

## CUPRINS

### **Editorial**

Gheorghe Tomşa, Andreea Szilagyi

Cuvânt înainte. Un manifest pentru profesiunea de consiliere

Gheorghe Tomşa, Andreea Szilagyi

Foreword. A Manifesto for the Counseling Profession

### **Perspective teoretice**

Mark P. Eades, Daniel Hall - *Present State and Future Directions of Distance Supervision in Professional Counseling: What Does the Data Tell Us?*

Jennifer L. Rogers, Elena Amalia Stanciu - *Toward an Understanding of Relational-Cultural Theory*

### **Cercetări empirice**

Dean W. Owen, Fidan Korkut Owen - *Dispositional Assessment in Counselor Education: Initial and Continuing Instrument Development*

Elena Amalia Stanciu, Jennifer L. Rogers, Dennis Gilbride - *Trait Emotional Intelligence and Clinical Competence among Counseling Master's Students*

### **Bune practici**

Delia Goia - *Relații de putere versus puterea relațiilor. Rolul consilierului școlar în parteneriatele școală-familie-comunitate*

Delia Goia - *Power relations versus the power of relationships. The role of the school counsellor in school-family-community partnerships*

### **Tendențe**

Ioana Panc - *Repere etice pentru consilierii din România. Tendențe și provocări*

Ioana Panc - *Ethical guidelines for Romanian counselors. Trends and challenges*

### **Ghid pentru autori**

## SUMMARY

### **Editorial**

Gheorghe Tomşa, Andreea Szilagyi

Cuvântul înainte. Un manifest pentru profesiunea de consiliere

Gheorghe Tomşa, Andreea Szilagyi

Foreword. A Manifesto for the Counseling Profession

### **Theory**

Mark P. Eades, Daniel Hall - *Present State and Future Directions of Distance Supervision in Professional Counseling: What Does the Data Tell Us?*

Jennifer L. Rogers, Elena Amalia Stanciu - *Toward an Understanding of Relational-Cultural Theory*

### **Research**

Dean W. Owen, Fidan Korkut Owen - *Dispositional Assessment in Counselor Education: Initial and Continuing Instrument Development*

Elena Amalia Stanciu, Jennifer L. Rogers, Dennis Gilbride - *Trait Emotional Intelligence and Clinical Competence among Counseling Master's Students*

### **Best practices**

Delia Goia - *Relații de putere versus puterea relațiilor. Rolul consilierului școlar în parteneriatele școală-familie-comunitate*

Delia Goia - *Power relations versus the power of relationships. The role of the school counsellor in school-family-community partnerships*

### **Trends**

Ioana Panc - *Repere etice pentru consilierii din România. Resurse și provocări*

Ioana Panc - *Ethical guidelines for Romanian counselors. Resources and challenges*

### **Guidelines for authors**

## CUVÂNT ÎNAINTE. UN MANIFEST PENTRU PROFESIUNEA DE CONSILIERE

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Prin acest cuvânt introductiv, cei doi autori din consiliul de conducere al revistei „**Jurnalul Român de Consiliere**”, şi-au propus să aducă argumente pentru necesitatea lansării acestei reviste. În dezvoltarea argumentelor, autorii pleacă de la situaţia profesionalizării consilierii în România, problemă dezbătută relativ timid cu aproximativ doi ani în urmă, în cadrul Asociaţiei Consilierilor Români (ACROM) şi reluată şi în cadrul unei dezbateri organizată în acest an de un grup de lucru.

După cum se ştie din literatura de specialitate, condiţiile pe care trebuie să le îndeplinească ocupaţia de consiliere pentru a fi considerată drept profesie de sine stătătoare au fost deja descrise de către o serie de autori precum Klatt (1967), Glasoff (2005), Capuzzi & Gross (2005) şi alţii. Aceste condiţii fundamentale sunt următoarele: a) existenţa unui corp de cunoştinţe specializat şi a unei cercetări riguroase care să îl sprijine (teorie şi cercetare); b) procesul de acreditare a unei instituţii de învăţământ sau a unui program educaţional – care garantează standarde profesionale pentru programele de pregătire a viitorilor specialişti consilieri; c) existenţa unui cod de etică, cu rol major în procesul de autoreglare în cadrul profesiei; d) existenţa unei asociaţii care să definească şi să promoveze standardele profesionale şi cu rol în cristalizarea şi menţinerea identităţii profesionale a membrilor săi; e) evaluare, care presupune existenţa unor standarde de admitere pentru viitorii practicieni; f) educaţie continuă şi g) auto-reglare, ca proces de sancţionare a elementelor care nu sunt în conformitate cu standardele

de bună practică stipulate în codul de etică și alte documente cu rol de reglementare profesională.

Analizând nivelul de profesionalizare a consilierii în România, constatăm că nu toate condițiile fundamentale descrise mai sus sunt îndeplinite în totalitate, unele necesită încă mult efort din partea comunității profesionale iar alte elemente lipsesc cu desăvârșire. Ca un exemplu, nu există, deocamdată, un plan coerent de creare a unui mecanism de auto-reglare profesională. Pe de altă parte, **condiția referitoare la standardele de admitere sau de recrutare a practicienilor în domeniul consilierii rămâne doar parțial îndeplinită.**

Deși formarea profesională a consilierilor se desfășoară într-un mod organizat prin cursuri de consiliere introduse în curriculumul de licență, la Facultatea de Psihologie și Științele Educației, și prin programe de master de specialitate, iar pentru consilierea și orientarea în carieră, prin cursuri speciale din curriculumul NBCC – International, modul de angajare al consilierilor, mai ales în domeniul școlar, este defectuos. Spre exemplu, conform Legii Învățământului nr. 84/1995 și unui Ordin de ministru din anul 1998, **sunt angajați prin concurs, doar cu examen de licență**, absolvenți de psihologie, pedagogie, psihopedagogie specială, sociologie și asistență socială. Documentele de politică școlară nu fac nici o mențiune la masterul în consiliere școlară, orientare și dezvoltare a carierei ca fiind un criteriu.

Într-o asemenea perspectivă, prin „Jurnalul Român de Consiliere”, vom pune și dezbate asemenea probleme legate de certificarea și licențierea consilierilor, de standardele profesionale cu privire la programele de pregătire, de recrutare și supervizare a consilierilor, precum și din alte domenii de activitate socială. De asemenea, ne propunem să publicăm studii de specialitate de înaltă ținută intelectuală, elaborate de autori români și străini, dar și să valorificăm experiența acumulată de către consilieri în activitatea lor concretă.

În aceeași ordine de idei, precizăm faptul că România face parte dintre țările europene în care **nu există încă standarde de calitate pentru consilierea școlară și profesională.** După cum se știe, în perioada 2003 – 2006, România a participat la **Proiectul MEVOC**, adică Manualul Calității în Consilierea Școlară și Profesională, alături de alte opt țări europene. Scopul acestui proiect a fost dezvoltarea unui manual interactiv, orientat spre practică și menit să-i ajute pe consilierii școlari și

pe cei de carieră în identificarea serviciilor de consiliere de calitate (<http://mevoc.net/RO/htm/fs.htm>).

În urma unei analize comparative a situației consilierii școlare și profesionale din cele 9 țări participante la Proiectul MEVOC (Austria, Marea Britanie, Germania, Italia, Olanda, Polonia, România, Suedia și Ungaria), s-a constatat că **doar Marea Britanie dispunea de un sistem eficient de instituții independente în domeniul consilierii**, sistem în care serviciile de consiliere erau oferite de către consilieri calificați. Celelalte țări participante, inclusiv România, **recunoșteau necesitatea introducerii sistematice a standardelor de calitate în domeniul consilierii școlare și profesionale**. Ca urmare, lupta pentru elaborarea unor standarde de calitate în domeniul consilierii educaționale și al consilierii și orientării în carieră va fi un alt obiectiv urmărit de către revista noastră.

În concluzie, urăm viață lungă și rodnică revistei „Jurnalul Român de Consiliere”, urări de bine și sănătate membrilor Colegiului de redacție și tuturor membrilor Asociației Consilierilor Români (ACROM).

**Foreword. A Manifesto for the Counseling Profession.**

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This introductory message, written by the editors in chief of the „Romanian Journal of Counseling”, is an attempt to justify the necessity of creating such a professional publication. The authors address the situation of the professionalization of the counseling occupation in Romania. There have been a few timid tentatives to approach this issue – two years ago by the Romanian Counselors' Association (ACROM) and this year through a debate organized by NBCC Romania.

There is a significant literature covering the necessary elements for the counseling occupation to be considered a profession per se – among the authors we mention Klatt (1967), Glasoff (2005), Capuzzi & Gross (2005). Such fundamental elements have been defined as being the following: a) a body of knowledge and the research to support it; b) accreditation – as a process to guarantee the quality of an institution or educational program which aims to train future counseling specialists; c) a code of ethics, as a document with a major role in professional self-regulation; d) a professional association with a role in supporting the professional standards and in shaping and maintaining a professional identity for counselors; e) evaluation, as a final experience in a training process, is a mark of preparation for independent practice; f) continuing education and g) self-regulation, as a process of sanctioning any violation of the best practice standards outlined in the code of ethics and other documents/regulations.

When we analyze the situation in Romania, we notice that while some of the necessary conditions mentioned above are fully met, others still need a lot of effort to be shaped and a few do not exist yet. As an example, there is no attempt to create professional self-regulatory mechanisms. On the other hand, the evaluation piece, in relation to a strong set of standards for counselors to be recognized as independent practitioners is still only partially covered.

There are several well structured educational programs for school counselors at the undergraduate and graduate levels, under the umbrella of the Department of Psychology and Science of Education and other departments in various universities. Career counselors have access to special programs promoted by the NBCC International curriculum, either incorporated in masters programs in universities or as independent training. However, the process of recruiting and hiring counselors (especially school counselors) is far from perfect. As an example, according to the Law of Education 84/1995 and a Regulation in 1998, the prerequisite for attaining a position as a counselor is only a bachelor degree in one of the following areas: Psychology, Education, Special Psychopedagogy, Sociology, and Social Work. The laws and regulation do not mention the masters degrees in school counseling and career development as a criteria.

Considering all of the above, our aim with the „Romanian Journal of Counseling” is to analyze and debate the situation of licensure in counseling, the status of the professional standards applied to the existing educational programs, the certification process, and the supervision activities for counselors. In addition, our intention is to publish valuable scholarly articles written by Romanian and foreign authors, as well as papers that reflect the experience of counselors as practitioners.

An important factor to consider is that Romania is among the European countries that do not have quality standards for school and career counseling. It is well known in the counseling community that Romania was part of the MEVOC Project, together with eight other European countries (MEVOC stands for „Quality Manual for Educational and Vocational Counseling”). The goal of this project was to create and develop an interactive handbook of a practical nature, as an online instrument aiming to support school and career counselors to identify qualitative counseling services (<http://mevoc.net/RO/htm/fs.htm>).

The nine countries participating in the project were: Austria, UK, Germany, Italy, The Netherlands, Poland, Romania, Sweden, and Hungary. The conclusion was that only the UK had an efficient and independent institutional system for counseling, where counseling services were delivered by qualified experts (counselors). All the other participating countries, Romania included, admitted the immediate necessity of adopting quality standards for school counseling and vocational/career counseling. As a consequence, our Journal is designed as an instrument in the efforts to create strong standards for school and career counseling.

In the end, we wish a long and fruitful activity for the „Romanian Journal of Counseling”, all the best to the editorial board and to all the members of the Romanian Counselors’ Association (ACROM).



## **Present State and Future Directions of Distance Supervision in Professional Counseling: What Does the Data Tell Us?**

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**Abstract.** *In recent years, the use of online counseling supervision has been incorporated into many counseling programs to meet the needs of student learners, but the empirical evidence surrounding online counseling supervision remains sparse. In the present article, a review of empirical articles focusing on online counseling supervision were identified, their themes discussed, and implications for clinical supervisors and counselor educators presented.*

**Keywords:** Distance Supervision, Counseling, Cyber-Supervision

## **Present State and Future Directions of Distance Supervision in Professional Counseling: What Does the Data Tell Us?**

Supervision of counselors-in-training has long been regarded as a process that is necessary for counselors to grow and develop. Loganbill, Hardy, and Delworth (1982), authors of the first widely regarded article on counseling supervision, describe the supervision process as one in which a person (the supervisor) is responsible for the professional development of another (the

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supervisee). Bernard and Goodyear (2004) provided the most quoted definition of supervision, which they defined as:

*...an intervention provided by a senior member of a profession to a junior member or members of that same profession. This relationship is: evaluative, extends over time and has the simultaneous purposes of enhancing the professional functioning of the more junior person(s), monitoring the quality of professional services offered to the clients that she, he, or they see(s), and serving as a gatekeeper of those who enter a particular profession. (p. 8)*

Borders and Brown (2005) also elaborated on the supervision process, maintaining that an effective supervisor must be “flexible, intentional, and proactive (p. 15)” in order to create the optimal supervision environment and help to promote the growth of counselors in training. Consistent with this research, the Counsel for Accreditation of Counseling and Related Educational Programs (CACREP) currently mandates that students who are enrolled in accredited counseling programs attain at minimum an average of 2.5 hours of supervision each week throughout practicum and 1.5 hours each week in internship (CACREP, 2009). Clearly, supervision has evolved into an integral part of the counseling profession.

While most supervision in counseling programs has traditionally been in a face-to-face format, online supervision is a relatively new supervision modality that is becoming increasingly common in counseling programs and is changing the way counseling supervision is being provided (Abney & Maddux, 2004). Fast internet speeds, access to synchronous video and audio software, widely available chat programs, and a new emphasis on distance education in counseling has given rise to internet-based supervision for students engaged in practicum or internship. However, even though distance supervision is becoming more prevalent, the literature base on distance supervision is scarce (Conn, Roberts, & Powell, 2009). This means that as distance supervision continues to grow, best practices for using distance supervision remain largely undeveloped, unexamined, and untested.

In spite of limited research, the potential benefits of distance supervision are well asserted. Watson (2003), the first researcher to coin the term *cybersupervision*, stated that greater access to qualified supervisors, more productive supervision sessions, and greater use of supervisees’ time could be

potential benefits of utilizing online supervision. Other researchers have also identified potential benefits to online distance supervision, such as: greater access to supervisors for international students and students living in rural areas, increased availability and diversity of supervisors, greater cost-effectiveness for educational institutions, and greater diversity of counseling trainees due to increased accessibility to the supervision process (Bloom & Walz, 2000; Gainor & Constantine, 2002; Oravec, 2000; Van Horn, 2001; Wood, Miller & Hargrove, 2005).

The use of distance supervision is not without potential drawbacks. The technical competence of the supervisor and supervisee, overly expensive equipment, and potential emergency situations are critiques that some researchers have voiced as to why video supervision may be a sub-optimal supervision medium (Perry, 2012; Shaw & Shaw, 2006; Watson, 2003). Kantz, (2001) asserted that because of these and other technological issues, careful attention must be paid to the ethical and legal ramifications of online supervision. A lack of attention to non-verbals has also been cited as a drawback to distance supervision, as some practicum students engaged in both face-to-face and online supervision have reported that they missed seeing body and facial expressions of their supervisor, expressions that are more easily seen while doing supervision in person (Coker et al., 2002). Still, with the advent of emerging online counseling programs, such as those at Walden University, Cappella University, and Wake Forest University, understanding the most effective methods of administering online counseling supervision is a necessary area for further development (Abney & Maddux, 2004; Layne & Hohenshil, 2005).

Layne & Hohenshil, (2005) stated that regardless of the potential setbacks of distance supervision, professional counseling in the United States has grown to the point where distance supervision is a certainty. They assert that the academic conversation has moved away from *if* distance supervision will be a part of the future in counseling, and is instead focusing on *how* to implement distance supervision in our current counseling programs at an optimal level. Still, most research on distance supervision is conceptual, with quantitative and qualitative investigations on the effectiveness of distance supervision difficult to find. The purpose of this article is to add to the sparse literature on distance supervision in counseling by critically examining relevant quantitative and qualitative literature, synthesizing the benefits and criticisms discovered by the researchers, and offering

future directions in this burgeoning field for practicing clinical supervisors and counselor educators.

### **Distance Supervision: What Does the Data Tell Us?**

While the literature base on distance supervision in counseling is largely composed of conceptual pieces, there are a limited number of data-driven articles that provide insight into how distance supervision currently operates in U.S. counselor education programs and offer areas for future improvement. After an exhaustive search through multiple online databases (e.g. worldcat.org, academic search complete, and Google Scholar), the following articles represent the quantitative and qualitative investigations of online counseling supervision that investigate empirical data. The results and limitations of these articles are presented below.

Conn, Roberts, and Powell (2009) conducted a comparison of face-to-face supervision with a hybrid model of supervision (both face-to-face and online video supervision) with 76 master's level counseling students enrolled in their first semester of internship. 41 students selected to take part in the hybrid model of supervision and 36 students selected to be in the face-to-face supervision group, meaning that students opted into or out of the online supervision modality themselves, making it a non-randomized group selection. The hybrid model of supervision utilized both synchronous chat-based and face-to-face techniques, as students in this group met online 10 times throughout the semester and met in person 5 times. The face-to-face group met in person for all 15 supervision meetings. Results indicated that there were no differences in perceived quality of supervision between the two groups. Furthermore, the hybrid supervision group reported greater attitudes toward technology in counselor education following their supervision experience. Although, these results should be interpreted with caution, as there may have been an inherent reason why some students chose the online group over the face-to-face group, which may have skewed the findings.

The researchers concluded there was the potential for technical and interpersonal issues to arise in their hybrid model of supervision. To address the potential for interpersonal problems, the researchers suggest that it is important for the initial meeting between supervisor and supervisees to be held in person,

which allows the supervisor to discuss ethical considerations with the supervisees and promotes bonding among the supervisees. The researchers also suggest that a practice online supervision session should be conducted where the only aim is to identify and correct technology issues. In this way, future online sessions can focus exclusively on supervision issues, and time will not be spent focusing on fixing software problems.

