

## Towards the Development of a Counseling Effectiveness Scale

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### Abstract:

*This is an attempt to develop an instrument that measures counseling effectiveness by students in a school setting in as much as the practice of counseling in the Philippines is mostly done in the school setting rather than in the community or clinical settings. Howard's Three Phase Model of Change and other salient factors, namely: counselor qualities and abilities, and process elements guided item development resulting in an initial 50 item scale. Items underwent expert review before the instrument was fielded. Forty-seven guidance counselors agreed to participate in the study enrolling a total of 272 client respondents who used the proposed scale to evaluate the counselor after the counseling session. Results yielded a three factor model with 4 subscales for factor 1 resulting in a 43-item scale which may be divided into two parts. The instrument shows adequate reliability as a whole ( $\alpha = .95$ ) and among its scales ranging from .75 - .96. Factor I subscales range from .81 - .91. The scales comprising the instrument also demonstrate convergent validity as indicated by significant low correlations among the factors.*

**Key words:** counseling effectiveness, evaluation, instrument

Republic Act 9258 or the Guidance and Counseling Act of 2004 aimed to regulate the guidance and counseling profession in the country through licensure and continuing professional

development. Through this, the practice of guidance and counseling can be standardized and the delivery of guidance services can be more effective.

Undoubtedly, the most important of the guidance services is counseling (Villar, 2007). Dimmitt (2009) noted the importance of determining the effectiveness and accountability of school counseling practices due to the pressure to demonstrate results towards the effort to win public support and trust.

In response to this, counseling models (Martin, Carey & De Coster, 2009; Tolentino, 2010) are being evaluated in an effort to integrate theory and practice and promote a more cohesive and systematic approach to the delivery of guidance and counseling services. Recent trends include the self-efficacy models (Daniels, & Larson, 2001; Larson, Suzuki, Gillespie, Potenza, Bechtel, & Toulouse, 1992; Lent & Brown, 2006; Lent, Hill, & Hoffman, 2003; Lent, Nota, & Soresi, 2004), and the multicultural model (Ivey & Ivey, 2003; Ponterotto, Mendelowitz, & Collabollotta, 2008; Sheu & Lent, 2007; Sadowsky, 1996; Sadowsky, Taffe, Gutkin, & Wise, 1994).

In terms of counselor education and supervision, standards and models are continuously being evaluated and updated. Duba, Paez, and Kindsvatter (2010) identified non-academic characteristics that can be used to evaluate the performance of community counseling students. Locally, Mateo (2011) explored the possibility of a Filipino counselor development model whereas, Tolentino (2010) examined the theoretical orientation of practicing registered Filipino counselors and found out that there is a discrepancy between counselor's verbalized personal theory and what they actually use in their practice (Tolentino, 2010).

The effectiveness of certain intervention strategies (Lazarus, 2002; Stephen, 2009) and applicability of counseling models (Menezes, 2008; Letargo, 2010) were also examined as well as the working alliance between counselor and client

(Suba,1996), and the influence of gender on self-disclosure in counseling (Magno, 2009).

Content-based evaluation procedures have likewise been polished and streamlined such as the Skilled Counselor Training Model (SCTM) (Little, Packman, Smaby, & Maddux, 2005; Lepkowski, Packman, Smaby, & Maddux, 2009), and the Cumulative Microtraining (CMT) format (Kuntze, van der Molen, & Born, 2007). Effectiveness of training in counseling in school and community settings have been evaluated and instruments have been evaluated for this purpose (Frey, Beesley, and Liang, 2009).

However, an instrument that measures counseling effectiveness by students in a school setting have not been seen in the literature so far reviewed. This would be very relevant In the Philippine setting because the practice of counseling is mostly done in the school setting rather than in the community or clinical settings (Salazar-Clemeña, 1993; Villar, 2007).

