはクライエントの問題に関連して，クライエントの意見と対立する見解を提示する．

例1）

■クライエント：友達がほしいです．

■カウンセラー：**友達がほしいと言いましたが，普段の生活では人との付き合いを避けようとしているような印象を受けます．**

例２）

■クライエント：彼は悪くないと思います．悪いのは私です．

■カウンセラー：**彼は悪くないと言いましたが，彼の行動に腹を立てていますね．**

例３）

■クライエント：一度でも失敗をすると皆に嫌われるに違いないと思います．

■カウンセラー：**もちろん，あなたを嫌う人もいるでしょうけど，あなたが一度失敗したからといってあなたを嫌うような心の狭い人はそれほど多くないと思います．**

7．解釈（Interpretation）

クライエントが陳述したこと，および気づいていることの範囲を超え，クライエントの感情 ・思考・行動について新しい意味・論理・説明を提供し，クライエントが新しい観点から問題を捉えられるよう援助する．解釈は，以下の４種類に分けることができる．

① 表面上は繋がりがないように見える陳述・事象の間の関連性を示す．

例）

■クライエント：最近成績がよくないんです．全然勉強もしてないし．彼女とも喧嘩ばかりしているし．

■カウンセラー：**多分彼女との関係がうまく行かないことに悩まされて勉強に集中できなくなっているように思います．**

② クライエントの感情 ・思考・行動に表れた主題・パターンを指摘する．

例）

■クライエント：人に近づくことができません．

■カウンセラー：**お父さんがお亡くなりになったことがとてもショックだったようですね．その後から，人と仲良くなると，その人がまた亡くなるのではないかと恐れているのではないでしょうか？**

③ 防衛・抵抗・転移について説明する．

例）

■クライエント：ここ一週間，なぜか志村さんにそっけなくしてしまったんですよ．彼はいつも私に優しくしてくれているのに．

■カウンセラー：**今は志村さんが優しくしてくれているけど，いつか彼に見捨てられるかもしれないという不安を持っているのではないかと思います．そして，その不安から自分を守るために，志村さんにそっけなくしてしまったのではないかと思います．**

④ クライエントの感情 ・思考・行動・問題を理解するための新しい枠組みを提示する．

例）

■クライエント：これ以上は我慢できません．母は私をまったく信頼してくれません．

■カウンセラー：**あなたは，わざとお母さんの不信を買うようなことをして，自分の中にお母さんに対する怒りの感情を湧き上がらせて，お母さんから離れようとしているような印象を受けます．そうしないと，お母さんを一人にして上京するのがとても辛くなりますから．**

8．自己開示（Self-Disclosure）

カウンセラーの個人的な経験について述べる．個人的な経験の例としては，クライエントの問題と類似した経験，クライエントの問題に対するカウンセラーの感情，カウンセラーの問題対処方法，その他の経歴などが挙げられる．

例１）

■クライエント：私がお酒を飲めないから，サークルの皆が，私とは飲み会に行きたがらない気がします．

■カウンセラー：**私の友達の中にもお酒を飲めない人がいますが，彼がウロン茶を飲んでいても私は彼と一緒にいるのが楽しいです．**

例２）

■クライエント：母は，私をいまだに小さな子供のようにいつも扱うのです．私はもうとっくに20代なかばなのです．先週も友人たちの前で，母はゴム長靴と傘を持って来て，こんな天気の日にはどんな身支度をしなければならないかを私に話すのです．

■カウンセラー：**私がそんな風にされたら，おそらく相当起こるでしょうね．**

９．感情表出（Immediacy）

クライエントとの関係，またはクライエントに対するカウンセラーの感情を伝える．

例１）
■クライエント：いいえ，違います．私は大丈夫です．
■カウンセラー：**そんな風に繰り返して話の腰を折られますと，私も愉快ではありません．**

例２）
■クライエント：ああ，先生が父の代わりであったらよかったのに．．
■カウンセラー：**私には，あなたがとてもよい娘のように思えますよ．**

10．主観的情報（Subjective Information）

クライエントの問題と関連したカウンセラーの世界観，価値観などの個人的な考え方，または，セッション中のクライエントの行動に対するフィードバックを提示する．しかし，クライエントの 感情 ・思考・行動の不合理性を指摘するものではない（反論との違い）．