Coker et al. (2001) also compared the effectiveness of traditional face-to-face supervision to an online supervision modality. The researchers investigated how 5 practicum students reacted to using a text-based online program for counseling supervision and if it differed from their reactions to face-to-face supervision. The researchers asked students to respond to an abbreviated version of the Supervisory Working Alliance Inventory (SWAI) to measure the rapport students felt in both online and face-to-face supervision. 14 Likert-scale questions were used to assess students' rapport in both modalities. The same five practicum students engaged in five face-to-face supervision sessions and five online supervision sessions. Results indicated that students did not rate the online supervision sessions as different in quality from the face-to-face supervision, although the power for this comparison was quite low because only 5 students were surveyed. The researchers claimed that this gives preliminary evidence that online supervision may be as effective as face-to-face supervision.

Participants reported two concerns about the online supervision process. First, students commented that the lag time between responses was irritating. This led some students to be critical of the online format, saying that face-to-face supervision was just easier to talk in a typical conversation. Second, the lack of ability to see non-verbal communication was seen as a main deficiency in the online format. Although there was not a statistical difference in students' answers associated with visual cues versus no visual cues, the researchers maintain that this could be an issue with online counseling supervision.

Chapman, Baker, Nassar-McMillan, & Gerler Jr. (2011), like Conn, Robert, and Powell (2009), used a chat-based distance supervision model with five supervisees engaged in 14 supervision sessions. Unlike Conn, Robert, and Powell (2009), Chapman et al. (2011) focused on five supervisees' experiences of distance supervision, tracking each student's self-report each week throughout the 15 week

semester. Chapman et al. (2011) reported that for the first two supervision sessions, students met with the supervisor face-to-face, but for the remaining sessions students met with the supervisor and other supervisees solely through an online format for 1 hour of individual supervision and 2 hours of group supervision weekly. The researchers reported that the supervisor's rating of the supervisees' counseling competence (measured by the Interview Rating Scale (IRS) steadily increased from week 3 to week 14 for all five supervisees, suggesting that the supervisor saw steady improvement throughout the semester. In addition, the supervisees' self-evaluation of self-efficacy (measured through the Counselor Self-Efficacy Scale (CSES)) also increased, although some more dynamically than others. Granted, these results are purely representative of the students who took part in the online supervision and were not compared to a control group (i.e. students involved in typical face-to-face supervision).

Despite the positive outcomes reported by Chapman et al. (2011), there are limitations that the researchers acknowledged in conducting online counseling supervision. First, the primary researcher considered himself well versed in online supervision technology and also felt that his students were well versed in online technology. This means the researcher felt confident in conducting supervision online and that his students were capable of navigating the online landscape as well; though he warns that other supervisors and supervisees who are not tech-savvy may have a more difficult time engaging in online supervision and may even hinder the supervision process. Second, the specific reasons for why the supervisees of this study chose to enroll in online supervision were not obtained. This information would have been helpful to determine if there was a common characteristic (i.e. geographical location, time management, comfort with technology) that made online supervision more appealing to these five supervisees versus traditional face-to-face supervision. Chapman et al. (2011) suggested that future research on online supervision modalities should focus on the reasons students are interested in participating in online supervision to further understand the motivation behind students' participation.

Perry (2012) conducted a study of online supervision that looked specifically at the level of student professional identity development. The sample consisted of nine master's students and seven university supervisors. All university supervision was conducted online and site supervision was conducted using the more

traditional face-to-face modality. Semi-structured, qualitative phone interviews were conducted with the supervisees and supervisors to explore the professional identity development of the students. Following phenomenological research methodology, two investigators assigned meaning to what participants said in interviews and then bracketed the information into groupings. The researchers claim that the results of the interviews suggest that online supervision is an effective modality in terms of developing professional identity in counselors-in-training.

### **Summary**

The empirical literature on distance supervision using technology is insufficient for the role that this growing mode of supervision will have in the future of counselor education and clinical practice. The few quantitative and qualitative studies that have been conducted have provided some limited data to suggest that technology-based or technology-assisted counselor supervision is worth further examination; although there exists limitations in the methodologies used in these studies. Due to these limitations and the dearth of research of the topic, it is still unclear how online supervision can be conducted in the most effective way possible.

Further research needs to address these shortcomings, and should highlight the qualitative, in addition to the quantitative, aspects of distance supervision utilizing technology (Olson, Russell, & White, 2001). The quantitative articles identified above appear to suffer from selection bias (e.g. students were permitted to choose whether they wanted online or face-to-face supervision) (Chapman et al., 2011; Coker et al., 2001; Conn, Roberts, & Powell, 2009), making it difficult to determine if the results are due to the benefits of online supervision or because there exists a difference in students who choose online supervision over face-to-face supervision. If future studies utilize random assignment when selecting which students will belong to which group (e.g. face-to-face versus online), then the results will more likely represent differences, or lack of differences, in each supervision modality. The one qualitative article outline above by Perry (2012) focused primarily on professional identity development of the students involved in online counseling supervision, but did not attempt to uncover *why* students have decided to participate in online supervision. As determined by Chapman et al. (2011) and Conn, Roberts, and Powell (2009), the reasons students choose to

participate in online supervision are vitally important in order to serve the needs of the population that is drawn to this modality. Therefore, future qualitative inquiries focusing on the motivation behind students choosing to enroll in online supervision will help counselor educators and clinical supervisors better understand the unique needs of this group.

In addition to the limitations outlined above, the lack of research directed at online supervision in counselor education is of concern. Online supervision is now a fixture in counselor education (Layne & Hohenshil, 2005), yet there remain very few data-driven research efforts to support best practices of this modality. For online counseling supervision to operate at its most effective level, researchers must test and scrutinize how online supervision is currently being conducted.

### **Future Directions in Distance Supervision**

As online supervision in counseling is becoming a more common practice, conducting more quality research will be vital to the growth and success of the field. Drawing on the limitations presented in the articles above, the current section will identify areas for future research in online counseling supervision.

Conn, Roberts, and Powell (2009) cited in their study that understanding the reasons for why students prefer online counseling supervision would be a helpful avenue to pursue. Although some researchers have anecdotally said that students may want to pursue online supervision due to greater access to qualified supervisors or geographical limitations (Watson, 2003), data-driven reasons for why students choose online supervision have yet to be uncovered. Once qualitative and quantitative analyses reveal the reasons students choose to engage in online supervision, then online supervision programs can better craft their services to fit the needs of their students. Counselor educators may be particularly interested in this area because online supervision is continuing to change the landscape of how counselors are trained and who enrolls in counseling programs (Abney & Maddux, 2004). With more students preferring to enroll in online programs, it will fall on counselor educators to craft their departments to serve this growing population.

Finding ways to increase the technological proficiency of the supervisor and supervisees also appears to be a hurdle that should be addressed in future research. Chapman et al. (2011); Conn, Roberts, and Powell (2009); and Coker et al. (2002) acknowledge that technological issues have the potential to distort the online



supervision relationship. Conn, Roberts, and Powell attempted to fix technology bugs in their online supervision platform by having the first online supervision session devoted entirely to addressing technology issues. Then again, there was no direct evidence to suggest that conducting online supervision in this manner is beneficial or not to the online supervision process. If future research were to focus on best practices for teaching supervisors and supervisees how to work with the online supervision programs and how to fix problems when they arise, it could help to benefit the supervision experience. Perhaps a variety of training methods could be created, tested, and compared against one another so that the most effective techniques for training could be dispersed amongst the online counselor education community. Without proper training, supervisors and supervisees alike run the risk of encountering technological issues that could derail a supervision session. This could be of particular significance for clinical supervisors as maintaining a proper working relationship in supervision is thought of as the task of the supervisor (Bernard & Goodyear, 2004). This means that navigating the technological landscape of online supervision will likely be the task of the supervisor leading the session, and will therefore be their responsibility to address.

Another major issue that will need to be addressed as online supervision continues to grow is having ethical guidelines that specifically address the unique issues that arise with the combination of technology and supervision (Morrissette & Gadbois, 2006; Vaccaro & Lambie, 2007). Conn, Roberts, and Powell (2009) attempted to address ethical considerations by meeting with supervisees face to face prior to beginning online supervision to talk about ethical issues, but there is no guarantee that this process is enough to address all ethical issues that may arise. Issues such as informed consent, confidentiality, and emergency contact procedures, all need to be addressed within the context of online supervision to ensure the safety of clients (Kanz, 2001). Having ethical guidelines for online supervision on the national level would aid in creating procedural standards for individual counselor education programs or supervisors to follow. Since these standards are not currently in place on the national level in the United States, it is up to educational programs and clinical supervisors to create their own set of policies and procedures. Both counselor educators and clinical supervisors would benefit greatly from evaluating which policies are most effective at addressing ethical considerations in online supervision.

Finally, while some studies prefer to look at how online compares to face-to-face supervision (Conn, Robert, and Powell, 2009; Coker et al., 2002), other researchers assert that focusing on this sort of comparative research does little to improve online supervision. Perry (2012) chose instead to focus in-depth about the experiences of supervisees engaged in online supervision by utilizing qualitative interviews, finding that this form of supervision was effective in improving students' professional identity. Chapman et al. (2009) had similar results, finding that students' self-efficacy and competence rose steadily from week to week while he/she was engaged in online supervision. In both of these instances, students improved throughout the online supervision process, but the limited methodology of the study provides no data on the effectiveness of this strategy compared to face-to-face supervision. Chapman et al. comment on this at the conclusion of their article, stating "Engaging in research investigations that compare the traditional FtF (face-to-face) and cybersupervision approaches for the purpose of establishing superiority of one over the other does not seem to be a worthwhile endeavor presently because there seems to be no need to eliminate one to promote the other. We believe our profession will be served better by being open to the merits of both counseling supervision approaches in the immediate future (p. 312)". According to Chapman et al., pitting face-to-face and online supervision against one another via research comparing the two styles does little to improve either modality. Future research could instead look in-depth into online supervision strategies to find their strengths and weaknesses (e.g. what is the most effective method of implementing a cybersupervision program?), which may spark further discussion and improvements. It is by focusing on how to improve online supervision that counselor educators and clinical supervisors can continue to help foster the positive development of this modality.

### **Conclusion**

In the current literature base on cybersupervision in counseling, there are limitations that should be addressed in future research. First, current research articles contain methodological problems that limit their results. Current quantitative research does not seem to utilize randomized sampling methods, leaving readers wondering if the results are indications of the benefits of online supervision or if they are skewed because of the sample that is being surveyed. The lack of qualitative investigations in this paradigm is also troublesome, as the

reasons why counseling students may prefer online supervision have yet to be examined.

A second issue in the online supervision literature is the dearth of empirical research on the subject. Understanding why students may choose online supervision over face-to-face supervision, the best ways to train both supervisors and students to engage in online supervision, the most effective methods for implementing online supervision programs, and how to address ethical situations in online supervision environments are just a few questions that remain unexamined and unanswered. Researchers would be wise to address these questions in the future if online counseling supervision is to grow to its full potential.

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## Toward an Understanding of Relational-Cultural Theory

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**Abstract** *The emergence of Relational-Cultural Theory (RCT) can be traced to the 1976 publication of Jean Baker Miller's Toward a New Psychology of Women (Miller, 1986a). In this overview, RCT is examined within the context of its development. Its primary assertions, constructs, hypotheses, and objectives are identified and deconstructed. A brief review of the RCT literature describes thirty years of thoughtful, insular conceptual development and a still-developing empirical literature, with new treatment models and measurement tools currently under examination by researchers. Finally, several possible critiques of the theory are addressed.*

**Keywords:** Relational- Cultural Theory

The emergence of Relational-Cultural Theory (RCT) can be traced to the 1976 publication of Jean Baker Miller's *Toward a New Psychology of Women* (Miller, 1986a). Though she and her colleagues would eventually challenge the very tenets of the existing understanding of human development and mental health, Miller's education and career speak to her success within the establishment even as she was challenging it. She earned her B.A. at Sarah Lawrence College and her M.D. at

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Columbia University, and was a Clinical Professor of Psychiatry at the School of Medicine, Boston University. A practicing psychiatrist and psychoanalyst, Miller was a trustee of the American Academy of Psychoanalysis and the American Orthopsychiatric Association. She was appointed the first director of the Stone Center for Developmental Studies and Services at Wellesley College, which became the intellectual home of RCT (Miller, 1986b). She served there until her death in 2006 (Jordan, 2008).

In this overview, RCT will be examined within the context of its development. Its primary assertions, constructs, hypotheses, and objectives will be identified and deconstructed. A brief review of the RCT literature will describe over thirty years of thoughtful, insular conceptual development and a still-developing empirical literature, with new treatment models and measurement tools currently under examination. Finally, several possible critiques of the theory will be addressed.

### **Feminism and Friendship in Boston: The Context of RCT's Development**

Within a five-mile radius near Boston in the mid-1970s, three important psychological developments were afoot (Robb, 2006). Therapists Judith Lewis Herman and Lisa Hirschman were, based upon their clients' stories, beginning to challenge the accepted assertion that incest occurred in one case in a million. Researcher Carol Gilligan was beginning to formulate her ground-breaking hypotheses about the moral development of girls and women. And psychiatrist Jean Baker Miller was beginning to explore the idea "that what male psychologists had labeled women's weaknesses—hypersensitivity, merging, dependency needs—could be seen as strengths: authenticity, empathy, a drive to connect, and the skills to stay connected" (Robb, 2006, p. x). This exploration would form the content of the first edition of Miller's *Toward a New Psychology of Women*, published in 1976 (Miller, 1986a). Miller (1986a), Gilligan (1982), and other feminist theorists of the time were challenging their own training with the suggestion that traditional models of therapy and human development were incorrect in their focus on individuation and autonomy as the hallmarks of healthy adult development. Miller argued that the dominant group (that is, white males) will always become the model for normal human development and relationships, and that any questioning of the "normal" situation by subordinates "will be perceived with alarm" (Miller, 1986a, p. 9). Drawing upon her psychoanalytic expertise, Miller

directly challenged Freud's assertion that women have a less-developed super-ego by declaring, "Women have no ego or super-ego at all as these terms are used now. They do not have the right or the requirement to be full-fledged representatives of the culture. Nor have they been granted the right to act and to judge their own actions. Both of these rights seem essential to the development of ego and super-ego as they are defined" (Miller, 1986a, p. 73). Marx (1963) in "The General Nature of Theory Construction" warns against the establishment of theories with insufficient empirical support, and states that the longer such theories go unchallenged, the more likely they are to remain forever part of the accepted knowledge base. Though RCT's still-developing empirical base will be highlighted later, Miller's astute suggestion that the very foundation of traditional psychoanalytic theory did not apply to women because of women's less-than status in society at large—rather than because of inherent female deficiency—was revolutionary. By challenging the "squatters rights" (Marx, 1963, p. 21) of white European males in general and Freud in particular in terms of psychological theory, Miller's *Toward a New Psychology of Women* can be viewed as a feminist therapy manifesto.

**Theory development through relationship and observation.** Miller, along with psychologists Irene Stiver, Judith Jordan, Alexandra Kaplan, and Janet Surrey, explored their perceptions of psychology's misrepresentation of the female experience in bi-weekly meetings held at Miller's home (West, 2005). These women had all been among only a handful of females during their respective experiences in graduate school, and all were active in the second-wave feminist movement that had begun in the late 1960s (Robb, 2006). The assumptions and directives of that movement—the need to re-examine the power structures of society, to give voice and value to the everyday happenings in women's lives, to question the patriarchal establishment's messages about what it means to be female—were inherent in the group's exploration. They discussed cases and interactions with colleagues from their various clinical jobs. Stiver said that in the beginning, "all we did was talk cases and ask, 'Do the current theories help us understand women?'" (Robb, 2006, p. 145). They sought to answer questions that were not addressed in the traditional scholarship, hypothesizing about how healthy women got that way, despite societal power structures that clearly did not operate in their favor. The "Monday Night Group" eventually found an institutional base at

the Stone Center of Wellesley College, but remained committed to their group (that is, relational) method of inquiry (Robb, 2006). These mental health professionals closely examined the experiences of their clients while grappling with their own experiences as women, as clinicians, and as scholars. Eventually, a new theory of psychology and human development began to take shape. This new theory suggested that development over the lifespan is marked by relationships rather than by individuation (Miller & Stiver, 1997). The founding theorists posited the following: people grow by having increasingly complex and authentic relationships over the lifespan, and every person yearns to be in mutually empathetic relationship with others. Skills to move through normal periods of disconnection in relationships produce stronger and more satisfying bonds, and such relationships promote a sense of well-being. Power dynamics within society and families impact all interactions (Jordan, 2008; Miller & Stiver, 1997).

Marx (1963) defines the three basic elements of theory construction as 1) hypotheses, 2) constructs, and 3) observations, and places these constructs on continua of testability, operational specificity, and control, respectively. RCT falls on the lower (or left) end of all three continua: its characteristics are more within the intuitive, meaning-laden, casually observational realm of practical affairs than the rigorous, empirical, experimental realm of hard science (or right end of the continua). The creators of RCT were, however, attempting to create something completely new, and “scientific progress is marked by a progressive shift from left to right” (Marx, 1963, p. 11). Like the Freudian theory they were rejecting, this new theory was born of loosely deductive construction (Marx, 1963). The founders created a conceptual framework, explored their “data” (that is, their own experiences and those of their clients) through the lens of this framework, and made modifications and improvements to their constructs. The general psychological literature is rich with research suggesting the importance of relationships in psychological functioning, and there is a growing body of research specifically exploring the impact of relational constructs as defined by RCT (Frey, 2013). The development of assessments that operationalize RCT constructs and allow for the testing of its hypotheses suggest that the “new psychology” envisioned by Baker and her colleagues is making progress along all three of the continua defined by Marx (1963). Though RCT may not have fully infiltrated the mainstream psychological lexicon, there is a growing body of literature suggesting its conceptual and clinical utility.