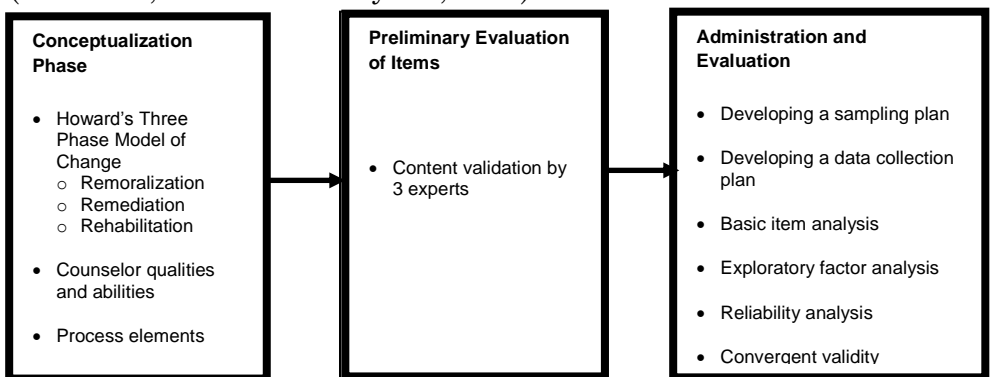
## **Theoretical Framework**

This study aims to undertake the development and validation of an instrument - the Counseling Effectiveness Scale (CES) - that will objectively measure the effectiveness of counseling through its outcome based on clients' assessment. Counseling effectiveness is based on the client's evaluation of his own progress and over-all satisfaction with the counseling process. Howard's Three Phase Model of Change (Howard, Lueger, Maling, & Martinovich, 1993; Howard, Moras, Brill, Martinovich, & Lutz, 1996 as cited in Frey, Beesley, & Liang, 2009) was the basis for evaluating counseling outcome. In this model, counseling outcome is conceptualized as having three progressive stages consisting of: (a) remoralization, or the reestablishment of a sense of subjective well-being through interventions that emphasize mobilization of practical and basic coping actions, (b) remediation, which involves the alleviation of symptoms through the activation of coping skills,

and (c) rehabilitation, or improvement in life functioning, including unlearning dysfunctional patterns and adopting healthier patterns. This stage has a longer-term focus and may assume a supportive-maintenance program (Howard, et al., 1993 as cited in Frey, Beesley, & Liang, 2009).

Howard's model has been commended for its flexibility and suitability to various theoretical orientations and treatment modalities. From it can be drawn "an overarching framework that is responsive to diverse client therapeutic needs" ranging from short-term interventions (e.g. symptom relief) to longer term-treatment (e.g., changing longstanding maladaptive patterns) (Frey, Beesley, & Liang, 2009, p. 29). However, in this study the model was used to measure the impact of the counseling process on the client rather than the phases in the treatment or the interventions employed.

Other factors considered under counselor effectiveness are counselor qualities and abilities, and process elements in counseling. Counselor qualities and abilities refer to qualities that facilitate the counseling process such as encouraging, empathic, caring, creative, accommodating, non-judgmental, open-minded, and competent (Nystul, 2003). Process elements refer to growth-conditions and processes that facilitate effective counseling and positive outcomes in the client such as mutual trust, respect, freedom, and counselor-client interaction (Brammer, 1999 cited in Nystul, 2003).



**Figure 1. Operational Framework of the Study**

## **Statement of the Problem**

This sought to establish the validity and reliability of an instrument that measures counseling effectiveness, the CES. Specifically, it seeks to answer the following questions:

- 1) What are the dimensions underlying the proposed instrument based on factor analysis?
- 2) What is the internal consistency of the scales that comprise the CES?
- 3) Do the scales demonstrate convergent validity?

## **Hypotheses**

- 1) Using factor analysis, the proposed instrument will have five underlying dimensions, namely;
  - 1.1 remoralization
  - 1.2 remediation
  - 1.3 rehabilitation
  - 1.4 counselor qualities and abilities
  - 1.5 process elements
- 2) The CES scales display internal consistency of at least  $\alpha = .70$ .
- 3) The scales demonstrate convergent validity at  $p = .05$  level of significance.

## **Method**

The study employed a methodological design employing factor analysis to determine the dimensions of the proposed instrument. Correlational analysis was used to determine convergent validity.

## **Participants**

The study employed quota sampling in the selection of participants using a 1:5 item-respondent ratio. Each counselor

was asked to enroll 3 to 5 counselees who will evaluate counseling sessions conducted with them by the former. The counselors were also given a profile questionnaire.

The 272 client respondents came from 21 public and private schools in Pampanga, Bataan, Zambales, and Nueva Ecija. They were clients of 47 guidance counselors and guidance facilitators who agreed to participate in this study. The clients' ages range from 11-33 years with a mean age of 17.38. Average number of sessions conducted with clients is 3 sessions. The counselors' ages range from 23 to 61 years old averaging at 36.75 years old and almost 75% of them are female.