例1）
■クライエント：先週彼女と喧嘩をしてから，彼女とは視線も合わせていません．彼女も私に見向きもしてくれないし．本当は彼女に謝って仲直りをしたいのですが，彼女の顔を見ると，照れくさくて何も話せなくなります．
■カウンセラー：**彼女もあなたと同じように仲直りをしたいけど，照れくさくて，そういう態度を取っているのではないしょうか．彼女は，あなたが声をかけてくれるのを待っているのかもしれません．**

例2）
■クライエント：できる女になりたくて，誰にも負けたくなくて，週末にも休まずに

仕事をしているんですけど，最近彼氏とも，友達とも距離ができてしまって，とても寂しいです.

■カウンセラー：**なりたい自分になるためにはそれなりの代価を払わなければならないと思います.**

例3)

■カウンセラー：**先ほどのロールプレーでは，私と視線をちゃんと合わせて話していただきました．声にもう少し力が入れば，さらによくなると思います.**

例4)

■カウンセラー：**話をする時の表情が前よりずっと明るくなりました.**

11. 客観的情報（Objective Information）

カウンセリングの過程，またはクライエントの問題と関連した事実，資料などを提供する.

例１）

■クライエント：面接時間について聞きたいですが.

■カウンセラー：**面接は毎週1回，５０分です.**

例２）

■カウンセラー：**今日は，まずあなたがこの問題について過去にどう対処していたかを振り返った後，これからはどのようにこの問題に対処するのがいいかについて一緒に考えてみましょう.**

例３）

■クライエント：臨床心理士にないたいんです.

■カウンセラー：**臨床心理士の資格を得るには指定された大学院を修了しなければなりません.**

12. 案内（Direct Guidance）

クライエントの問題解決を手助けするために，セッション中，または，セッション以外の状況での，クライエントの行動の方向をカウンセラーが提案することである.

例１）

■カウンセラー：**今あなたの前にお客さんがいると想像して，挨拶の練習をしてみましょう.**

例２）

■カウンセラー：**肩の力を抜いて，ゆっくり息を吸ってください.**

例３）

■カウンセラー：**友達と話す時，少し冗談を交えて話してみるのはどうですか？**

例2)

■カウンセラー：**背伸びしようとしないで，ありのままの自分を出してください.**

13. その他（Other）

挨拶，世間話など，クライエントの問題と関係のない陳述，または，他のカテゴリーに該当しない陳述の場合，このカテゴリーに分類する.

例１）

■カウンセラー：**それじゃ，今回はこれで終わることにしましょう.**

例２）

■カウンセラー：**ピンクがお似合いですね.**

APPENDIX C: Manual for the Client Response Modes System

1. 単純応答（Simple Response）

カウンセラーの陳述，あるいは質問に対する短い応答である．感情表現，自己探索，出来事の描写などは見られない．

例１）
■カウンセラー：また上司に怒られて落ち込んでいるようですね．
■クライエント：**はい，そうです**．

例２）
■カウンセラー：大学を出たら何がしたいのですか？
■クライエント：**うん，分かりません**．

2. 要求（Request）

カウンセラーに情報，意見，助言などを要求する．または，問題解決の責任をカウンセラーに転嫁しようとする．

例１）
■クライエント：**これからどうすればいいのでしょうか？**
例２）
■クライエント：**私っておかしいのですか？**

3. 外的事象説明（Recounting）

過去の出来事，または他人の感情・思考・行動などの外的事象について，物語のように陳述する．クライエントの感情・思考・行動に対する積極的な自己探索は見られない．自己探索を仄めかす陳述があっても，第三者の立場から述べられたような皮相的な陳述，または理屈による陳述である．