**Geographic spread.** Since its emergence in the late 1970s, RCT (sometimes referred to as “self-in-relation” theory or the “relational” model of psychotherapy) has remained rooted at the Wellesley Centers for Women, now home to the Jean Baker Miller Training Institute (<http://www.jbmti.org>). Wellesley College is a highly competitive, elite women’s undergraduate institution located in Wellesley, Massachusetts, about twelve miles outside Boston (<http://www.wellesley.edu>). The Jean Baker Miller Institute offers trainings, workshops, home-study courses, and a complete catalogue of the in-house literature on RCT. Awareness of the theory extends far beyond those persons trained directly by the organization. The faculty of the Jean Baker Miller Training Institute includes faculty members from various institutions, including Harvard Business School and Harvard University School of Medicine. Students from around the world have been taught by RCT scholars over the last thirty years, including participants and supporters representing forty countries. RCT is increasingly a subject of inquiry for academics in a variety of helping professions, including psychology, counseling, social work, and nursing (e.g., Frey, 2013; Oakley et al., 2013; West, 2005), and as such new generations of students in these fields may be exposed to RCT as part of their standard university training.

### **Toward a New Theory: Component Parts of RCT**

**Core assumptions of RCT.** Unlike traditional theories of development and human functioning (Freud, 1946; Piaget, 1950; Erikson, 1959; Kohlberg, 1969 as cited in Craig & Dunn, 2007), RCT does not delineate specific stages through which an individual progresses in order to achieve sexual, cognitive, psychosocial, or moral maturity. Rather, RCT operates under the assumption that an increase in a person’s capacity for satisfying relationships with others is the super-objective of human existence. “We suggest that we all need relationships throughout the lifespan and that it is through building good connections that we achieve a sense of well-being and safety” (Jordan, 2008, p. 2). Jordan (2000) summarizes the principles (or assumptions) of RCT as follows:

1. People grow through and toward relationship throughout the lifespan.
2. Movement towards mutuality rather than movement towards separation characterize mature functioning.
3. Relationship-differentiation and elaboration characterize growth.

4. Mutual empathy and mutual empowerment are at the core of growth-fostering relationships.
5. Authenticity is necessary for real engagement and full participation in growth-fostering relationships.
6. In growth-fostering relationships, all people contribute and grow or benefit; development is not a one-way street.
7. One of the goals of development from a relational perspective includes the development of increased relational competence and capacities over the life-span. (p. 1007)

Robb (2006), speaking about Miller and colleagues states: “They explored a psychological and physical state that is completely connected: you can only swim in water; you can only move people and be moved in relationships, and we are all, always in relationships” (p. 178). Belief in this relational premise is the keystone of the theory, without which its constructs, hypotheses, and processes collapse.

**Language and basic constructs of RCT.** According to West (2005), RCT must “struggle with finding ways to express an experience that heretofore has not had any language for its expression” (p. 101). This assertion may be the modernist correspondence theory of language, that language is important because it mirrors the world it describes (Hansen, 2006). The language chosen to describe the constructs of the theory is far from unique, e.g., *connection, disconnection, empathy, good things*. The originators of RCT intentionally chose ordinary language in response to their perception that psychological language is often confusing and distancing (Miller & Stiver, 1997). While the concepts themselves are sufficiently complex, one does not need to acquire a new vocabulary to discuss the constructs of RCT. According to Marx (1963), “constructs are seen as the major substantive units of which theories are composed” and “meaning needs to be inferred” from the terms used to name such units (p. 10). The following are some of the most important constructs comprising the foundation of RCT, along with their meanings detailed by the theorists themselves, as cited in “Evolving Concepts in Relational-Cultural Theory” (Hartling, Littlefield, & Miller, 2008):

- *Relationship*: “a set of interactions that occur over a length of time...it may be composed of connections and disconnections, usually a mixture of both” (Miller, 1982, p. 6)

- *Connection*: “an interaction between two or more people that is mutually empathetic and mutually empowering” (Miller & Stiver, 1997, p. 26); “being in connection means being emotionally accessible” (Miller & Stiver, 1991, 3)
- *Disconnection*: “an encounter that works against mutual empathy and mutual empowerment” (Miller & Stiver, 1997, p. 26); disconnection or rupture occurs if there has been “hurt, disappointment, danger or violation, and people often feel that the problem is all in them, rather than within the relationship” (Miller & Stiver, 1992, p. 2). Disconnections are a normal part of relationships: “Adults and children can withstand and even grow from these” (Miller, 1988, p. 5).
- *Mutual empathy*: “A joining together based on the authentic thoughts and feelings of all participants in the relationship...because each person can receive and then respond to the feelings and thoughts of the other, each is able to enlarge both her own feelings *and* the feelings and thoughts of the other person” (Miller & Stiver, 1997, p. 29).
- *Relational images (RIs)*: “The key inner concepts we use to order our experience...they determine our expectations about what will happen in our relationships, and they then guide our actions. They are the inner pictures we devise of what’s happened to us...they become the framework by which we determine who we are, what we can do, how worthwhile we are” (Miller & Stiver, 1995, p. 2). RIs can be described as constructivist concept—that is, they represent a reality created by an individual (Hansen, 2004).
- *Controlling images (CIs)*: A concept introduced by Patricia Hill Collins in her book, *Black Feminist Thought* (2000), these are the labels placed by society on any marginalized group. “They exert a powerful impact on how we can act and how we construct relationships. Consequently, CIs create the framework within which people make the kinds of relationships that go into the construction of RIs” (Miller, 2008). CIs can be described as a social constructionist concept, since they represent meaning assigned by a group (Hansen, 2004).

***Hypotheses: “Five Good Things” and the “Central Relational Paradox.”***

Relational-cultural theorists utilized their own basic constructs to make predictions about what happens to people in relationships—an insulated approach, but one that produces internally consistent hypotheses, thereby increasing the overall

believability of the theory. Miller (1986a) defined *five good things* that are produced by the mutual empowerment of growth-fostering relationships—that is, the experience of being in connection. The *five good things* are:

- 1) A sense of zest or well-being that come from connecting with another person(s)
- 2) An increased ability and motivation to take action in the relationship as well as in other situations
- 3) Increased knowledge of oneself and the other person(s) and the relationship
- 4) An increased sense of worth
- 5) A desire for more connection beyond the particular one (Miller, 1988; Miller & Stiver, 1997)

When an individual experiences the *five good things*, he or she becomes a more energetic and authentic actor in the world, convinced of his or her intrinsic value as a person and ability to promote well-being in relationships and in the broader community. Disconnections result in the opposite of the five good things (Miller, 1988; Miller & Stiver, 1997).

Of particular import in any psychotherapeutic theory is the hypothesis concerning what is happening when people fail to feel happy, successful, and content in their lives. In RCT, this is represented by the *central relational paradox*:

In the face of repeated experiences with disconnection, we believe people yearn even more for relationships to help with the confused mixture of painful feelings. However, they also become so afraid of engaging with others about their experience that they keep important parts of themselves out of relationship, i.e., they develop strategies for staying out of connection...Thus we see the central problem as the paradox that in our deep desire to make connection, we keep parts of ourselves out of connection. (Miller & Stiver, 1991, p. 2)

Therefore, when a person has had multiple experiences of being hurt by unresolved disconnection (also referred to as *impasses*), he or she becomes convinced that relationships are not safe, and despite an ever-increasing desire for connection, he or she will employ *strategies of disconnection (SDs)* (Miller & Stiver,

1997). These strategies can be viewed as survival mechanisms, and are unconsciously formed in an effort to prevent further emotional wounding. In their most extreme forms, strategies of disconnection can produce the state of *condemned isolation* (Miller, 1988). Condemned isolation is the shame-based feeling that, because of personal faults that one is powerless to change, true connection with another person is impossible.

**Experience and objectives of therapy.** RCT posits that the experience of a growth-fostering relationship between therapist and client can allow both parties to understand the controlling images, relational images, and strategies for disconnection that are at work within the client (Miller, 2008). The view is fundamentally constructivist as defined by Kenny (1997), cited in Wilks (2003): “people are doing their best—the only thing they can do” (p. 280), especially in the face of powerful societal CIs and personal RIs. The therapist honors the client’s strategies for disconnection, helping the client understand that such strategies are usually formed out of true pain and fear, and imparts to the client that such strategies are not shameful. Through this mutually empathetic relationship, the client experiences the five good things, and is thus more able to seek growth-fostering relationships with others. “As a person brings more of the truth of her experience into the relationship, she finds she has become both a stronger, more developed person and also more connected to the therapist and eventually to others in her life. That is, she discovers the reversal of the *central relational paradox*” (Miller, 2008, p. 114).

### **RCT Literature**

*Work in Progress.* *Works in Progress*, formerly known as the *Stone Center Working Paper Series*, is a publication series representing original scholarship based on the work of Jean Baker Miller and her colleagues (Hartling, Ly, Nassery, & Califa, 2003). Operating upon the principle that ideas should be exchanged while they are being developed, these papers made the early discussion of RCT’s founding scholars available to the public. The series has now been in existence for over 30 years, and there are over 100 *Works in Progress* to date. These papers—some of which are intended to stimulate discussion, and others of which are completed research reports—comprise the foundation of the formal theoretical writing on RCT.

One *Work in Progress*, “Relational References: A Selected Bibliography of Research, Theory, and Applications (2<sup>nd</sup> Edition),” lists over 650 pieces of

scholarship related to RCT (Hartling et al, 2003). Works in Progress, books, journal articles, recordings of lectures, and many unpublished theses and dissertations are included. The writings are divided by the following categories: development, relational development; diversity; educational settings; family, adolescents, children; gender, men, couples; health care, caregiving; lesbian issues; literature, art, creativity; midlife, older development; power, workplace issues; shame, anger, depression; spirituality; substance abuse, addictions, eating disorders; therapeutic applications; and trauma, violence, sexual abuse (Hartling et al, 2003). This bibliography demonstrates that RCT is being utilized in an impressive breadth of social science inquiries.

**Examples of RCT in Peer-Reviewed Journal Articles.** The Stone Center writings introduced the ideas of RCT and allowed for their development in a public forum. In much the same way, conceptual journal articles introduce the readership of specific journals to RCT, spreading awareness of the theory and laying the foundation for specialty-specific research. Such articles include works by founding scholars (e.g., Miller, 1984; Jordan, 1992; Jordan, 1993; Jordan, 1995a) and others (e.g., Comstock, Duffey, & St. George, 2002; Comstock, Hammer, Strentzsch, Cannon, Parsons, & Salazar, 2008; Freedberg, 2007; Frey, 2013; Hammer, Trepal, & Speedlin, 2014; Tantillo, 1998; Trepal, 2010). The writings of Comstock et al include clear summaries of the theory and its possible application as a framework for group process (2002) and means by which to increase multicultural/social justice counseling competence (2008). Frey's (2013) article provides a current and particularly lucid overview of the theory itself, including its development, its use in practice, and research supporting its tenets and examining its effectiveness. The author also explores the use of RCT in counselor training, including the development of therapeutic relationship-building competencies.

It should be noted that purely conceptual writings run the risk of making unsubstantiated conclusions (Marx, 1963). For example, Portman and Garrett (2005) explored the relationship between RCT and ancient American Indian traditions of nurturing leadership in women. The authors' call for relationally-oriented mentoring of women in counseling, along with suggestions for increasing relationally-oriented collectivism in the academy, are compelling. There are, however, unfounded leaps in the conclusion of this conceptual article: "Mentors must be taught the principles of relational-cultural theory in order to be able to nurture leadership skills in women appropriately" (p. 290). While this statement

can be interpreted as a hypothesis—“any conjecture or surmise that states a relationship between variables” (Marx, 1963, p. 7)—the use of the word “must” in a theory-oriented hypothesis that is not easily testable will give the discerning reader pause. Hammer, Trepal, and Speedlin (2014) take a more measured approach with the same topic—the mentorship of female faculty—offering five relational mentoring strategies that are conceptually consistent with the theory without overstating their position.

*Development of treatment models.* Conceptual articles suggesting the utility of RCT with disorder-specific populations have also appeared in the literature, including applications of the theory to young adolescent clients in middle school settings (Tucker, Smith-Adcock, & Trepal, 2011), Latina immigrants (Ruiz, 2012), clients who engage in self-harming behaviors (Trepal, 2010), and clients with eating disorders (Trepal, Boie, & Kress, 2012). Such theoretical explorations are a necessary step in the development outcome data-supported treatment models. RCT is being utilized in the development of treatment models to combat post-partum depression, eating disorders, and trauma. For example, qualitative researchers (Paris & Dubus, 2005) used RCT as an applied framework to interpret their data on fifteen at-risk new mothers, highlighting the disconnection and isolation the women experienced during their transition into motherhood. While this research is still in its early stages, the authors make suggestions regarding the provision of relational support services to new mothers as a means by which to combat post-partum depression.

Tantillo (2006) cites Gilligan (1982), Miller & Stiver (1997), and her own research (2000, 2003, 2004) in her article suggesting a “RCT-informed PMFTG [Psychoeducational Multifamily Therapy Group] model for the treatment of eating disorders” (p. 83). Her model, called the U-MFTG (Unity Multifamily Therapy Group), builds upon the MacFarlane PMFTG model (2002) by assuming that RCT’s gender-informed approach and focus on mutuality in relationships can improve outcomes. Data collection is underway regarding outcomes of the model, and the author suggests that future randomized, controlled studies could demonstrate U-MFTG’s short-term effectiveness and long-term abstinence rates when compared to PMFTG, cognitive-behavioral, and solution-focused models (Tantillo, 2006).

Birrell (a clinician specializing in treating trauma) and Freyd (a researcher on the cognitive and emotional effects of trauma) propose a relational model of trauma healing (2006). As cited in Birrell and Freyd (2006), Freyd, Klest, and Allard

(2005) have found that relational traumas—trauma events that occur in the context of an ongoing relationship, and which involve the betrayal of important bonds, such as incest, spousal battering, or psychological abuse, are more highly correlated with symptoms of depression, anxiety, and other symptoms of emotional distress than are non-relational traumas...Despite the extensive and profound effects of this problem, we have lacked adequate theory to account for the etiology and consequences of trauma at a societal level, and our lack of theoretical understanding has hampered our ability to stop offenders and to help victims...Although oppression is often institutionalized at societal levels, it is necessarily enacted in the context of interpersonal relationships. Thus, oppression fits within a relational/betrayal model of trauma. (pp. 51-51)

Birrell and Freyd (2006) propose healing through listening, mutuality, and compassion—a contrast to standard treatments that focus on symptom reduction. Furthermore, they assert that “Our research needs to move in the direction of studying relationships in addition to individual suffering, and be willing to examine the context that surrounds the individual pathologizing that we do” (p. 61).

Canadian researchers (Oakley et al., 2013) tested the efficacy of a brief, manualized, RCT-based model in a community mental health center for women. Oakley and colleagues employed a hybrid design that utilized elements of naturalistic and randomized control trial research, including a minimal intervention wait-list control group. Therapists highly trained in brief relational-cultural therapy (BRCT) worked with female clients who had a variety of presenting concerns for 16 sessions. A combined two-cohort sample showed significant improvement on outcome measures assessing depression, anxiety (state and trait), self-esteem, self-silencing, self-acceptance, autonomy, and alexithymia, with effect sizes similar to other efficacious therapy approaches.

*Instruments examining RCT constructs.* RCT researchers have developed several psychometrically sound assessments that aim to measure psychological constructs as defined by the theory (Genero, Miller, Surry, & Baldwin, 1992; Hartling & Luchetta, 1999; Liang et al., 2002; Tantillo & Sanftner, 2010). The Humiliation Inventory (HI) by Hartling and Luchetta (1999) examines the internal experience of humiliation in the relational-cultural terms of pervasive disconnection. The Mutual Psychological Development Questionnaire (MPDQ) was developed and validated to measure perceived mutuality in friendships and with romantic partners (Genero et al., 1992).



More recently, Liang, Tracy, Taylor, Williams, Jordan, and Miller (2002) developed the Relational Health Indices (RHI), an instrument that measures community, mentor, and peer relationships. The 37-item questionnaire examines growth-fostering relationships in terms of engagement, authenticity, and empowerment/zest. The community, mentor, and peer subscales were confirmed using factor analysis (Frey et al., 2005; Liang et al., 2002). The instrument's psychometric properties were initially studied using a group of 450 students at a women's liberal arts college (Liang et al., 2002), and the structure was later confirmed for both college men and women (Frey et al., 2005).

The Connection-Disconnection Scale (CDS) (Sanfter & Tantillo, 2010; Tantillo & Sanfter, 2010) was developed to assess the level of perceived mutuality in close relationships. Building upon the MPDQ and RHI, this instrument uses vignettes to examine relationship quality with mothers, fathers, friends, and romantic partners in the context of a difficult (or disconnecting) interaction. The scale was first validated on two samples of women with eating disorders (Tantillo & Sanfter, 2010), and further validated on two non-clinical samples of college women. Construct (or convergent) validity was strong, though the scale assessing mutuality in a friend relationship was weaker than the other three scales.

### **Critiques of Relational-Cultural Theory**

**Lack of acknowledgment of previous theories/theorists.** The founding relational-cultural theorists acknowledge fellow feminists in their writings, and feminist assumptions regarding women's plight in society are integrated throughout the theory (Robb, 2006). Patricia Hill Collins' (2000) concept of "controlling images" has become a core construct of the theory, providing "a valuable link between the social and the psychological" (Miller, 2008, p. 111). bell hooks' (1989) rhetoric about the dangers and importance of resisting the dominant paradigm informs RCT's exploration of standing for relational values in an individualistic society (Jordan, 1997). Miller and Stiver (1997) state that, "For a long time now Carol Gilligan's work has played a special part in our endeavors" (p. x), paying tribute to Gilligan's groundbreaking studies in the realm of women's moral development (Gilligan, 1982).