### **Instruments and Procedure**

The study employed the constructed Counseling Effectiveness Scale, and a demographic profile questionnaire. The following steps were taken to in developing the instrument:

1. The items for the proposed Counseling Effectiveness Scale (CES) were based on Howard's Three-Phase Model of Change consisting of remoralization (items 2,11,12,18, and 20), remediation (items 1, 5-9,13-15, and 19) , rehabilitation (items 3,4,10,16,17,21-25). Other items dealt on counselor qualities and abilities (items 27-37 and 46-50), and process elements in counseling (items 26, 38-45) which were based on variables identified by Nystul (2003). Items were written by the author based on the Microskills approach by Ivey & Ivey (2003) and Egan (1994, 2002). Reference was also made to the Client Evaluation of Counseling Inventory by Frey, Beesley, & Liang (2009). Items were answered using a 5-point Likert scale with choices ranging from 0 (not observed or not applicable) to 4 (strongly agree). The 50-item scale underwent content validation by three experts in counseling prior to pilot-testing. Items were originally written in English and later

- translated to Filipino to facilitate better understanding by students in public schools.
2. The instrument written in Filipino underwent an initial run with ten clients of one counselor from a private school. Based on the feedback from the trial run, items were written in both Filipino and English because some students in private schools are not very fluent in Filipino. Thus, the Filipino with English translation was used in the final form to better facilitate understanding by participants across a range of settings in Philippine schools.
  3. Upon securing permission from the heads of the institutions involved, the researcher coordinated with the head of the Guidance Center of the institution to elicit the voluntary participation of guidance counselors in the study. Upon confirming their participation, the counselors were asked to identify clients who will be asked to evaluate the effectiveness of the counseling sessions that have been conducted thus far by the counselor. Clients were informed that the evaluation is voluntary and the results may be used for research purposes. The participating counselors were given a packet of tests consisting of a demographic profile questionnaire and CES forms for the clients. The Demographic Profile Questionnaire was used to gather pertinent information from the respondent guidance counselors regarding their educational attainment, years of experience, age, sex, and type of institutional affiliation (whether public or private sector). This was done within 3 months to 1-year to allow the adequate sampling of clients by the counselor. They were advised to select client respondents on the basis of voluntariness and adequacy of the number of sessions conducted, that is, there should be a sufficient number of sessions with the client or the

counseling is at its terminal phase to warrant an evaluation. As much as possible, random sampling of cases was requested.

## **Data Analysis**

Exploratory and confirmatory analyses specifically principal components analysis using both orthogonal (varimax) and oblique (direct oblimin) rotations were used to determine the factors in order to locate the factors in the factor space. A coefficient value of .40 was used as a cut off score and number of iterations was set at 25. Cronbach alpha was used as a measure of internal consistency. In order to approximate a normal distribution required to conduct factor analysis, data cleaning through mean replacement method was done on 5.88% (16) of the 272 cases.

Descriptive data were analyzed using means and standard deviations. Clients' mean evaluation of counseling effectiveness was obtained per counselor after which Pearson-r was applied to determine criterion-related validity.

## **Results**

Preliminary analysis indicated sampling adequacy (Kaiser-Meyer-Olkin = .926) and high factorability (Bartlett's test = 7647.39 (1225),  $p=.000$ ). Using both varimax and direct oblimin rotations nine factors were produced initially with loadings ranging from 25 items to 2 items based on eigenvalues of 1 or more. Some cross-loadings were observed. Direct oblimin rotation as expected produced more cross-loadings with the same number of factors.

After this initial examination, the number of factors was set to five following the a priori assumption in the CES. This five-factor solution accounts for 52.56 % of the variance in the proposed scale. Direct oblimin rotation was used because it is more appropriate for psychological variables since it does not



suppress correlations among factors and thus can account for the interrelatedness of psychological variables in real life (Kline, 1994).

## **Factor Structure**

Results show that the hypothesized Factors IV (Counselor Qualities and Abilities) and V (Process) converged into the first factor with the highest initial loadings of 34 items. Factor 2 initially on loaded 17 items, Factor 3 loaded on 3 items, Factor 4 initially loaded on 21 items, and Factor 5 initially loaded on 5 items.