例１）

■クライエント：**母は毎朝決まって花に水をやります.**

例２）

■クライエント：**昨日も廊下で鈴木さんとばったり会ったけど，彼は私に見向きもしてくれませんでした.**

例３）

■クライエント：**仕事と家事を並行するのは大変だけど，共稼ぎってそんなものでしょう.**

４．認知・行動探索（Cognitive-Behavioral Exploration）

現在，クライエントが，自分の思考・行動について積極的な自己探索を行っていることを表す陳述である．自分の意見，または経験をすらすらと述べるよりは，自分の思考・行動の新しい意味，または問題に対する答えを見出そうと努力する態度が見受けられる．他人の思考・行動に関する陳述は，その陳述がクライエントの問題理解，または問題解決と直接的な関連性を持たない限り，外的事象説明に分類する．

例１）

■クライエント：**父にそういうふうに言われても，自分が父ともっと強くつながっていれば，聞き流せたんでしょう.**

例２）

■クライエント：**多分，うん，子供のときに、誰もいない方がいいと思ったのは，うん，あ，，，これは僕の推測なんですけど，あの，，，うん，何かやっぱり家庭が苦しかったからかなと思うんですね．あの，誰もいなければ緊張する必要がないですから一人で伸び伸びと好きなことをやって過ごせるわけで.**

５．感情探索（Affective Exploration）

現在，クライエントが ，自分の感情について積極的な自己探索を行っていることを表す陳述である．クライエントの感情を表す言葉を必ず伴う（例えば，嬉しい，辛い，腹が立つなど）．過去の感情に関する陳述の場合，クライエントがその感情を，現在，再体験していない限り， 外的事象説明に分類する.

例１）

■クライエント：**自分が情けないと感じた時，自分自身に腹が立ってしょうがないんです.**

例２）

■クライエント：**私はこんなことで，どうしてこんなに怒っているんだろう.**

６．洞察（Insight）

今まで気づかなかった自分の感情・思考・行動の存在，またはこれらの意味，パターン，因果関係などについて新しく気づいたことを表す陳述である．感動詞の「あ！」を伴うことが多い．他人，または自分が置かれた状況に，自分の問題の責任を転嫁することを止め，自分の感情・思考・行動と自分の問題との関連性を認める.

例１）

■クライエント：**彼女が私に甘えてくるのが嫌だったのは，今気づいたんですけど，私の方も彼女に頼りたくなるからだったんです.**

例２）

■クライエント：**私はいつも怒りを抑え込んできたんです．そうしていたのは，怒ってしまって，自分をコントロールできなくなるのを怖れていたからなんです.**

７．関係探索（Discussion of Client-Counselor Relationship）

カウンセラー，またはカウンセリングに対する感情，または態度を表す陳述である.

例１）

■クライエント：**先生は，前田さんに一度も会ったことがないのに何でそんなことが言えるんですか？**

例２）

■クライエント：**こんなことでカウンセリングに来るべきじゃなかったのかな.**

８．行動計画（Discussion of Plans）

問題解決，または目標達成のための具体的な行動計画と関連した陳述である．しか

し，漠然と行動計画を探索する陳述は，外的事象説明に分類する．

例１）
■クライエント：**来月からはパートを一つ辞めて，家族と過ごす時間を増やします.**
例２）
■クライエント：**今度，太郎君に会ったら，突然お家に来られるのは困ると言います.**

９． 沈黙（Silence）

5秒以上クライエントの沈黙が続く．

10．その他（Other）

挨拶，世間話，クライエントの問題と関係のない陳述，不完全な文章，曖昧な内容の陳述など，他のカテゴリーに分類できない場合に，このカテゴリーに分類する．

例１）
■クライエント：**こんにちは.**
例２）
■クライエント：**今日はいい天気ですね**

セッション回想質問紙

Ⅰ．今日のカウンセリングでよかった，または，役に立ったと思われる瞬間を３つ思い出してください．

1. その時，カウンセラーは何と言いましたか？あなたにとってよかった，または，役に立ったと思われるカウンセラーの発言（カウンセラーの質問，アドバイス，励ましの言葉など）について書いてください．
2. その時のカウンセラーの発言がどのように役に立ちましたか？