It could be argued, however, that relational concepts that are thematically connected to the work of male theorists are not described as such, perhaps suggesting through omission that RCT is a complete departure from the patriarchal

psychology of the past. For example, Rogers (1957) theorized that empathy, acceptance, and genuineness were the conditions necessary for therapeutic change, but his name is absent from the definitions of *empathy*, *mutual empathy*, and *authenticity* listed in “Evolving Concepts in Relational-Cultural Theory” (Hartling, Littlefield, & Miller, 2008). Miller and Stiver (1997) describe *relational images* as inner psychological constructions that people use to predict what will happen in relationships and to define what these experiences mean to them. When these beliefs are self-condemning and rigid, relationships (and psychological well-being) are negatively impacted; this construct seems related to both Ellis’s (1962) *irrational beliefs* that produce negative consequences to activating events and Beck’s (1967) *cognitive distortions*, which are systematic errors in reasoning leading to psychological distress. Similarly, RCT’s *strategies of disconnection* (Miller & Stiver, 1997) echo Freud’s *defense mechanisms* (Freud, 1946 as cited in Craig & Dunn, 2007) in their unconscious purpose to protect. Though RCT may de-emphasize the influence of such historically significant psychological constructs in its own development, it is also important to note that cross-pollination between schools of psychotherapy is commonplace. Furthermore, RCT was in its inception and remains a feminist approach (Frey, 2013). As such, a distancing from earlier work in a male-dominated field is congruent with its tenets.

**Modernist critiques.** Modernism is based in Enlightenment philosophy and a belief in a definable truth that can be discerned through objective observation (Hansen, 2002). It is possible to interpret some early relational theoretical writing as suggesting that “a new psychology of women” (Miller, 1986a) had been discovered, and that constructs such as the *five good things* and *central relational paradox* (Miller, 1988; Miller & Stiver, 1997) are facts or truths that were being revealed by the theorists. The modernistic principle of parsimony presents a challenge to such assertions. According to Marx (1963), “The principle of parsimony helps to prevent the establishment of theories with insufficient empirical support” (p. 21). True parsimony can be hard to achieve in the social sciences due to the difficulty of operationalization. Simply put, the basic constructs of the theory (e.g., mutual empathy, connection, disconnection) are not easily empirically validated. For example, the five good things (Miller, 1988; Miller & Stiver, 1997) are defined as the outcomes of growth-fostering relationships, but they were not identified through accepted modernist research methods. There may well be “five good things,” but modernism would demand that they be uncovered through systematic

qualitative research utilizing coding schemes, with both the research methodology and subsequent results evaluated through peer-review. The hypotheses of RCT are not “clearly disconfirmable—that is...[not] precise enough so that not all possible outcomes can be incorporated within [their] framework” (Marx, 1963, p. 12). This modernistic shortcoming, like the loosely deductive method of theory formation mentioned previously, is one that RCT shares with psychoanalytic theory, along with many others (Marx, 1963). As detailed in previous sections, increasingly empirically robust investigations of RCT as a theory and as a clinical approach serve to address this critique over time.

**Postmodernist critiques.** West (2005) derides the dominant patriarchal paradigm’s demand for empiricism, challenging the notion that the scientific method is the sole path to truth. This rejection of modernist values is salient here, especially given the parallel between post-modernism’s concern with advancing multidimensional conceptions of individuals and societies (Rigazio-DiGilio, 2001) and RCT’s concern with upending the dominant cultural paradigm (West, 2005). However, despite RCT’s identification with post-modernism’s rejection of a modernist “truth” and concerns regarding societal inequities, post-modern critiques can be waged against the theory. The founding RCT theorists rejected the “truths” of their training after determining that they were sexist, objectifying, and not representative of the experiences of women of and other marginalized groups (Robb, 2006). The Monday Night Group meetings at Jean Baker Miller’s home might be described as social constructionism in action (Hansen, 2004), with group members rejecting the reality created by one group (i.e., the medical establishment, a sexist society) in favor of creating their own reality. Social constructionists argue that “scientific communities, like all social groups, operate within particular systems of meaning, language, and values that shape and determine their perceptions” (Hansen, 2004, p. 134). The same could be said of the second-wave feminist community around Boston, of which all the founders of RCT were members, and later of the communities of women at the Stone Center and the Jean Baker Miller Training Institute (Robb, 2006). The implication that RCT represents previously ignored or undiscovered truths about the experiences of Western women (Robb, 2006), or that a relational focus in psychology “changes everything” (p. xiii), is somewhat less potent when considered from the post-modern vantage that “truths are created, not discovered” (Hansen, 2004, p. 131). That which was true for the Monday Night Group may not be true for all women.

However, as the theory has developed over time, it has shown itself to be flexible and open to new influences. Its focus on egalitarianism and deep empathy for each individual's truth seem to answer these possible postmodern concerns and place RCT in alignment with postmodern principles.

#### Conclusion

The notion that relationships are at the heart of human happiness and of human suffering is both intuitive and pervasive, and RCT provides a lens through which to more closely and systematically examine this hypothesis. The preceding sections detailed the contextual development of RCT, examined its component parts, briefly reviewed the scholarly literature specific to the theory, and suggested some possible criticisms. RCT was developed relationally. The mutually empathetic and empowering relationships that the founders had with one another produced a viable, internally consistent theory based upon their shared beliefs and experiences. Strengthened by their bond, they broke with tradition and attempted to create a new framework for understanding women's mental health. They each experienced the five good things and wanted to share them with the world (Robb, 2006). Ongoing practice, conceptual writing, and research has served to more clearly define the constructs of the theory and offer support for its hypotheses. Continued emphasis on well-designed qualitative and quantitative investigations of RCT will mitigate modernist critiques of the theory, while on-going integration of new findings and ideas demonstrate its postmodern flexibility.

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## **Dispositional Assessment in Counselor Education: Initial and Continuing Instrument Development**

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**Abstract:** *The concept of dispositions related to the selection and training of educational professional has become increasingly important to universities and their faculties as accreditation agencies like National Council for Accreditation of Teacher Education (NCATE), have adopted the term. While there have been numerous attempts to assess dispositions in many fields of education, the field of counselor education has only recently begun to address the assessment of dispositions. Within the field of Counselor Education candidates are commonly assessed both formally and informally for their suitability to achieve and perform within the field. Additionally, capstone or final examinations are used to assess cognitive achievement within the required areas of study prior to graduation. This paper outlines the development of the Dispositional Assessment in Counselor Education (DACE), a 30 item, self-report instrument designed to assess five factors associated with effective counselors. Initial testing of this instrument was conducted on a sample of 92 subjects. The sample included 52 graduate students majoring in counseling and 40 graduate student majors from the field of education. Results obtained from this sample indicated that the instrument had acceptable reliability with a Cronbach's alpha of .85 and analysis of group means indicated highly significant differences between groups ( $p < .000$ ) in total score and in four of the five factors. Factor analysis suggests a possible reduction in the number of items to 21 with a four-factor structure. Currently the DACE is being evaluated*

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with a larger sample ( $n=284$ ) to further define the psychometric qualities of the instrument. Results of these investigations are discussed along with implications for future study and use of the instrument in the United States of America (U.S.) and in Europe.

**Key words:** *counselor dispositions, assessment of dispositions, counselor education, Dispositional Assessment in Counselor Education*

Two fundamental components of the process of counselor education have been the initial selection of students from program applicants and the continuing assessment of students as they progress through a course of study. The focus of both aspects has typically been on the achievement or mastery of content. For initial assessment the over-riding concern was whether the applicant possessed the necessary academic skills and aptitude for success in the chosen field. To this end colleges and universities adopted policies and procedures designed to select “qualified” candidates from the applicants by use of examinations, interviews, and review of prior academic work. Applicants were frequently required to submit letters of recommendation from referees which amounted to testimonials of a candidate’s fitness for study. In regard to the second component, faculties have traditionally relied upon content/course specific achievement exams to monitor progress through a program of study along with some version of a final assessment process (qualifying examination, capstone project, dissertation, etc.). These procedures are deeply ingrained into education and would appear to have served well for generations although some aspects have been problematic. An over reliance on written, high-stakes tests, criticism that current testing procedures that are described as highly artificial and inauthentic, and the almost complete focus on measuring recall of factual information are among the most commonly voiced issues raised with regard to current academic assessment (Nichols & Berliner, 2007).

Within the field of Counselor Education there has emerged recognition that preparation programs have an ethical responsibility to insure that candidates were of the highest quality and were closely monitored throughout training (Spurgeon, Gibbons & Cochran, 2012). This idea was further reinforced by the adoption in the U.S of the 2009 Standards of the Council for the Accreditation of Counseling and Related Educational Programs (CACREP), the national accrediting body for programs of counselor training (CACREP, 2009). These standards state that accredited programs are required to establish and maintain “a developmental,

systematic assessment of each student's progress throughout the program, including consideration of the student's academic performance, professional development, and personal development" (Section IV, Standard B). This idea more widely impacts the entire field of Education through the adoption of training standards established by National Council for Accreditation of Teacher Education (NCATE) (NCATE, 2007) which has evolved into the Council for the Accreditation of Education Professionals (NCATE, 2014). These standards state an expectation that students in all education-related fields develop professional dispositions and that these behaviors and attitudes be observed and evaluated in educational settings. The implication is that such assessment efforts would in some way contribute to effective and competent practitioners in the future. In both of these examples there is an implicit expectation that students, once selected for a program of study, will continue to develop in ways both academic and non-academic. The commitment to a professional field like education or counseling demands not only the mastery of a body of knowledge but also the more personal development of qualities, beliefs, and attitudes that permit the effective application of that knowledge in the delivery of professional services to others.

The descriptions of effective and competent counselors have been presented repeatedly over the past five decades (Demos & Zuwaylif, 1966; Pope & Kline, 1999; Truax & Carkhuff, 2007) and these descriptions contain characteristics which may be grouped into two major categories. The first of these groups is composed of skills and knowledge that would be expected of someone who has undergone professional training in areas traditionally associated professional counseling (individual and group counseling techniques, human development, assessment, relationship building, knowledge of psychological theory) as identified by Young (2009). The second group are qualities akin to psychological traits such as those identified by Truax and Carkhuff (2007) or Corey (2012). There is general agreement that certain of these psychological traits are essential for effective functioning as a counseling practitioner. In spite of this, surprisingly little done to assess them as part of initial candidate selection or to assess the development of them in counselor education programs until recently with the increasing focus by NCATE and CACREP on what have been referred to as dispositions.

Perhaps the term disposition should be considered in a bit more detail. Damon (2007) described personal dispositions as core values, attitudes, beliefs and behaviors needed to become a competent and effective professional. Although the

term disposition is commonly used in some educational literature, a number of other terms have been used interchangeably including personality traits, personality characteristics, attitudes, and even motivations (Pierce, 2010). Patterson and Eisenberg (1983) suggested that any list of counselor dispositions should include qualities like stability, harmony, constancy and purposefulness. Cormier and Cormier (1985), in addressing the same topic, suggested that intellectual competence, energy, flexibility, supportiveness, goodwill, self-awareness and awareness of cultural experience are essential components of a list of counselor dispositions. Pope and Kline (1999) argued for inclusion of personality traits or dispositions in the process of screening candidates for graduate programs in Counselor Education. When describing qualities associated with competent and effective counselors, Corey (2008) described an individual with clear and positive attitudes toward the nature of human behavior, self-awareness, the value of the helping relationship, personal counseling skills and high levels of technical self-efficacy. More recently, Spurgeon et al (2012) described dispositions as being composed of commitment, openness, respect, integrity and self-awareness.

Despite the lack of agreement on what counselor dispositions are, how they should be defined and even how they might be measured, the idea remains appealing. Perhaps in response to the recent inclusion of references to disposition a number of universities are now making the attempt to integrate the idea of counselor dispositions into their programs. Redekop and Wlazelek (2012) have argued that professional dispositions should be considered during the selection of counseling students and a number of U.S. institutions have begun to adopt such policies. Middle Tennessee State University (2014) and North Carolina Central University (2014) are among those now using dispositions as one of the admissions standards. In addition, some universities have begun to routinely assess disposition as part of normal student evaluation during training. Among such universities are North Carolina Central University (2014), Monmouth University (2014), New Mexico Highlands University (2011), Columbus State University (2013), University of Tennessee-Knoxville, (2010), and the University of Wisconsin-Stout (2012).

There appears to be no common or universal definition for disposition although some initial attempts have been made to integrate the idea into student selection and evaluation components of counselor education, at this point there appears to be no widely utilized single instrument for assessing professional

dispositions. Stoddard, Braun, Dukes and Koorland (2007) have suggested some methods for gathering such data including the use of diaries, interviews, student portfolios and direct clinic observations. Unpublished presentations have attempted to address the issue of assessment of counselor and professional dispositions (Williams, Williams, Kautzman-East, Stanley, Evans, and Miller, 2014; Owen, 2009) but at present there remains no widely utilized instrument for dispositional assessment.

With the mandate to assess personal dispositions now clearly integrated into national accreditation program standards by NCATE and CACREP, a decision was made to begin the process of developing an instrument that might be used to assess and document the development of counselor dispositions among students pursuing the master's degree at Morehead State University in the U.S. state of Kentucky. The process of developing such an instrument began with defining the term disposition. It should be emphasized that the underlying goal of the process was not to develop a psychometric instrument to assess personality, but to document attitudinal and belief (non-content related) development among students who progressed through their professional training in counseling. Rather than focus on pre-existing personality traits, the principle idea was to development a method to measure change in students' attitudes and beliefs during the course of their training. Such a tool was envisioned as providing an additional assessment dimension which would be added to the more traditional classroom and exit examinations which focus more on factual content and knowledge. By using this definition of disposition, the impact of professional training might be assessed as students' beliefs and attitudes became more closely related to those identified by Corey (2008). These non-cognitive or attitudinal changes, if they could be demonstrated to exit, would be an additional marker of professional growth, and the development of a professional identity in addition to the normal and expected acquisition of factual knowledge and clinical skill.

The purpose of this paper is to describe the work completed thus far in the development and testing of an instrument suitable for assessing personal dispositions of candidates and for monitoring the development of these dispositions throughout the preparation program for professional school counselors. The determination of psychometric properties was considered essential to be able to defend the adoption and use of such an instrument during reports to accrediting agencies. The instrument that evolved is called the

Dispositional Assessment for Counselor Education (DACE). Additionally, the purpose of the investigation was to test the null hypothesis that no difference could be detected between samples of counseling and non-counseling majors in terms of total or component DACE scores.

## **Method**

### **Participants**

**First study:** The participants in the initial (pilot) testing of the instrument represented a convenience sample selected from among graduate students enrolled in the College of Education at Morehead State University during the Spring semester of 2009 (Owen, 2009). Instructors were contacted and a request was made to solicit volunteers from among students enrolled in their evening graduate classes. The process ultimately resulted in the selection of a sample ( $N = 92$ ) composed of 20 males (22%) and 72 females (78%). This sample was further subdivided into two groups on the basis of academic major. The first of these ( $n=52$ ) was composed of graduate students majoring in Counseling, 47 of whom were female (90%). The second group ( $n=40$ ) was composed of graduate Education students with non-counseling majors, principally from the fields of Curriculum and Educational Leadership. This non-counseling group were somewhat more evenly balanced in their gender distribution with 15 males (37.5%) and 25 females (62.5%).

**Second study:** A replication of the pilot study with a far larger sample was conducted. The subjects in this replication study included a total of 279 graduate students enrolled in the College of Education during the spring semester of 2012. Of these, 174 were counseling students and the remaining 105 were enrolled in graduate programs in the fields of curriculum, educational leadership and educational technology. The gender distribution among the total sample reflected the general College of Education enrollment pattern with 54 (19%) males and 225 (81%) females participating.

### **Instrument preparation and criteria**

The design of this instrument was based on a shortlist of what were believed to be desirable instrument qualities.

1. Brevity and ease of administration
2. Objective scoring

3. The ability to generate an overall score an component factor scores
4. Acceptable reliability and, most important of all
5. Validity.

Perhaps the most vexing problem associated with the creation of an instrument to assess “disposition” is the lack of a widely accepted definition. The fundamental idea underpinning this survey was that it should attempt to elicit attitudes and beliefs that have been identified as being associated with competent and effective counselors. Corey (2008) presented a cogent argument for desirable counselor characteristics. Among those qualities listed by Corey were five that appeared to be more closely associated with purely attitudinal or belief constructs rather than associated with traditional counselor training content material. Those five areas included the following:

1. Nature of human behavior: A view of human behavior that was both tolerant and accepting and yet capable of change.
2. Self-Awareness: The willingness to accept one’s own strengths and weaknesses and openness to personal change.
3. Personal counseling skills: The belief that one naturally possessed those qualities that would cause others to seek out and confide in an individual.
4. The helping relationship: The belief in the value of the counseling process, that personal growth and change facilitated by another individual.
5. Technical self-efficacy: The belief in one’s own ability to acquire and utilize training to perform complex professional counseling responsibilities.

Having selected these five areas the next task was to create an item pool. Eight items were prepared for each of the five areas resulting in a total of 40 items which were then submitted for review to seven counselor educators and colleagues from five different universities. The counselor educators and colleagues were instructed to make a careful examination of the items within each of the five areas to assess face validity and to make comments or suggestions regarding wording or syntax. These reviewers were invited to submit alternative items, as well. The reviewer’s comments permitted the selection of six items for each of the five areas.

Example items from the five factors appear below:

Factor 1, Nature of Human Behavior. The natural tendency of most individuals is to grow and become more competent over time.

Factor 2, Self-Awareness. Compared to others I am a very tolerant person.

Factor 3, Personal Counseling Skills. I am regarded by my friends and colleagues as a good listener.

Factor 4, The Helping Relationship. I believe that counseling can dramatically improve decision-making skills.

Factor 5, Technical Self-Efficacy. I can read and understand most research journal articles in the field of Education.

The Dispositional Assessment in Counselor Education (DACE) takes the form of a 30 item, self-report inventory using a 5-point Likert-type scale. Each of the items is a simple declarative sentence to which the respondent is asked to indicate the degree of agreement or disagreement. In an attempt to discourage the development of a response set, eight of the items have been created with a negative valence requiring reverse scoring.

### Procedure

The administration procedure began by contacting instructors of graduate program classes in the College of Education at Morehead State University. A request was made to administer a brief survey during a class meeting. All contacted instructors agreed to participate in this part of the study. Following a brief oral introduction graduate students in the various classes were invited to participate in the study. Upon completion of a signed informed consent form, the DACE was distributed and collected from all participants. There were no time limits imposed and all participants completed the survey without questions or difficulty. Completed surveys were collected, responses tabulated and the data were subjected to statistical analysis using SPSS (Version 13).