Factor 1 has the highest initial loadings of 34 items with 9 items cross-loading on factors 2 and 5. These 9 items were either discarded or relegated to the other factors with higher loadings leaving Factor 1 with 25 items. These items initially referred to counselor qualities and abilities (Factor IV) and process elements in counseling (Factor V). However, factor analysis results show that these two factors loaded on one single factor, thus, it was renamed **Counselor Qualities, Abilities and Processes**. This refers to the extent to which the client perceives the counselor to embody qualities such as empathy (*27- counselor can identify the message that I want to impart to him/her*), caring (*26 - I can feel that the counselor is listening to me*), genuineness and concern (*30 - I can feel true care and concern from my counselor when we speak*), willingness to help (*35 - counselor is always open and ready to help me*), trustworthiness (*37 - I can tell my counselor anything*), and counseling skills that determine the course of the counseling process (*31 - Strategies employed by counselor are helping me a lot*).

Factor 2 initially loaded on 17 items with 7 items cross-loading mostly on Factor 4. Cross-loadings were relegated to other factors where loading was higher leaving Factor 2 with 10 items (20, 21, 22, 23, 17, 18, 19, 24, 25, 16). These items relate improvement in physical, attitudinal and behavioral capability

to handle or solve one's own problem. This factor was named **Reactivation** to communicate an individual's renewed ability to act on his own concerns. Such items include (24) I was able to think about things that I thought and did that caused my problems, (25) I am now more prepared to change maladaptive behaviors that prevent me from solving my problems.

Factor 4 initially loaded on 21 items with 14 items cross-loading on factors 1, 2 and 5. Items cross-loading higher on other factors were excluded leaving Factor 4 with 9 items (7, 8, 2, 6, 1, 9, 3, 4, 5). The remaining 9 items center on improvement in an individual's subjective well-being and cognitive disposition leading to more effective functioning and thus, was named Factor 3 - **Revitalization**. Such items would include (04) I was able to focus on important things, (05) I was able to think more clearly.

Factor 5 initially loaded on 5 items 3 of which cross-loaded heavily on Factors 1, 2 and 4. Discarding these items leaves Factor 5 with only 2 items which makes the scale ( $\alpha=.59$ ) unreliable (Kline, 1994). Thus, Factor 5 was deleted leaving the test with three major factors comprising of 44 items.

**Factor 1 subscales.** To further examine Factor 1 – Counselor Qualities, Abilities and Process, the 25 items in this scale were again rotated using varimax rotation. This further reduced the number of items to 24 because item 42 did not load on any factor. Four subscales explaining 62.486% of the variance were generated, namely: Factor 1A - Counselor-Client Interaction, Factor 1B – Enthusiasm, Factor 1C – Problem-Solving Abilities and Techniques, and Factor 1D –Empathy.

Factor 1A was named **Counselor-Client Interaction** referring to the quality of interaction between the counselor and the client as shown in the flow of the interaction, establishing of trust and confidence in the counselor and the process, and satisfaction of the client in the counseling session. This subscale consists of 9 items namely, items 26, 36, 37, 38, 39, 40, 41, 43 and 45. Initially it loaded on 11 items with cross-

loadings on factor 1B and 1D. Item 30 was assigned to factor 1B and item 44 to factor 1D were they loaded higher. Items 38 (*Our conversation flows smoothly*), 43 (*I feel at ease when I talk to my counselor.*) illustrate this scale.

Factor 1B was termed as **Enthusiasm** referring to the counselor's readiness and willingness to help the client and to encourage the latter towards positive change. Nystul (2003) pointed out that being encouraging, which is embodied in this factor, may be the most important quality of an effective counselor. This factor initially loaded 8 items with cross-loadings on factors 1A, 1C, and 1D. After careful examination of the items, items 31 and 32 were assigned to factor 1C, and item 27 to 1D. Item 26 was assigned to 1A were the item loaded higher. This factor consists of items 30, 33, 34, and 35

Factor 1C was labeled **Problem-Solving Abilities and Techniques** which refers to the counselor's use of problem solving strategies in helping client solve problems or handle concerns. It also includes counselor's ability to teach client these techniques and client's evaluation of their effectiveness. This factor loaded on 7 items (31, 32, 46, 47, 48, 49, and 50) with items 31 and 32 cross-loading on factor 1B and item 48 cross-loading on factor 1D. This factor consists of items such as 31, 46, 47, and 49.