	１．カウンセラーは何と言いましたか？	２．どのように役に立ちましたか？
役に立った瞬間１		
役に立った瞬間２		
役に立った瞬間３		

II．今日のカウンセリングであまりよくなかった，または，役に立たなかったと思われる瞬間を３つ思い出してください．

１．その時，カウンセラーは何と言いましたか？あまりよくなかった，または，役に立たなかったと思われるカウンセラーの発言（カウンセラーの質問，アドバイス，慰めの言葉など）について書いてください．
２．その時のカウンセラーの発言がなぜよくなかったまたは役に立たなかったと思いますか？

	１．カウンセラーは何と言いましたか？	２．なぜ役に立たなかったのですか？
役に立たなかった瞬間１		
役に立たなかった瞬間２		
役に立たなかった瞬間３		

APPENDIX E: Positive and Negative Effects Taxonomy

＜肯定的効果＞

（１）認知的側面

１．認知・感情に対する気づき：今まで気づかなかった自分自身の考え方および感情の存在に気づく.
例）人にどう評価されるかを気にしている自分に気づいた.

２．矛盾に対する気づき：自分の考え方，感情および行動の矛盾に気づく.
例）頭では人と仲良くなりたいと思っていながら,人が近づいて来ると距離を置いていることに気づいた.

３．認知・感情の明瞭化：今まで漠然と考えていたこと,または,感じていたことが明瞭になった.
例）気持ちを言葉にすることによって，私が何を怖がっていたのかがかっきりした.

４．因果関係に対する気づき： 問題と自分自身の行動，思考および感情との関連性に気づく.
例）お父さんと話すたびに怒ってしまうのは，お父さんに甘えたいからだということが分かった.

５．新しい観点：今までと違う観点から問題を捉える.
例）いつも人のことを優先していたが，まず自分が楽しまなきゃ見ている人も楽しんでくれないだろうと痛感するようになった.

６．対処方法の把握：問題に対処する方法，もしくは目標を達成するために必要な行動要領を把握する.
例）仕事の優先順位を決めておくと慌てずに仕事をこなせるということが分かった.

（２）感情的側面

１．状況肯定：問題状況を肯定的に捉えることによって心配が軽減する.
例）今から勉強を始めても遅くないと思ったら気が楽になった.

２．自己肯定：自分の考え方，感情，または行動を肯定的に捉えることによって心配が軽減する.
例）私が変なわけじゃない．誰でも同じ状況に置かれたら同じことをするだろうと思ったら気が楽になった.

３．問題解決への意欲：問題を解決したい，または解決できると思うようになる.
例）残された時間は少ないけど,最後まで頑張りたいと思えた.

（３）関係的側面

１．受容・共感　：カウンセラーに受容，または共感してもらったと感じる.
例）私の気持ちを分かってもらえたような気がした.

２．親近感・信頼感：カウンセラーに対する親近感，または信頼感を感じる.
例）カウンセラーを親しく感じた.

＜否定的効果＞

1． 抵抗：カウンセラーの介入に対する協力を拒む、またはカウンセラーの発言を否定する．
例1)「相手の理性を信頼しろ」と言われても、私には無理です．

2．否定的認知・感情：問題と関連した否定的な考え、または感情が生じる．
例）カウンセラーの話を聞いて、私が、存在する価値のない人間のような気がした．

3．混乱：カウンセラーの介入にどう応じればいいか、または介入の意義が何であるかが分からなくて当惑する．
例）「何がしたいですか？」と聞かれたが、自分にも分からない．

4．不満：カウンセラーの介入が問題の肝要な点を外れていることに不満を覚える．
例）解決策について考えるよりは、今の状況について誰かに話してすっきりしたかった．