### Results

**First study:** The initial task was to generate basic descriptive statistics for the DACE using the combined sample. These data were calculated for the total score, and for each of the five component scores. These results are summarized in Table 1 below.

Table 1. Descriptive Statistics for Total Sample

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N=92	$\bar{x}$	
Nature of human behavior (factor 1)	15.07	2.70
Self-awareness (factor 2)	18.12	2.39

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Personal counseling skills (factor 3)	15.93	3.34
Helping relationship (factor 4)	16.44	3.43
Technical self-efficacy (factor 5)	13.99	4.62
Total Score	79.55	12.57

An extension of this simple analysis provided an opportunity to compare counseling and non-counseling majors from the field of Education on the basis of DACE scores. Table 2 portrays the results of this comparison.

Table 2. Comparison of DACE Total Score and Factor Score Means By Major

	Counseling Majors (n=52)	Non-Counseling Majors (n=40)
Factor 1	16.12*, s=2.25	13.54, s=2.60
Factor 2	18.29**, s=2.48	17.82, s=2.30
Factor 3	17.44*, s=2.51	13.62, s=3.02
Factor 4	18.00*, s=2.84	14.21, s=2.83
Factor 5	16.77*, s=3.42	10.00, s=3.01
Total Score	86.62*, s=9.36	69.18, s=8.91

\*p<.000, \*\*p>.10

Cronbach's alpha was computed as an estimate of the internal consistency of the DACE. This resulted in an  $\alpha$  coefficient of .85 considered acceptably good.

**Second Study:** Data collected in the second study were subjected to the same analyses performed on the data in the previous study. This larger sample (n=279), when analyzed, demonstrated results similar to the pilot study with highly significant differences noted between total mean scores and on the same four of the five factor means as found in the pilot study. Table 3 portrays the results of this comparison.

Table 3. Comparison of DACE Total Score and Factor Score Means.

	Counseling Majors (n=174)	Non-Counseling Majors (n=105)
Total Score	86.41*, s=9.63	68.71, s=9.11
Factor 1	16.20*, s=2.39	13.47, s=2.65
Factor 2	18.31**, s=2.52	17.79, s=2.34
Factor 3	17.55*, s=2.71	13.44, s=3.06
Factor 4	17.73*, s=3.07	14.09, s=2.86

Factor 5                                      16.48\*, s=3.34                                      9.93, s=3.03

\*p<.000, \*\*p>.10

Cronbach's alpha was again computed and the resulting  $\alpha$  suggested a very acceptable level of reliability ( $\alpha = .858$ ). This result is regarded as acceptably good.

The larger sample size in this part of the investigation permitted an exploratory factor analysis to be conducted. While the initial construction of the 30 item scale was the result of the adoption of qualities assumed to be associated with effective counselors, it was hoped that the factor analysis might shed some light on underlying factor in the scale. Like many of the previous discussions of dispositions, there would appear to be a genuine lack of empirical evidence of the existence of such factors other than as a hypothesized theoretical model. While the factor loadings portrayed in Table 4 should be regarded as highly tentative, they are nevertheless included in this paper for general information purposes. The analysis indicated a four factor structure and a more compact 21 item form.

Table 4. DACE Items Factor Loadings

Items	F1	F2	F3	F4
1	.744			
2	.520			
5	.778			
7	.789			
12	.528			
15	.564			
22	.534			
3		.595		
13		.633		
16		.694		
19		.743		
24		.652		
29		.519		
18			.454	
20			.625	
25			.611	
28			.688	
30			.750	
4				.513

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17	.510
23	.758

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This four factor structure ( $KMO=.703$ ) accounts for a very respectable 52.41% of the variance and results in a 21 item instrument with a Cronbach alpha of .818. The remaining factors have been refined as the following: Factor 1, Self-awareness as a Counselor (7 items),  $\alpha=.788$ ; Factor 2, Attitude toward the helping and counseling, (6 items),  $\alpha=.745$ ; Factor 3, Technical self-efficacy, (5 items),  $\alpha=.684$ ; and Factor 4, Human nature and relationships, (3 items),  $\alpha=.487$ .

### Discussion

The development of an instrument that could be relied upon to provide accurate and reliable information regarding personal dispositions or fundamental belief and attitudinal patterns is a long and complex task. These initial data seem to suggest that counseling students differ significantly from their colleagues in other fields of education in total score and in four of the five factors which purport to have been measured. This alone would seem to represent rather meager evidence for validity. While additional work is essential in conducting confirmatory factor analysis the ultimate goal would be the creation of an integrated model which might provide a logical and meaningful explanation for the development of attitudes and beliefs among counseling students as they progress in training toward careers as professional counselors.

This investigation began with the identification of five qualities identified as essential for professional counselors by Corey (2008). When making the comparison between counseling and non-counseling graduate students, highly significant differences were observed in four of the five factors. In both the initial pilot study and again in the second data collection no significant differences were observed between groups on Factor 2 (Self-Awareness). While self-awareness would be certainly seem to be an essential quality for any working counseling, there is no logical argument that counselors should or are any more self-aware than their colleagues from other disciplines in Education. Self-awareness might very well be more associated with maturation, and general educational level than with training in counseling. Although the self-awareness factor did not differentiate counseling students from their colleagues in other education disciplines, there remains the question of whether such a factor might differentiate those who study education

from those pursuing fields of study less socially oriented such as business or engineering. The four factors in which highly significant differences were observed are all topics which receive a great deal of attention in Counselor training and so the results obtained were certainly not surprising. The results seem to suggest that since these topics are fundamental to most counselor curricula, students change and benefit from the exposure in training.

The theoretical difficulty of this attempt to assess disposition lies in the definition of a disposition. In some ways the term disposition would seem to suggest a stable and long lasting trait that would be presumably difficult to change. If dispositions were to be regarded as traits, and therefore arguably stable over time, then such assessment might have value in candidate selection. On the other hand, the suggestion by accrediting agencies and others that such dispositions should be monitored throughout training would, at the same time suggest that dispositions are more like states which would be amenable to training and experience and therefore might be useful for assessing progress during training. Clearly, the ultimate use of such an instrument would depend upon the intended purpose it was meant to serve within a particular graduate training program.

### **Conclusion**

It should be mentioned at this point that the DACE continues to undergo further testing and development. It has been translated into German and Turkish. Data from students pursuing graduate training at universities in Germany, Turkey, and Northern Cyprus are being collected for future analysis. The pool of DACE data from the original English version continues to grow and is currently being subjected to additional exploratory factor analysis in an attempt to gain a greater understanding of the factor structure of the instrument.

Among the many limitations of the current study would be the sample size and homogeneous nature of the sample since all of the participants were selected from a single college of education and from a single state university. In addition, the instrument used to collect the data represents the initial iteration of what is likely to evolve following more extensive testing with a much larger and diverse sample. The final form and structure of such an instrument is likely to resemble an achievement test designed to assess the more non-cognitive aspects of and

changes in graduate candidates in Counseling as they progress from initial graduate students to fully trained professional counselors prepared to enter their profession.

The original intent of the DACE was to document belief and attitudinal change throughout the process of professional counselor training. While mechanisms have existed for decades to assess mastery of factual and theoretical content in the Counseling field and evaluation of clinical skills through direct observation is firmly established the third part of this training triad, professional dispositional growth, is now the focus. Since concerned and effective counseling intervention requires more than the application of skill and knowledge, the effective and ethical application of those skills and that knowledge may ultimately rest upon the development of professional attitudes and beliefs which define and control the application of all other aspects of professional counselor training.

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## **Trait Emotional Intelligence and Clinical Competence among Counseling Master's Students**

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**Abstract:** *Recruitment and selection are important processes in assuring the admission of counseling students with the potential to become competent and effective clinicians. Empirical data in this domain are scarce, with little evidence suggesting whether common methods of student selection predict eventual counseling competence. This study explored trait Emotional Intelligence (EI) as a possible selection criteria by investigating its relationship to the clinical competencies of counseling students. Despite a strong theoretical hypothesis, this study did not find a relationship between trait EI and clinical competencies. Suggestions for future research are discussed based upon the limitations of the current study (e.g., lack of statistical power).*

**Keywords:** *trait Emotional Intelligence, counseling competencies, selection process*

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### **Trait Emotional Intelligence and Clinical Competence among Counseling Master's Students**

One of the ways through which counseling has established its credibility among mental health professions has been the attention given to the academic training of effective counselors. Empirical and conceptual initiatives have been directed towards promoting sound pedagogical and clinical methods in counseling programs, with the purpose of training competent counselors. Concurrently, attention has been given to ensuring that trainees have the necessary psychological stability and the appropriate skills to be competent in their work. This is reflected in counselor educators' ethical obligation as gatekeepers in the profession (Rust, Raskin, & Hill, 2013; Swank, Lambie, & Witta, 2012). Recruitment and selection of future students is an early, critical step in the gatekeeping process.

Empirical studies focusing on variables from the recruitment and selection process that may predict future counseling competence are scarce, despite general consensus regarding the methods used in the process itself. Swank and Smith-Adcock (2014) explored the recruitment and selection process of master's and doctoral applicants by surveying 79 counselor educators. They used a 60-item questionnaire based upon a review of the counseling literature. The authors reported that transcripts, GRE scores, letters of recommendation and personal statements are the most used methods of screening in the recruitment or application stage of graduate counseling student admissions. Their results were consistent with those reported in studies exploring this topic over the last 50 years (e.g., Gimmestad & Goldsmith, 1973; Nagpal & Ritchie, 2002; Smaby, Maddux, Richmond, Lepkowski, & Packman, 2005; Ziomek-Daigle, & Christensen, 2010).

A number of studies have reported a significant correlation between GRE verbal section scores and/or MAT scores and the academic performance of counseling students (Camp & Clawson, 1979; Hosford, Johnson, & Atkinson, 1984; Smaby et al., 2005). However, the predictive role of these recruitment methods on important counseling competencies (e.g., clinical skills, personal development, adherence to ethical codes, interpersonal relationships with supervisors, faculty and colleagues) is limited and suggests a need for further investigation (e.g., Smaby et al., 2005).

In the student selection or interview stage, counselor educators generally use two methods: faculty-administered assessments and interviews (Swank & Smith-Adcock, 2014). These assessments are aimed at measuring interpersonal



skills. Swank & Smith-Adcock reported that these assessment measures were either developed by an individual academic department or published utilizing normed instruments such as the Carkhuff Rating Scale. Some counselor educators report a desire to administer additional assessment or personality instruments, but the ethical implications in regard to this are blurry. Interviews accounted for over 80% of the selection process methods reported by a representative sample of 79 counselor educators from the United States. Interviews include activities such as information sessions, questions, writing samples, experiential exercises (e.g. role-plays, vignettes, group activities), and informal discussions (Swank & Smith-Adcock; Ziomek-Daigle, & Christensen, 2010)

The characteristics that counselor educators are looking for in interviews reflect the competencies that trainees are expected to display and upon which they will be evaluated, according to a study conducted by Nagpal and Ritchie (2002). These characteristics can be classified under three general themes: professional attributes (goal appropriateness, motivational appropriateness, professional preparedness, and academic preparedness), personal attributes (personal maturity, flexibility, and emotional stability), and interpersonal skill (presence, social appropriateness, and verbal skills). While pre-admission faculty screening is an important tool in ensuring that appropriate applicants pass through the first set of gates to the counseling profession, research exploring the predictive value of interviews or other traditional selection methods (e.g., vignettes, role-plays) for counselor competencies is limited in both its scope and findings.

Hosford and colleagues (1984) reported that both applicants' previous experience and their performance in personal interviews were not correlated to any of the criteria on which counseling psychology students were evaluated by their professors at the end of the program (e.g., academic performance, counseling competencies, and anticipated professional success). The authors were not specific regarding the data collected about the students' experiential background and their interview performance, which makes interpretation of the findings difficult.

Some authors, guided by an interest to find alternative and evidence-based selection criteria, have explored personality characteristics as possible predictors for counseling competencies (e.g., Jones, 1974; Myrick, Kelly, & Wittmer, 1972). For example, Myrick et al., investigated the effectiveness of counseling students in relationship to the Sixteen Personality Factor Questionnaire (i.e., 16-PF). Their findings suggested that counselors who have high conceptualization, counseling

self-exploration and interpersonal skills are also warmer, more venturesome, tender-minded, assertive, and emotionally stable.

Across various mental health fields (e.g., counseling, psychology, psychiatry), authors have asserted that competent counselors and therapists are able to perceive and regulate their own and others' feelings, are empathic, have self-respect, and can motivate themselves and others (Ackerman & Hilsenroth, 2003; Hilsenroth & Cromer, 2007; Remley & Herlihy, 2007; McWilliams, 1994). This list of characteristics is consistent with definitions of emotional intelligence (EI; Mayer, Salovey, & Caruso, 2008; Petrides, & Furnham, 2001).

Given the limited empirical validation of current selection strategies, the purpose of the current study was to investigate the relationship between self-reported trait EI of counseling trainees and their clinical competence as rated by their professors, thus exploring the use of trait EI scores as a student selection tool. Previous researchers have explored the predictive utility of EI scores for competencies in various settings that involve human interaction (e.g., management, training, customer service, health care). Although findings are inconclusive, partially due to the still-developing interest in EI, researchers have concluded that using EI testing is potentially an effective strategy in employee recruitment, and which some organizations have already incorporated into their selection process (Van Rooy & Viswesvaran, 2004).

### **Emotional Intelligence**

This section offers a brief overview of the main models of EI and their measurement tools and of the empirical findings regarding the predictive role of EI on variables pertaining to personal and professional attitudes and behaviors.

#### **EI: Models and Measurements**

Emotional intelligence (EI) became a topic in popular psychology with the publication of Goleman's (1995) book *Emotional Intelligence*. The popular press did not highlight the previous academic research of the construct by Salovey and Mayer (1990), who defined emotional intelligence as: "the ability to monitor one's own and other's feelings and emotions, to discriminate among them and to use this information to guide one's thinking and actions" (p. 189). This definition reflects the authors' conceptualization of EI as an ability.

In 1997, Bar-On proposed a model that construed EI as a blend of emotional

and social competencies, skills and facilitators that “influence one’s ability to succeed in coping with environmental demands and pressures” (Bar-On, 1997, p. 14). It is important to note that Bar-On makes a clarification that these competencies are not of a cognitive nature. Bar-On developed the Emotional Quotient Inventory (EQ-i; 1997) to operationalize his model of emotional intelligence.

The conceptualization of EI as a trait emerged in studies that differentiate it from ability EI (Petrides & Furnham, 2001). Petrides et al., (2004) defines trait EI (or ‘emotional self-efficacy’) as “a constellation of behavioral dispositions and self-perceptions concerning one’s ability to recognize, process and utilize emotion-laden information” (p. 278). Trait EI is measured through The Trait Emotional Intelligence Questionnaire (TEIQue; Petrides, Frederickson, & Furnham, 2004), a self-report instrument. It was constructed with a majority of items drawn from existing measures (e.g., Affective Communication Test, Emotional Empathy, Toronto Alexythymia Scale, Schutte et al.’s Emotional Intelligence Questionnaire, and Bar-on’s EQ-i) with the goal of representing the sampling domain of trait EI thoroughly (Petrides et al., 2004).

TEIQue has two versions: a long form (TEIQue, 153 items) and a short form (TEIQue-SF, 30 items). Both forms measure 15 distinct facets, four factors and the global trait EI. The four factors are Well-Being, Self-Control, Emotionality, and Sociability. The 15 facets identified by Petrides and Furnham (2001) are: Adaptability, Assertiveness, Emotion perception (self and others), Emotion expression, Emotion management (of others), Emotion regulation, Impulsiveness, Relationships, Self-esteem, Self-motivation, Social awareness, and Stress management.

Given the relative infancy of the construct, there have been an abundance of efforts directed towards conceptual clarifications (e.g., Brackett & Mayer, 2003; Mayer et al., 2008; Petrides & Furnham, 2001). Mayer et al. (2008) characterized the EI approaches introduced by Bar-On (1997) and Petrides and Furnham (2001) as “mixed models” (p. 504). The proponents of the ability EI concept argued that these mixed models (i.e., trait EI concept) are “disappointing from a theoretical and construct validity standpoint, and that they are scientifically challenging in that, with so many independent qualities, it is hard to identify a global theme to these lists of attributes” (Mayer et al. 2008, p. 505).

Studies have yielded inconsistent findings. Mayer et al. (2008) reported high co-linearity between the TEI-Que and a measure of the Big Five personality traits (i.e., Extraversion-Introversion, Neuroticism – Stability, Openness- Closeness, Agreeableness – Disagreeableness and Conscientiousness - Carelessness). For example, TEI-Que is negatively correlated with Neuroticism ( $r = -.70$ ;  $p < .001$ ), positively correlated with Extraversion ( $r = .68$ ;  $p < .01$ ), Openness ( $r = .44$ ;  $p < .01$ ) and Conscientiousness ( $r = .34$ ;  $p < .01$ ). Researchers have also explored the relationship between emotional intelligence and performance outcomes or desired behaviors within educational, organizational, clinical settings and other life settings (Petrides, Pita, & Kokkinaki, 2007; Van Rooy & Viswesvaran, 2004) Van der Zee, Thijs, and Schakel, (2002) reported good predictive validity for trait EI, and concluded that it explains various outcomes such as academic and social success over and beyond the Big Five personality traits.

### **The Predictive Role of EI in counseling**

Some of the ideal traits of a mental health professional, listed by Remley and Herlihy (2007) as “virtue ethics” (e.g., acceptance of emotions, empathy, self-awareness, resilience, and self-respect) are consistent with the main facets measured by EI as they have been conceptualized in various models. Although limited there have been a few studies identified in the counseling literature on EI (Cooper, & Ng, 2009; Easton, Martin, & Wilson, 2008; Martin, Easton Wilson, Takemoto, & Sullivan, 2004).