Factor 1D was labeled **Empathy** referring to the counselor's ability to identify with client's concerns and feelings, as well as to communicate understanding of client's situation (Nystul, 2003). Several researchers (Clark, 2010a, 2010b; Eisenberg, 2000; Feller & Cottone, 2003; Miville, Carlozzi, Gushue, Scabra, & Ueda, 2006; Myers, 2000; Pearson, 1999; and Rogers, 1975) have identified empathy as a very important element in counseling. This subscale initially loaded on 7 items with cross-loadings on factors 1B and 1C. Items 41 and 43 were relegated to factor 1A where they loaded higher. Item 48 was assigned to factor 1C because it communicated guiding the client in making a decision. On the other hand, item 27 was assigned to factor 1D despite higher loading on 1B

because it dealt with identifying with the client’s message. The scale was eventually trimmed down to 4 items: 27, 28, 29, and 44.

**Total number of items.** Factor 3 was deleted because it consisted of items that more or less stated the same thing but was phrased differently and may consist of what Kline (1994) termed as bloated specifics which meant that the items may not really comprise a concept but are really the same thing stated differently. Additionally, Kline (1994) ruled out that factors with less than four or five items may not really be reliable. In this case, the reliability coefficient obtained, Cronbach alpha =.855,  $F(2,271) = .381$ , was good but not significant, Thirdly, some items in these factors are duplicated in other factors such as item 13 which is stated in the positive in item 5. Item 12 on Factor 2 which cross loaded closely on Factors 4 and 5 and, being the same with item 21, was also deleted. Factor 5 was also deleted because it was left with only 2 items (10 and 11) which loaded higher on this factor leaving the proposed instrument with 43 items. Further rotating the items in Factor 1 resulted in the deletion of item 42 which did not load on any of the four factors. In summary items 10, 11, 12, 13, 14, 15, and 42 were deleted resulting in a total of 43 items which explains 48.55% of the variance in the proposed scale.

**Table 1 Factor Loadings of Five Factor Scale based on Oblique Rotation**

Item	Component				
	1	2	3	4	5
<b>Factor 1 - Counselor Qualities, Abilities and Processes</b>					
<b>Factor 1A – Counselor-Client Interaction</b>					
26 - I can feel that the counselor is listening to me	.758				
36 - counselor is willing to spend time with me and is not in a hurry	.730				
37 - I can tell my counselor anything.	.730				

38 - our conversation flows smoothly	.720
39 - I am happy to be able to speak with the guidance counselor	.685
40 - coming to the Guidance Office and talking to the guidance counselor has done me a great help	.752
41 - the things I learned from this counseling will help me cope better in life	.753
43 - I feel at ease when I talk to my counselor	.693
45 - I do not hesitate to tell the counselor my concerns because I know that I can trust him	.693

**Factor 1B - Enthusiasm**

30 - I can feel true care and concern from my counselor when we speak	.734
33 - I can see the counselor's desire to help me	.687
34 - counselor encourages me not to give in to my problems	.695
35 - counselor is always open and ready to help me	.717

**Factor 1C - Problem-Solving Abilities and Techniques**

31 - strategies employed by counselor are helping me a lot	.728
32 - counselor taught me strategies on how to face my problems	.690
46 - counseling helped me think about problems that come my way	.656
47 - counselor taught me how to analyze my own problem.	.594
48 - counselor guided me on how to make decisions	.641
49- counselor taught me how to each step I take toward the resolution of my problem	.643
50 - counselor taught me to rely on my own ability to solve my own problem	.661

**Factor 1D - Empathy**

27- counselor can identify the message that I want to impart to him/her	.758
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28 - counselor seems to know what I am feeling when he/she speaks	.653
29 -counselor's words speak straight to my heart	.603
44 - the counselor has prepared to help me	.768

**Factor 2 – Reactivation**

16 - relationship with other people improved	.486
17 - relationship with parents and siblings improved	.710
18 - became more comfortable with myself	.641
19 - heavy sensation I feel in my body is gone	.606
20 - living became much lighter and easier	.788
21 - I am better able to face my problems	.753
22 - I got an idea how I can solve my own problem	.738
23 - I have a clearer idea of my situation now	.738
24 - think about things that I thought and did that caused my problems	.616
25 - more prepared to change maladaptive behaviors that prevent me from solving my problems	.519

**Factor 4 – Revitalization**

01 - felt less confused	.644
02 - felt a lot better	.725
03 - do work/studies effectively	.475
04 - focus on important things	.597
05 - think more clearly	.542
06 - felt less sad	.673
07 - doubts were erased	.747
08 - tension felt was lessened	.737
09 - anger and irritability that I felt was gone	.483

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## Scale Reliability and Validity

Means of the three factors show above midpoint mean scores for all three factors indicating a high degree of effectiveness on the average based on the instrument used.