Martin et al. (2004) and Easton et al. (2008) investigated the relationship between EI and self-efficacy among professional counselors and counselors in training in a study that lasted nine months. An initial finding in these studies revealed that both counseling students and professional counselors have higher levels of emotional intelligence when compared with the normative sample. Martin and colleagues reported that professional counselors had higher EI scores than counseling students. This finding raises the possibility of trait EI as a trainable competency. The authors have hypothesized that higher EI scores among professional counselors may be due to their experience. There is research to suggest that EI (operationalized through TEI-Que) can be increased (Nelis, Quoidbach, Mikolajczak, & Hansenne, 2009).

However, when the scores between the two groups in Martin et al. study (2004) were compared on each of the Emotional Judgment Inventory scales, no

significant differences were found. Easton et al. (2008) reported strong relationship between EI and Counseling Self-Estimate Inventory (COSE; *canonical R* = .638). Both professional counselors and counseling students training who scored themselves high on two COSE scales (e.g., Attending to Process and Dealing With Difficult Client Behavior) had high scores on all EJI scales. It is important to note that both instruments employed in the study reported in these two articles (Martin et al. study, 2004; Easton et al., 2008) were self-assessments. This poses limitations to the study due the social desirability character of such instruments.

Cooper and Ng (2009) explored trait EI (operationalized through TEI-Que) in the context of the supervisory relationship and in relationship with the supervisory alliance. The results suggest that both supervisees and supervisors with high self-assessed scores of trait EI also scored their supervisory working alliance (SWA) as high. However, there was no significant relationship between supervisees' trait EI and the working alliance rated by their supervisors. Also, no relationship was found between supervisors' trait EI and working alliance scores of their supervisees. Similar to the previous two studies, a limitation of this study may be due to the use of only self-assessments. The current study seeks to investigate the relationship between counselor trainees' self-assessed trait EI and their clinical competencies as evaluated by their professors. The use of one self-assessment measurement and of an observer rating addressed some of the limitations of the previous studies.

### **Research Questions and Hypotheses**

This study sought to answer the following questions:

1. What is the relationship between counseling students' trait EI and professors' evaluation of their clinical competencies?
2. What is the relationship between counseling students' trait EI and professors' evaluation of their clinical competencies when controlling for students' gender, age and native language?

The following hypotheses were made:

1. Counselor's trait EI scores will predict the quality of the clinical competencies (H1).
2. Counselor's trait EI scores will predict the quality of the clinical competencies when controlling for students' gender, age and native language (H2).

## **Method**

### **Participants**

The lead researcher recruited volunteers to participate in this research project from counseling students enrolled in clinical courses (Counseling Pre-practicum, Practicum and Internship) within a counseling graduate program in a Research 1 institution in the Northeastern region of the United States. Students were informed that the project was voluntary and that their decision to participate in the study would not affect their course grade. Thirty-one volunteers participated in the study (M age= 25, SD age = 4.81). Most participants were females (females = 26, males = 5). English was the native language of the majority of students (English = 28, others = 3).

### **Procedure**

Volunteers were asked to complete the TEIQue-SF self-assessment instrument and a demographics questionnaire during one of their regularly scheduled clinical classes. At the end of the semester, the professors who taught these clinical classes were asked to complete a 38-item survey that evaluated the clinical competency of the students who volunteered to participate in this study.

The research protocol was designed to ensure participants' confidentiality and anonymity through the assignment of codes managed by a research assistant. Neither the researchers nor the professors had access to the list of students and their codes. To ensure confidentiality, the consent forms and the instruments were completed by the volunteers in the presence of the intermediary, while the researcher and the professors stepped out of the class.

### **Measures**

The two measures employed in this study will be reviewed in this section.

#### **The Trait Emotional Intelligence Questionnaire (TEIQue).**

The TEIQue has four factors with 15 facets. The four factors are: Well-Being, Self-Control, Emotionality, and Sociability. These factors have been confirmed in cross-cultural studies (e.g., the factor pattern matrix accounted for 63.95% of the variation in Mikolajczak, Luminet, Leroy, & Roy, 2007; Petrides, et al., 2007). The 15 facets identified by Petrides and Furnham (2001) are represented in Table 1.

A 30-item form of the instrument has been developed as a more efficient measure of trait EI (TEIQue-SF; Petrides & Furnham, 2004). It comprises two items for each of the 15 scales of the measure. The internal consistency of the instrument has been reported satisfactory (e.g., *Cronbach's  $\alpha$*  for males = .84 and for females = .89;  $N = 167$ ; Petrides & Furnham, 2006). The good psychometric properties of TEIQue-SF were confirmed by a study that used item response theory (IRT) techniques (e.g., *Cronbach's  $\alpha$*  for males = .88 and for females = .87;  $N = 866$ ; Cooper & Petrides, 2010). TEIQue-SF's psychometric properties and the advantage of the short time necessary for taking the instrument (5- 7 minutes), recommended this instrument as an optimal choice for this pilot study.

### **Clinical Skills Evaluation Form (CSEF)**

This CSEF is a 35-item instrument that addresses two main areas of clinical development: dispositions (e.g., 14 items; commitment to ensuing client's success, awareness of competencies and deficiencies, ethical behavior) and knowledge and skills (e.g., 31 items; recognizes and deals with positive and negative affect of the client). The instrument had been used in this department for the purpose of evaluating student's clinical skills for several years. It has content validity; CSEF was founded on conceptual and empirical data in the clinical domain.

### **Demographic Data**

Demographic data was gathered through three questions: "What is your age?", "What is your gender?", and "Is English your primary language?"

### **Data Analysis**

A regression analysis was conducted to investigate the first research question: the predictive role of the self-assessed trait EI of counseling students on their clinical competencies as reported by their professors. Then, a hierarchical regression was performed to answer the second research question. Clinical performance scores were regressed over gender and age at step one. Then, students' trait EI scores were added at step two. The choice of hierarchical regression rests on its recommendation as a method of statistical analysis that helps in answering whether a variable aids in prediction (Keith, 2006).

Prior to data analysis, a decision protocol was developed to handle missing data. Four of the 31 students who completed the self-assessment TEIQue-SF each

failed to answer a different item. Given the small sample size and the small number of items missed, each missing item on the TEIQue-SF was replaced by the mean for that item across all cases. The missing data were more complex in the case of Clinical Skills Evaluation Forms (CSEF) that was completed by the professors. One item was marked as NA in 18 of the 31 cases, which led to the decision of dropping the item. For the other 4 items that were marked as NA by the professors for very limited number of cases (e.g., 1 item missing in 1 case; 2 items, each missing in 4 cases; 1 item missing in 2 cases) their means were calculated and the missing values were replaced.

## Results

Good variability was found for both the self-assessed trait EI scores of the counseling students ( $M = 159.36$ ,  $SD = 20.09$ ,  $Variance = 403.59$ ,  $Skewness = -.34$ ,  $Kurtosis = 2.47$ ,  $Min = 114$ ,  $Max = 190$ ); scores reported by the professors on the clinical competencies of the participants ( $M = 127.98$ ,  $SD = 17.47$ ,  $Min = 97$ ,  $Max = 170$ ,  $Variance = 305.33$ ,  $Skewness = .60$ ,  $Kurtosis = 2.97$ ). Similarly, the scores for the two subgroups of clinical competencies measured by the CSEF had significant variability (e.g., Dispositions:  $M = 54.18$ ,  $SD = 6.74$ ,  $Min = 40$ ,  $Max = 70$ ; Knowledge & Skills:  $M = 73.80$ ,  $SD = 11.66$ ,  $Min = 53$ ,  $Max = 10$ )

The results did not support the first hypothesis regarding the predictive role of the self-assessed trait EI of counseling students on their clinical competencies as reported by their professors ( $R\ squared = 0.01$ ,  $Prob > F = 0.54$ ). Another analysis that observed the predictive role of trait EI on the two subgroups of clinical competencies (Dispositions and Knowledge & Skills) yielded similar insignificant results.

To test the second hypothesis, a hierarchical regression was performed to investigate the relationship between trait EI of counseling students on their clinical competencies, when controlling for demographic data (i.e., gender, age) and the native language of the counseling students. The demographic data was entered first, then the language and then the trait EI scores. None of the models were found to account for the variation in the clinical competencies scores in a statistically significant manner indicating no support for hypothesis 2 (e.g., final model:  $R\ squared = 0.13$ ,  $Prob > F = 0.44$ ).

Two one-way ANOVA analyses were performed to explore if the variability among clinical competency scores was explained by students' professors or by



students' level of training (i.e., Prepracticum, Practicum or Internship). The ANOVA results suggested statistically significant differences among the clinical competence scores grouped by professor ( $F = 5.62$ ,  $\text{Prob} > F = 0.0021$ ). The results also indicated statistically significant differences among the clinical competence scores grouped by level of training (e.g., PrePracticum, Practicum, and Internship;  $F = 9.14$ ,  $\text{Prob} > F = 0.0009$ ).

The lowest scores were received by the PrePracticum students ( $M=119.72$ ,  $SD=10.22$ ,  $N=14$ ). The highest scores of clinical competency were received by Practicum, where a higher variability is noticed ( $M=149$ ,  $SD=19.32$ ,  $N=6$ ). The ones for Internship students are lower than Practicum but higher than PrePracticum ( $M=127$ ,  $SD=15.23$ ,  $N=11$ ).

A hierarchical regression analysis was conducted to test a model that initially included the clinical competencies and the level of training. Then, the EI scores were included in the model. Both models are statistically significant (e.g., Step 1:  $R\text{-squared} = 0.39$ ,  $\text{Prob} > F = 0.0009$ ; Step 2:  $R\text{-squared} = 0.40$ ,  $\text{Prob} > F = 0.0027$ ). The difference among models is not statistical significant though. The only variable that is statistically significant in this model is the Practicum level.

## Discussion

The results of this study did not support the hypotheses that trait EI predicts the quality of clinical competency as measured by counseling instructors either by itself or when controlled for demographics variable. One study was found in the counseling literature that used TEIQue-SF to measure EI of internship supervisees ( $N = 64$ ) and their supervisors, recruited from several programs in the United States (Cooper & Ng, 2009). The trait EI scores reported by these authors are slightly higher than the ones found in the current study ( $M = 167.12$ ,  $SD 17.92$ , range 126 – 201).

The variability of clinical competency scores was found in this study to be explained by two factors: students' level of training and students' professors. The lowest scores of clinical competency were received by the participants enrolled in PrePracticum, which is the first course in counseling master's programs in which students practice skills in triads and in groups. This finding is consistent with a developmental view of counseling skills: students in their incipient stages of training are expected to exhibit lower-level skills than in advanced phases.

The highest clinical competencies of students were obtained by Practicum students. Practicum is the second practical course in counseling programs, when students start being evaluated on their work with real cases. Again, from a developmental stance, it is expected that when students start working with clients they exhibit a higher levels of skills. Internship is the last practical course in the counseling programs, when students continue their previous work with clients and are encouraged to show more independence. Their clinical competency scores decreased during Internship compared to Practicum.

Another interesting finding of this study was that the ratings that the students received from their professors regarding their clinical competencies were directly predicted by the professor who taught the course. This suggests that either the level of student competency varied by class, or different professors evaluated students differently on the competencies. When examining the predictive role of professor and of training level on the clinical competencies, it is important to keep in mind that the number of students allocated to each group (e.g., professor and level) was uneven. From this data, it is unknown if some professors had higher expectations or if some groups had more limited clinical skills.

### **Limitations**

The most important aspect to consider while interpreting the results of this study is the limited sample size, as it affects the statistical power of the results in general. Then, the fact that the number of participants was not equally distributed across the three levels of training can be seen a limitation in claiming the effects of this variable on clinical competencies or trait EI. Another limitation might have been posed by the instrument used to measure trait EI. Using the short form of TEI-Que had the advantage of requiring a short period of time for completion (around 5 minutes) but it definitely imposed some limitations. For example, it hindered the ability to assess the relationship between the 15 different facets of trait EI and the clinical competencies because each facet is represented just by 2 items in TEI-Que SF.

The results of this study could have also been influenced by lack of a standardized instrument to measure the clinical competencies. The statistically significant differences in clinical competences observed across professors may be reflective of this aspect. Finally, the fact that only the professors rated participants'

clinical competence could have affected the results of the study through systematic bias.

### **Recommendations for Future Research**

Future studies need to be conducted to explore the predictive role of EI, conceptualized as either trait or ability. It would be useful to design a study that would use both models in relationships with a wide array of counselor competencies. Van Rooy et al., (2005) noted that studies that compare both conceptualizations of EI (e.g., ability and trait EI) are rare. One reason for the limited number of such designs might be the high costs of the only instrument that measures ability EI. It is important to note that the majority of studies that employed this measurement were conducted in corporations and medical settings whose budgets for research are most likely higher than in counseling programs.

If the use of measurements reflecting both constructs is hindered by high costs, another method to overcome the limitations of the self-assessment instruments (used in trait EI or mixed models) and to control for convergence is to have other observers filling in these assessments (e.g., faculty, colleagues, clients; e.g., Petrides, Niven & Mouskounti, 2006). Claims regarding the relationship between EI and counselor competencies should be made based on studies that use large samples, preferably recruited across various programs. Also, given that authors have emphasized the difference among competencies across counseling tracks (e.g., school, clinical mental health) it would be useful to account for these differences in future research studies.

Longitudinal studies should be conducted to measure the extent to which trait EI has a fluid character and whether it could be improved with training. Also, more complex analyses geared towards investigating the possibility of employing trait EI (or ability EI) in the recruitment process should be conducted. An idea would be to consider a wide array of counseling competencies as evaluated by faculty, site supervisors and clients.

This study investigated the relationship between trait EI and clinical competencies of counseling students in the context of exploring alternative admission criteria that would add to the strategies currently used by counselor educators. The hope is that this study can offer a data towards more complex projects whose results can benefit counseling programs in recruiting students with the potential of becoming competent and effective counselors.

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Table 1. *The adult sampling domain of trait EI*

<b>Facets</b>	<b>High scorers perceive themselves as ...</b>
Adaptability	... flexible and willing to adapt to new conditions
Assertiveness	... forthright, frank and willing to stand up for their rights
Emotion perception (self&others)	... clear about their own and other people's feelings
Emotion expression	... capable of communicating their feelings to others
Emotion management (others)	... capable of influencing other people's feelings
Emotion regulation	...capable of controlling their emotions
Impulsiveness (low)	... reflective and less likely to give in to their urges
Relationships	... capable of having fulfilling personal relationships
Self-esteem	... successful and self-confident
Self-motivation	... driven and unlikely to give up in the face of adversity
Social awareness	... accomplished networkers with excellent social skills
Stress management	... capable of withstanding pressure and regulating stress

## Relații de putere versus puterea relațiilor Rolul consilierului școlar în parteneriatele școală-familie-comunitate

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**Rezumat.** *Există deja dovezi consistente pentru efectele pozitive ale parteneriatelor școală-familie-comunitate, cum ar fi progrese în domeniul comportamental și școlar pentru copii, încurajarea dezvoltării profesionale, creșterea rezilienței elevilor expuși riscurilor, reducerea absenteismului și a abandonului școlar. În ciuda acestor dovezi, în multe școli, practica de zi cu zi se lovește de mai multe piedici culturale, psihologice și sociale care împiedică funcționarea parteneriatelor. Consilierul școlar poate oferi soluții acestor probleme, prin asumarea rolului de lider educațional și de agent al schimbării. Consilierii școlari pot determina schimbări luând măsuri pentru ca strategiile școlare de implicare a părinților să nu se mai concentreze pe școală, ci pe comunitate. Articolul de față argumentează prin dovezi această propunere, discută implicațiile pentru formarea și programul de muncă al consilierilor școlari și face un apel pentru reanalizarea rolurilor acestora în școală.*

**Cuvinte cheie:** *consilier școlar, parteneriat școală-familie-comunitate, lider educațional*

### Parteneriatele între școală, familie și comunitate

Joyce Epstein, unul din cei mai influenți experți din domeniul parteneriatelor între școală, familie și comunitate vorbește despre felul cum sunt priviți copiii de administrația școlilor. Dacă școlile îi consideră *elevi*, este foarte probabil că separă școala de familie. Dar dacă îi consideră *copii*, probabil tratează familia și comunitatea drept parteneri în educația lor (Epstein et al., 2009). Apar tot mai multe dovezi ale avantajelor celei de-a doua perspective, ceea ce invită școlile să-și asume un rol activ în comunități, să colaboreze cu părinții și alți membri ai comunității într-un efort comun de a spori calitatea educației. Acum este momentul

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să punem sub semnul întrebării poziția de putere pe care o are școala, ca autoritate, asupra copiilor și părinților și să încurajăm relațiile strânse între școli, familii și comunități, din care vor avea de câștigat toate părțile implicate.

Parteneriatele pot lua mai multe forme, printre care programele de mentorat, centrele pentru părinți, asumarea de către rude sau membri ai comunității a rolului de asistenți ai profesorilor, vizite acasă, cursuri pentru părinți, parteneriate cu comunitatea implicată în afaceri, programele de meditații și altele (Bryan & Holcomb McCoy, 2004; Moore-Thomas & Day-Vines, 2010). Printre rezultatele observate ale parteneriatelor se numără progrese în domeniul comportamental și școlar pentru copii, încurajarea dezvoltării profesionale, creșterea rezilienței elevilor (Epstein & Sheldon, 2006; Jeynes, 2005), reducerea absenteismului și a abandonului școlar (Kabarere, 2013), asigurarea echipamentelor și materialelor necesare prin parteneriatele cu firme locale (Sanders & Harvey, 2002).

În ciuda acestor dovezi, în multe școli, mai ales cele din comunități dezavantajate, practica de zi cu zi se lovește de mai multe piedici culturale, psihologice și sociale care împiedică nu doar funcționarea parteneriatelor între școli, familii și comunități, ci chiar și o comunicare minimă între agenții respectivi (Griffin & Galassi, 2010; Sreekanth, 2011; Spernes, 2011; Poulou & Matsagouras, 2007; Suárez-Orozco, 2010). În această situație, consilierilor școlari le revine un rol esențial de agenți de legătură.

### **Consilierii școlari ca inițiatori și agenți ai schimbării**

Mulți profesioniști din domeniul consilierii școlare consideră că deja consilierii școlari dețin abilitățile necesare (de ex. coordonare, colaborare, consultanță) pentru dezvoltarea și punerea în practică a parteneriatelor școală-familie-comunitate (Bryan & Holcomb McCoy, 2007). Rolurile pe care deja și le-au asumat consilierii – cum ar fi sprijinirea familiilor și a comunității, organizarea de programe pentru sprijinirea elevilor, colaborarea cu diverse servicii comunitare, asigurarea de ședințe de formare și ateliere pentru părinți, sau vizitele la domiciliu – sunt conforme cu rolurile necesare pentru parteneriate (Bryan & Holcomb, 2007; Moore-Thomas & Day-Vines, 2010).

În prezent, numeroși experți susțin asumarea de către consilierul școlar a unui rol de conducere, care să-i permită să promoveze colaborarea, să creeze un mediu primitiv la școală, să influențeze schimbările de organizare și să fie un

element motivațional esențial care să-i determine pe profesori să-și continue formarea profesională pe tot parcursul vieții (Amatea & Clark, 2005; Bryan & McCoy, 2004, 2007; Moore-Thomas & Day-Vines, 2010; Suárez-Orozco, 2010; Griffin & Galassi, 2010; Walker et al., 2010; Epstein & Van Voorhis, 2010). Consilierul nu mai trebuie să se limiteze la cabinetul propriu și să lucreze cu elevii doar unul câte unul sau în grupuri mici, ci trebuie să capete un rol mai strategic, de susținător al succesului elevilor și de agent al schimbării sociale (Bryan & Holcomb McCoy, 2004). Prin implicarea familiilor și a comunităților, majoritatea problemelor cu care se confruntă consilierii în cabinet (motivația scăzută, violența, dificultățile emoționale și de învățare, ca să menționăm doar câteva) se pot rezolva mai productiv, fiindcă se va putea ajunge la mai mulți copii și se va acționa la nivel sistemic. În plus, schimbarea ar provoca o deplasare necesară și importantă a metodelor de consiliere de la punerea accentului pe deficiențe la punerea accentului pe punctele forte.

### **Cum pot deveni consilierii lideri educaționali**

Literatura de specialitate oferă numeroase recomandări în privința metodelor prin care consilierii școlari își pot asuma rolul de lideri în crearea și încurajarea de parteneriate între școală, familie și comunitate.

Consilierii școlari pot determina schimbări luând măsuri pentru ca strategiile școlare de implicare a părinților să nu se mai concentreze pe școală, ci pe comunitate. Aceste strategii, eficiente mai ales în comunitățile dezavantajate, respectă cultura comunității și recunosc abilitățile părinților de a contribui la educația propriilor copii (Van Velsor & Orozco, 2007). Van Velsor și Orozco comentează că, în acest scop, consilierii trebuie să cunoască familiile, inițiind o comunicare proactivă cu părinții și făcând vizite la domiciliu, pentru a cunoaște mai bine comunitatea (mediul în care trăiesc copiii), pentru a-i pregăti pe profesori și pentru a folosi capitalul cultural al părinților.

Consilierul poate facilita întâlniri între factorii responsabili de adaptarea pozitivă a copilului (consilier școlar, profesori, psihologul școlii, membrii familiei, mentori, antrenori de sport etc.) la care să se discute obiectivele și să se decidă de comun acord care sunt cele mai bune soluții pentru elev (Suárez-Orozco, 2010). Îi poate încuraja pe părinți să participe activ și poate crea o punte de comunicare între părinți și școli (Griffin & Galassi, 2010).

Consilierii școlari pot contribui la susținerea de ședințe de formare și de ateliere pentru profesori, cu scopul de a înțelege mai bine familiile și comunitatea și de a înlătura barierele de comunicare dintre profesori și părinți (Epstein & Van Voorhis, 2010, Suárez-Orozco, 2010), acționând ca un „broker cultural” (Moore-Thomas & Day-Vines, 2010).

La nivel de comunitate, consilierii școlari sunt încurajați să dezvolte relații cu instituțiile comunitare (școli, universități, organizații religioase, instituții de sănătate mintală), prin parteneriate și programe pentru dezvoltarea copiilor și a tinerilor (Denessen et al., 2009).

Pentru a facilita trecerea consilierilor școlari la noul rol, Epstein & Van Voorhis (2010) recomandă acționarea în sensul organizării timpului. Ei propun un punct de plecare rezonabil: ca fiecare consilier școlar să-și rezerve o zi pe săptămână (20% din orele de lucru) pentru programele școlare pentru implicarea familiei și a comunității.

### **Pregătirea consilierilor școlari pentru parteneriate**

Pentru a-și asuma noul rol de lideri în educație, formarea inițială și continuă a consilierilor școlari trebuie să se adapteze la această realitate. Formarea, supervizarea și programele de practică trebuie să le ofere consilierilor seturi de abilități care să le permită să funcționeze ca membri ai echipei de conducere a școlii și să influențeze așteptările altor profesioniști din partea școlii. Trebuie să poată da dovadă de gândire sistematică, să fie proactivi și, astfel, să schimbe percepția directorului școlii față de rolul consilierului școlar (Amatea & Clark, 2005).

### **Apel la reflecție**

Articolul de față face apel în egală măsură la consilierii școlari și formatorii consilierilor să-și reanalizeze rolurile în școală. Este rolul consilierului auxiliar procesului de învățare sau este mai important, un rol strategic, esențial pentru dezvoltarea școlii și a copiilor? Studiile sugerează că rolul consilierului în școală ar trebui să fie unul central și că se poate influența percepția administrației școlii în această privință.

Consilierii școlari își pot folosi puterea pentru a crea relații puternice între școală, familie și comunități.

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**Power relations versus the power of relationships**  
**The role of the school counselor in school-family-community partnerships**

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**Abstract.** *There is now plenty of evidence that partnerships between school, families and community lead to positive outcomes, such as behavioral and academic gains for children, better vocational guidance, increased resilience for children at risk, improved attendance and lower drop-out rates. In spite of these evidence, the day to day practice from schools show a number of cultural, psychological and social barriers that block the development of functional partnerships. One school actor that can be an important part of the solution is the school counsellor, who can assume the role of educational leader and agent of change. School counselors can bring change by shifting the focus of the school strategies for parent involvement, from school-centered to community-centered. The article presents evidence for this proposal, discusses implications for the training and work schedule of school counselors and calls for a re-examination of their roles in school.*

**Keywords:** *school counselor, school-family-community partnerships, educational leader*

**School, family and community partnerships**

Joyce Epstein, one of the most influential scholars in the domain of school, family and community partnerships talks about the way schools see children. If schools see them as *students*, it is most likely that they separate school from the family. Instead, if they see them as *children*, it is likely that they consider the family and community as partners in children's education (Epstein and associates, 2009). There is growing evidence that supports the benefits of the latter view, thus inviting schools to take an active role in communities, to partner with parents and other community members in a joint effort to increase the quality of education. Now is

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the time to question the position of power that school as an authority has over children and parents, and to foster powerful relationships between schools, families and communities, with benefits for all those involved.

Partnerships can take multiple forms, including mentorship programmes, parent centers, family or community members as teacher assistants, home visits, parenting trainings, partnerships with the business community, active involvement of parents and other community members in school management, tutoring programs, and others (Bryan & Holcomb McCoy, 2004; Moore-Thomas & Day-Vines, 2010). The documented outcomes of partnerships include behavioural and academic gains for children, promotion of career development, fostering of student resilience (Epstein & Sheldon, 2006; Jaynes, 2005), improved attendance and lower drop-out rates (Kabarere, 2013), provision of needed equipment and materials by partnering with local businesses (Sanders & Harvey, 2002).

In spite of these evidence, the day to day practice from mainstream schools, and especially from schools residing in disadvantaged communities show a number of cultural, psychological and social barriers that block not only the functioning of partnerships between schools, families and communities, but even a minimal communication between these actors (Griffin & Galassi, 2010; Sreekanth, 2011; Spernes, 2011; Poulou & Matsagouras, 2007; Suárez-Orozco, 2010). In this situation, a key role of liaison comes to the school counselors.

### **School counselors as leaders and agents of change**

There is a consensus among many school counseling professionals that school counselors already have the necessary skills (e.g. coordination, collaboration, consultation) to develop and implement school-family-community partnerships (Bryan & Holcomb McCoy, 2007). The roles that counselors already engage in, like support for families and community, organization of support programmes for students, collaboration with various community services, delivery of parenting trainings and workshops, home visits, are consistent with the roles necessary for partnerships (Bryan & Holcomb, 2007; Moore-Thomas & Day-Vines, 2010).

There are now numerous scholars advocating for a leadership role of the school counsellor, who can activate the collaboration, build a welcoming school environment, influence organizational change and be a key motivator of lifelong learning for teachers (Amatea & Clark, 2005; Bryan & McCoy, 2004, 2007; Moore-

Thomas & Day-Vines, 2010; Suárez-Orozco, 2010; Griffin & Galassi, 2010; Walker et al., 2010; Epstein & Van Voorhis, 2010). The counsellor should not be confined anymore to her/his office, only working with individual students or small groups, but take a more strategic role, of advocate of students success and agent of social change (Bryan & Holcomb McCoy, 2004). By involving families and communities most of the problems counselors deal with in their offices (low motivation, violence, emotional and learning difficulties, to name just a few) can be resolved in a more productive way, by reaching more children and acting at a systemic level. This would represent also an important and necessary shift from a deficit to a strength based approach in counseling.

### **Ways in which counselors can become educational leaders**

The research literature offer numerous recommendation on how school counselors can take the role of leaders in creating and fostering school, family and community partnerships.

School counselors can bring change by shifting the focus of the school strategies for parent involvement, from school-centered to community-centered. These strategies, especially effective in disadvantaged communities, respect the culture of the community and acknowledge the abilities of the parents to contribute to the education of their children (Van Velsor & Orozco, 2007). Val Velsor and Orozco comment that in order to do this, counselors need to gain knowledge of the families, by initiating a pro-active communication with parents and by doing home visits, to gain knowledge about the community (where do children live), to train the teachers and to use the cultural capital of parents.

The counsellor can facilitate meetings that gather those responsible for the positive adaptation of the child (school counselor, teachers, school psychologist, family members, mentors, sports coaches, etc.) to discuss objectives and decide together which the best solutions are for the student (Suárez-Orozco, 2010). They can encourage the active participation of parents and can create a communication bridge between parents and schools (Griffin & Galassi, 2010).

School counselors can contribute to trainings and workshops for teachers, aimed at a better understanding of families and community and at the removal at barriers in communication between teachers and parents (Epstein & Van Voorhis, 2010, Suárez-Orozco, 2010), acting like a “cultural broker” (Moore-Thomas & Day-Vines, 2010).



At the community level, school counselors are invited to build relationships with community institutions (schools, universities, religious organizations, mental health institutions) through partnerships and programmes aimed at the development of children and youngsters (Denessen et al., 2009).

In order to facilitate the transition of school counselors to this new role, Epstein & Van Voorhis (2010) recommend an action regarding time management. They suggest a reasonable starting point, the proposal being for each school counsellor to reserve one day per week (20% of working time) for school's programmes regarding family and community involvement.

### **Training of school counselors in partnerships**

If school counselors are to assume the new role of educational leaders, their initial and further training needs to adapt to this reality. The training, supervision and internship's programmes should provide counselors sets of abilities that allow them to function as a member of the school's leadership team and to influence the expectancies of other professionals from the school. They should become able to demonstrate a systemic thinking, to be proactive and by this to change the perception of the school manager in regard to the role of the school counsellor (Amatea & Clark, 2005).

### **Call for reflection**

This article calls for school counselors and trainers of counselors alike to re-examine their roles in the school. Is the counsellor's role auxiliary to the process of learning or is it more important, a strategic role, central to the development of school and children? Research suggest that the school counsellor should have a central role in school and that it is possible to influence the perception of school administration on this issue.

School counselors can use their power to create powerful relations between school, families and communities.

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## Repere etice în consilierea din România. Resurse și provocări

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**Abstract.** *Codul etic aduce multiple beneficii comunității profesionale pe care o guvernează – contribuie la delimitarea statutului profesional, educă membrii comunității cu privire la conduita etică, asigură responsabilizare în aplicarea standardelor, un grad de autonomie în reglementarea profesiei, funcționează ca un catalizator al dezvoltării profesionale a membrilor și oferă protecție și bunăstare clienților. Sunt analizate codurile etice disponibile pentru consilierii români, precum și limitele și avantajele care rezultă din existența acestora. O provocare comună provine din schimbările accelerate ce au loc în societate și care ridică întrebări etice cu privire la consilierea la distanță, utilizarea tehnologiei, a platformelor de socializare online, accesibilitatea informațiilor care afectează limitele confidențialității și alte aspecte care sunt adresate în cele mai recente coduri etice internaționale.*

**Cuvinte cheie:** *cod etic, profesia de consiliere, consiliere la distanță, platforme de socializare*

Una dintre etapele esențiale în formarea ca și consilier și, în general, ca și specialist în orice domeniu, se referă la însușirea și asumarea reperelor etice adoptate de către comunitatea profesională vizată. Nivelul de formalizare al acestor repere variază pe un continuum care se întinde de la extrema non-formală, în care fiecare practică în funcție de "ceea ce îi dictează conștiința", până la extrema puternic formalizată, în care specialiștii din profesia respectivă au un cod etic unitar, coerent, actualizat, cu norme și exemple de aplicare clare, a cărui încălcare are repercusiuni prestabilite și relevante pentru membrii comunității profesionale.

Existența unui astfel de cod etic are nenumărate beneficii atât pentru comunitatea profesională, cât și pentru publicul către care serviciile lor se adresează (Remley & Herlihy, 2001). Promulgarea unui cod etic este modalitatea prin care o comunitate de practicieni contribuie la definirea statutului lor profesional. Codul va educa membrii profesiei cu privire la ceea ce înseamnă conduită etică solidă și va asigura responsabilizarea membrilor prin impunerea acestor standarde. Un cod etic recunoscut le va permite membrilor profesiei să se

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reglementeze intern, într-o manieră autonomă, oferind o anumită protecție în raport cu organismele legislative naționale. Va contribui, de asemenea, la promovarea stabilității în cadrul profesiei, mediind neînțelegerile în plan intern. Un cod etic funcționează și ca un catalizator pentru dezvoltarea profesională a practicienilor. Prin toate aceste mijloace indirecte, dar și în mod direct, un cod etic contribuie la protejarea și promovarea bunăstării clienților.

Un cod etic recunoscut pare să fie atât un rezultat cât și un prechizit pentru a profesie de sine stătătoare. Este evident că existența unui cod etic contribuie la consolidarea profesiei oferind protecție sau sporind identitatea profesională și sentimentul de apartenență la comunitate. Este evident, însă, și că rolul său de reglementare poate funcționa doar în măsura în care consecințele încălcării prevederilor etice sunt relevante pentru practicieni. Astfel de constrângeri sunt posibile doar în măsura în care ar exista în comunitatea profesională un organism recunoscut care să aplice astfel de consecințe.

### **Coduri etice pentru consilierii români**

Urmărind dezvoltarea consilierii în România, observăm pașii realizați spre câștigarea statutului de profesie recunoscută. Un astfel de pas important îl reprezintă revizuirea normelor etice existente, pentru a le spori relevanța și a le aduce mai aproape de nivelul de recunoaștere care generează beneficiile amintite anterior.

În România există mai multe coduri etice. Unele se adresează diverselor specializări în consiliere (consilierilor școlari, consilierilor în carieră) ce sunt legiferați ca ocupații, iar un altul vizează consilierea în general.

Unul dintre cele mai bine cunoscute coduri etice în domeniul consilierii în România este cel elaborat de către Institutul de Științele Educației și Euroguidance *Cod etic și standarde de calitate în consilierea carierei* (Institutul de Științele Educației, 2004). Acesta conține șase secțiuni ce vizează toate ariile de activitate ale consilierului în carieră, aliniindu-se altor ghiduri etice naționale și internaționale din zona profesiilor de sprijin, cum ar fi codul etic al Asociației Consilierilor Americani (ACA, 2014).

Secțiunea A descrie principiile care ghidează consilierul în relațiile cu clienții săi, precizând poziția consilierului, aspecte care țin de confidențialitate, egalitate de șanse, diversitate și persoane cu nevoi speciale, solicitarea consimțământului

informat, relația personală cu clienți, evaluarea și interpretarea rezultatelor clientului, finalizarea relației de consiliere și aspecte financiare ale procesului.

Secțiunea B, Formarea și dezvoltarea profesională oferă repere referitoare la formarea profesională inițială, formarea profesională continuă, utilizarea tehnologiei informatice și norme referitoare la consilierul formator.

Secțiunea C, Evaluarea consilierilor, prezintă recomandări pentru definirea ariilor de competență, supervizare și consultanță și evaluarea activității consilierului.

Secțiunea D se focalizează pe activitatea științifică și responsabilitățile implicate în implementarea cercetării în aria consilierii. Oferă recomandări cu privire la relații cu subiecții cercetării științifice, calitatea cercetării, publicarea rezultatelor și recunoașterea contribuțiilor la cercetare.

Secțiunea E, Relațiile cu terții, include recomandări referitoare la colaborarea cu persoanele semnificative pentru client, comunitate și alte persoane și instituții ca surse de informații.

Secțiunea F, Management instituțional, propune norme etice și standarde privind managementul documentelor, coordonarea activității, marketing și atragere de fonduri și asigurarea bazei materiale pentru procesul de consiliere.

Prezentarea în paralel a normelor etice și a standardelor de calitate aduce un plus de specificitate documentului. Avantajul este că oferă un ghidaj mai clar în rezolvarea dilemelor etice care pot apărea în practica curentă a consilierului. Dezavantajul vine din faptul că un nivel crescut de particularizare pentru o anumită specializare a consilierii scade relevanța pentru comunitatea de consilieri, în ansamblul său.

*Codul etic și standarde de calitate în consilierea carierei* (Institutul de Stiintele Educatiei , 2004) rămâne în acest moment unul dintre documentele relevante care clarifică pentru consilierii actuali și viitori, precum și pentru clienții lor, natura responsabilităților etice asumate de toți cei care se identifică cu statutul de consilier în carieră.