Cronbach alpha coefficients also demonstrate that the three scales have internal consistency. The new 43-item test has an over-all internal consistency of  $\alpha = .95$ . Factor 1 (Counselor Qualities, Abilities and Processes) has internal consistency of  $\alpha = .96$ , Factor 2 (Reactivation) with  $\alpha = .86$  and Factor 3 (Revitalization) with  $\alpha = .75$ .

The subscales in Factor 1 have the following indices of internal consistency: Counselor-Client Interaction,  $\alpha = .91$ ; Enthusiasm,  $\alpha = .82$ ; Problem-Solving Abilities and Techniques,  $\alpha = .86$ ; and Empathy,  $\alpha = .81$ .

Low but significant correlation coefficients among the three factors generated may indicate convergent validity implying that the three factors are in theoretical unison in measuring counseling effectiveness.

**Table 2 Descriptives, Reliabilities and Correlations of the Factors**

Factor	Mean	SD	Cronbach alpha	Factor		
				1	2	3
Counselor qualities, abilities and processes	3.560	.613	.96	1	.211**	.191**
Reactivation	3.311	.818	.86		1	.205**
Revitalization	3.340	.721	.75			1
<i>Factor 1 Subscales:</i>						
<i>Counselor-Client Interaction</i>			.91			
<i>Enthusiasm</i>			.82			
<i>Problem-solving abilities and techniques</i>			.86			
<i>Empathy</i>			.81			
Over-all Reliability			.95			
** Correlation is significant at 0.01 level (2-tailed)						

## Discussion and Conclusions

The resulting factor structure of the proposed Counseling Effectiveness Scale produced three major factors: counselor qualities, abilities and processes; reactivation, and revitalization that deviate from the a priori factors that make up the proposed instrument. These hypothesized factors were: (a) remoralization; (b) remediation; (c) rehabilitation, (d) counselor qualities and abilities; and (e) process elements. This difference may be due to cultural variations in the sample used in the study viz-a-viz western sample used in other studies (Frey, Beesley, and Liang, 2009; Kuntze, van der Molen, & Born, 2007). Moreover, the sample in this study consisted of high school and college students which are much younger in other studies used (Frey, Beesley, and Liang, 2009). The resulting factors may further imply that these are the salient factors to be evaluated in the Philippine counseling setting. Such factors seem to place a greater emphasis on the qualities, skills and abilities of the counselor to facilitate the counseling process (Nystul, 2003).

From an initial 50-item scale, the resulting 43-item scale may be divided into two parts; Part I - Client Impact consisting of Reactivation (10 items) and Revitalization (9 items), and Part II – Counselor Qualities, Abilities and Processes consisting of 24 items. This partitioning of the items may be helpful in deciding whether to use the entire test or to use Part I to measure client impact only or Part II to measure counselor effectiveness only. Of course, for a full measure of counseling effectiveness the full version may be used.

The instrument shows adequate reliability indices as a whole ( $\alpha = .95$ ) and among its scales ranging from .75 - .96. Factor I subscales range from .81 - .91. The scales comprising the instrument also demonstrate convergent validity as indicated by significant low correlations among the factors.



## Limitations and Future Research

The proposed instrument is an initial attempt to construct a scale that measures counseling effectiveness to be used in the school setting with adolescent students and young adults as its main respondents. Its use in other settings with older adult respondents may require further investigation. The instrument also needs to be further validated using a larger sample to further strengthen its psychometric properties. Upon establishing the factors that make up the instrument, comparison with other measures of counseling effectiveness can also be investigated. Norms and interpretations for this scale are yet to be established which requires a larger sample size preferably using randomized sampling techniques. An improvement on selection of the respondents and closer monitoring of the use of the instrument may also be employed in future studies.

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