O situație similară în ceea ce privește limitele și avantajele codului etic specializat se regăsește și în cazul **codurilor etice ale consilierilor școlari** – de exemplu (Centrul Județean de Resurse și Asistența Educațională Cluj, 2015) – elaborate de către Centrele Județene de Resurse și Asistență Educațională. Fiind parte a comunității școlare, normele etice adresate consilierilor școlari sunt influențate de către legi și reglementări adresate întregului sistem de învățământ,

cum ar fi Legea Educației Naționale nr.1/2011 sau codul etic pentru învățământul preuniversitar (Ministerul Educației Naționale, 2011). Această situație conduce la coerență în ceea ce privește etica practicii consilierului școlar care nu este pus în fața unor reglementări contradictorii adresate rolurilor sale multiple, ca profesor și consilier.

Fiindcă aceste coduri sunt promulgate de către centrele județene care sunt în relație directă de colaborare instituțională cu consilierii școlari, resorturile instituționale creează contextul pentru exersarea funcțiilor reglatorii ale acestor coduri etice, căci consecințele nerespectării lor pot fi puse în aplicare.

Datorită autonomiei Centrelor Județene de Resurse și Asistență Educațională există posibilitatea ca nu toate centrele să opereze cu astfel de coduri etice dedicate consilierilor școlari. Se prea poate ca unele instituții să utilizeze coduri etice mai generale, adresate cadrelor didactice în general, coduri care servesc într-o oarecare măsură scopului de protecție a clientului, dar nu generează celelalte beneficii menționate anterior pentru profesia de consiliere.

Un cod etic care își propune să răspundă nevoilor consilierilor ca membri ai unei profesii distincte, independent de ocupația temporară, ar trebui să fie un cod etic cu un nivel mai crescut de generalitate, care să se adreseze tuturor celor care se definesc ca fiind consilieri și desfășoară activități de consiliere.

**Codul etic** al Asociației Consilierilor Români (ACROM, 2012) se adresează tuturor celor care se își asumă statutul de consilier, indiferent de specializarea lor (carieră, școală, adicții etc) sau modalitatea de practică (privată, în cadrul instituțional, în formare etc).

Inspirat de reglementări etice ale organizațiilor și asociațiilor internaționale din sfera consilierii (ACA, 2014; NBCC, 2015) codul cuprinde șapte secțiuni care delimitează conduita etică în domeniul general al consilierii. Codul delimitează principiile ce guvernează practica în consiliere, relația de consiliere, supervizarea consilierilor, evaluarea, cercetarea și publicațiile, consultarea și libera practică.

Documentul combină standardele de practică, acele comportamente minimale necesare consilierilor (etica obligatorie) care pot fi înțelese și evaluate de persoane din afara profesiei de consiliere, cu norme etice care prezintă într-o manieră mai detaliată standardele de practică și descriu bune practici ce reprezintă nivelul aspirațional al eticii.

### **Tendențe și provocări**

Codul etic e un document viu, merit să se schimbe pe măsură ce o profesie crește și se dezvoltă în timp (Remley & Herlihy, 2001). Profesia de consiliere, aflată în curs de dezvoltare în România, a evoluat și s-a schimbat în anii care au trecut de la publicarea acestor coduri de etică. Societatea în care consilierii își desfășoară activitatea a trecut prin schimbări semnificative. Platformele de socializare, progresul tehnologic și consilierea la distanță, clarificarea limitelor într-o lume hiper conectată sunt câteva dintre temele ce trebuie adresate și detaliate într-un cod etic merit să ghideze practica consilierilor români în prezent și în viitor.

Noul cod etic al Asociației Consilierilor Americani (ACA, 2014) integrează în versiunea revizuită aceste tendințe ale realității zilelor noastre. Până la introducerea unor prevederi în codurile etice autohtone, soluțiile propuse pot fi viabile pentru rezolvarea acestor provocări ale societății noastre.

Având în vedere viteza de evoluție a tehnologiei, una dintre provocările elaborării normelor etice rezidă în faptul că ele trebuie scrise în așa fel încât să își păstreze relevanța indiferent de noile dezvoltări tehnologice, dintre care unele sunt de neimaginat.

Ca membri ai unei profesii în curs de dezvoltare, mulți consilieri pot lua în considerare beneficiile asociate cu oferirea de servicii de consiliere la distanță, atât prin telefon, cât și online, considerând că o conexiune bună la internet și o aplicație Skype funcțională este tot ceea ce au nevoie. Cu toate acestea, exista o serie de considerente etice cu privire la securitatea conexiunii și a standardelor de criptare în asigurarea confidențialitate și a unui răspuns prompt în cazul unei urgențe.

**Standardele pentru consilierea la distanță** din noul cod etic al ACA (ACA,2014) adresează aceste teme în mod explicit. Acestea se referă la introducerea câtorva aspecte în obținerea consimțământului informat în cazul consilierii la distanță, utilizării tehnologiei și platformelor de socializare: "locația de desfășurare a consilierii la distanță și informații de contact; riscuri și beneficii ale consilierii la distanță; utilizarea tehnologiei și a platformelor de socializare; posibilitatea erorilor tehnice și modalități alternative de oferire a serviciilor; timpul de răspuns anticipat; proceduri de urgență în cazul în care consilierul nu este disponibil; diferențe de fus orar (....) politicile platformelor de socializare"

În ceea ce privește atitudinea față de utilizarea tehnologiei , unii consilieri s-au arătat rezervați, în timp ce alții au accesat repede beneficiile pe care tehnologia le aduce în ceea ce privește accesul la potențiali clienți și promovarea serviciilor.



**Platformele de socializare** par să fie mai mult decât o resursă tehnologică în zilele noastre; au devenit o mișcare culturală, care nu trebuie evaluată ca fiind bună sau rea, ci trebuie abordată prin prisma principiilor etice care guvernează practica în consiliere.

Codul etic al ACA (2014) afirmă obligația consilierului de a respecta intimitatea clienților pe platformele de socializare, cu excepția situației în care clientul și-a exprimat consimțământul pentru a le vizualiza profilul. O invadare a intimității o reprezintă și căutarea informațiilor despre client în motoarele de căutare online (Google), în special în situațiile în care consilierul are impresia că există informații pe care clientul nu i le destăinuie.

O altă provocare care provine din accesibilitatea informațiilor în platformele de socializare se referă la dificultatea de a delimita rolurile personale și cele profesionale. Codul etic afirmă că toți consilierii care activează în platformele de socializare în rol personal și profesional, trebuie să aibă profiluri distincte pentru fiecare. Mai specific, recomandările insistă ca setările de siguranță pe pagina de Facebook să fie cât mai ridicate, astfel încât consilierul să nu poate fi descoperit accidental (Meyers, 2014).

Dacă inițiativa de conectare în platformele de socializare vine din parte clientului, aceasta trebuie discutată în cadrul sesiunilor de consiliere. Consilierul trebuie să se asigure că clientul înțelege faptul că activitatea din platformele de socializare este distinctă și diferită de comunicarea client-consilier (Meyers, 2014). Dacă, totuși, consilierul decide să se conecteze cu clientul, ar trebui să fie în scopul discutării anumitor probleme legate de activitatea clientului în platformele de socializare, cum ar fi agresivitatea online ("cyberbullying"). Cu toate acestea, etica în consiliere prevede că intimitatea clientului, chiar și în mediul online, trebuie respectată.

Noul cod etic propune câteva clarificări în ceea ce privește activitatea pro bono. Modificările se referă la extinderea noțiunii care poate să includă nu doar servicii gratuite de consiliere sau tarife reduse ci și activități cum ar fi susținerea de prezentări pentru publicul larg, oferirea gratuită de informații profesionale pe website-ul personal sau voluntariatul în caz de dezastre. Toate acestea sunt relaționate cu ideea de justiție socială și intenția de a sprijini accesul la servicii și informații ca și consilier (Meyers, 2014).

În ceea ce privește confidențialitatea, noile norme prevăd că responsabilitatea de a proteja confidențialitatea începe încă înainte de întâlnirea cu

clientul și continuă și după decesul acestuia. Pentru exemplificare, să luăm situația unui student căruia îi este recomandat de către un profesor să acceseze serviciile de consiliere din instituție. Uneori, cel care a făcut recomandarea se interesează dacă sfatul său a fost urmat și dacă studentul a solicitat servicii de consiliere. Codul etic evidențiază faptul că potențialii clienți – cei care au o întâlnire de consiliere stabilită, chiar dacă nu au beneficiat încă de servicii – au aceleași drepturi la confidențialitate ca și clienții obișnuiți (Meyers, 2014).

### **Concluzii**

Codul etic, cu cele două componente ale sale – obligatorie și aspirațională – este important atât pentru profesioniștii din cadrul comunității, cât și pentru clienții care beneficiază de serviciile acestora. Pentru a genera beneficiile menționate, codul etic trebuie să fie relevant pentru climatul social și provocările cotidiene pe care practicienii le întâmpină, trebuie să aibă un rol reglator în aplicarea standardelor și trebuie să fie acceptat ca norma general valabilă în ceea ce privește conduita etică pentru un grup de profesioniști care se identifică cu această normă și, prin urmare, cu o profesie.

În România există multiple coduri etice recunoscute în specializări ale consilierii – consiliere în carieră (ISE, 2004); consiliere școlară (CJRAE, 2015) – care ghidează practica etică în relațiile cu clienții. Există și un cod etic generic (ACROM, 2012), adresat tuturor celor care se recunosc ca și consilieri, care țintește nu doar beneficiile directe asociate protecției publicului și a specialiștilor, ci și scopul indirect de conturare a identității și coeziunii profesionale pentru toți aceia care se numesc consilieri.

Pentru oricare dintre aceste coduri etice provocările vin din schimbările rapide de la nivelul societății, cum ar fi tehnologia, platformele de socializare, rolurile multiple și accesibilitatea la informații care crește riscul de invadare a intimității. Pentru a rămâne relevante în practica actuală și viitoare a consilierii din România, aceste coduri etice naționale trebuie să păstreze contactul cu realitatea în schimbare și să înglobeze aceste modificări.

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## Ethical guidelines for Romanian counselors. Trends and challenges

Ioana Raluca Panc\*

**Abstract.** *Ethical codes serve many purposes for the professional community they govern – establishing professional status, educate the members about ethical conduct, ensure accountability by enforcing the standards, autonomy for regulating the profession, catalyst to improve practice and protection of the welfare of the clients. Exploring the ethical codes available for Romanian counselors, the limits and advantages of the codes are discussed. One common challenge comes from fast changing society which involves ethical questions referring to areas like distance counseling, using technology, social media, accessibility to information and limits of confidentiality and others that are being addressed in the most recent international code of ethics.*

**Keyword:** *code of ethics, counseling profession, distance counseling, social media*

One of the essential steps in the training of every counselor and, in general, of every professional, refers to learning about and assuming the ethical principles adopted by the targeted professional community. The level of ethical formalization varies on a continuum that stretches from a non-formal extreme, where each professional practices based on what his/her consciousness dictates to the strongly formalized extreme, where the professionals have a unitary ethical code, that is coherent, up to date, with casebooks and clear norms and established consequences for unethical behavior, consequences that are relevant for the members of the professional community.

Such an ethical code has several benefits both for the professional community that it governs, and for the general public that benefits from their services (Remley & Herlihy, 2001). Promulgating a code of ethics is one way that a group of practitioners can establish their professional status. Further, it will educate members of the profession about what constitutes sound, ethical conduct, while providing a means to ensure accountability by enforcing the standards. A recognized code of ethics would allow the profession to regulate itself in a more

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autonomous way, providing it a certain protection from government and other legislating bodies. It would also contribute to promoting stability within the profession by helping to control internal disagreement. Such a code of ethics would protect practitioners who behave according to the established guidelines in the case of a suit of complaint, while also serving as a catalyst to improve practice. Through all these indirect means, but also directly, a recognized code of ethics contributes to protect and promote the welfare of the clients.

An approved code of ethics seems to be both a result and a request for a well established, recognized profession. While it is clear how it contributes to strengthening the community by offering protection, creating more professional identity among its members and a stronger feeling of belonging, it is also obvious that its regulatory function can only be imposed if the consequences of unethical behavior can be relevant enough for the practitioners. Such a situation would only be possible if, among others, the profession would have a regulatory body to apply these consequences.

### **Romanian code of ethics for counselors**

Looking at the developments of counseling in Romania, we can affirm that it is making steps towards achieving the status of a recognized profession. One such important step is revising its code of ethics in order to bring it closer to the desired recognition it would need in order to generate the above mentioned benefits.

In Romania, there are several code of ethics that address either specializations of counseling (career counselors, school counselors) that are established as occupations in the Romanian legislation, or the counseling profession in general.

One of the best known code of ethics for the counseling domain in Romania is the one elaborated by the Institute of Educational Sciences and Euroguidance ***Code of Ethics and Quality Standards in Career Counseling*** (Institute of Educational Sciences, 2004) It contains six sections that aim to cover all the activity areas of the career counselors, being in accordance with other national and international ethical guides in the area of the helping professions, such as the American Counseling Association's *Code of Ethics* ( American Counseling Association, 2014)

Section A. Relationship with clients describes the principles that guide the counselor in establishing the counseling relationship, aspects referring to confidentiality, diversity and special populations, informed consent, assessment,

consequences of unethical conduct, ending the counseling relationship and financial aspects of the counseling process.

Section B. Professional training and development provides guidance regarding initial training of counselors, continuous education, use of technology, counselors' educators.

Section C. Counselors' appraisal presents recommendations regarding defining the areas of competence, supervision and consultation and appraisal of counselors' activity.

Section D. Scientific research focuses on the ethical responsibilities involved with implementing research in the area of counseling. It addresses the relationship with the research subjects, quality of research, publishing results and acknowledging contributions of others.

Section E. Relationships with others includes guidelines referring to collaboration with the community, significant others for the client and other persons and institutions that provide information.

Section F. Institutional management provides ethical norms regarding documents management, activity coordination, marketing, fund raising and facilities involved with the counseling process.

The parallel between the ethical norm and the standards of practice associated with it brings a higher level of specificity to the document. The resulting advantage is that it provides more clear guidance in solving ethical dilemmas that might arise in the current practice of the career counselor. The drawback is that a higher level of addressability to a certain specialization of counseling makes it less relevant for the counseling community as a whole.

However, the *Code of Ethics and Quality Standards in Career Counseling* (Institute of Educational Sciences, 2004) remains at this point one of the most relevant document that clarifies to current and future Romanian career counselors, and those who are served by them, the nature of ethical responsibilities held in common by those identifying with this status.

In the same direction stands the case of **ethical codes of school counselors** – for example (Centrul Județean de Resurse și Asistență Educațională Cluj, 2015) - elaborated by regional institutions that coordinate school counselors – the Regional Centers for Resources and Educational Assistance. As the school counselors are part of the educational community, the ethical norms are inspired and influenced by laws and statutes that regulate the educational system such as the National Law of

Education 1/2011 or the Ethical Code for primary and secondary education (Ministry of National Education, 2011) . This increases the coherence in the school counselors' ethical practice who are somewhat protected from conflicting norms and recommendations between legislation and ethical codes regulating their multiple roles.

As the code is promulgated by regional institutions that are in direct rapport with school counselors, besides the benefits related to constructing a professional course of action that best serves those utilizing school counseling services, there are institutional resorts that facilitate the regulatory purpose of these code of ethics.

It is possible, however, that not all Regional Centers for Resources and Educational Assistance have operational codes of ethics dedicated to school counselors, due to their autonomous status. Some of them might be operating with a more general code of ethics addressed to educational staff which might serve the protection purpose for the clients, but would lack to provide the other benefits discussed above.

An ethical code that would aim to serve the purposes for counselors as members of a distinctive profession, independently from their employment institution, would have to be a general code of ethics, addressing counseling as it is defined by its scope of practice. Such a code of ethics would contribute to defining the professional identity of all those who serve the public as counselors but refer to other professions and institutions for ethical guidance and protection.

Such a comprehensive code, addressing all those who identify themselves as counselors, irrespective of their specialization (career, school, addiction etc) or their manner of practice (private, employed, in training etc) aims to be the **Code of Ethics** of the Romanian Counselors Association (ACROM, 2012).

Inspired by the ethical codes that regulate the practices in international counseling associations and organizations (American Counseling Association, 2014) (National Board for Certified Counselors), the code contains seven sections that define what constitutes sound, ethical conduct in the area of counseling. They address the general principles that guide the counseling practice, the counseling relationship, counselor's supervision, assessment and evaluation, research and publication, consultation and private practice.

The document combines the standards of practice, as minimal behaviors required of professional counselors (mandatory ethics) that can be understood and

evaluated by individuals outside the counseling profession, with ethical guidelines, that gives more detailed guidance regarding the standards of practice and includes statements describing best practices that represents the ideals of the profession (aspirational ethics).

### **Trends and challenges**

A code of ethics is a living document that is meant to change as the profession grows and develops in time (Remley & Herlihy, 2001). The emerging counseling profession in Romania is experiencing growth and changes in the years since the release of the mentioned code of ethics. The society where the counselors practice is going through significant modifications. Social media, progressing technology and distance counseling, clarifying the concepts of boundaries in the connected world are some of the topics that need to be addressed specifically and detailed in a code of ethics that would guide practice in the present and future of Romanian counselors.

The new *ACA Code of ethics* (American Counseling Association, 2014) integrates in its revised version these trends of the nowadays reality and until introducing them into the Romanian code of ethics there is much we can learn by observing the solution proposed as ethical guidelines to meet these challenges.

At the pace that technology is evolving, one of the challenges in elaborating ethical guidelines is to write them as broadly as possible so that the standards remain relevant to future developments of technology, some of which are not even conceived yet.

As part of a developing profession, many counselors might start doing distance counseling, both by phone and online, considering that an internet connection and a functional Skype is all you need to provide distance counseling. However, there are some relevant ethical concerns related to the security of the means of connection and encryption standards both in assuring confidentiality and in assuring prompt response in case of an emergency.

The new ACA Code (American Counseling Association, 2014) addresses these concerns by explicitly describing the **standards in case of distance counseling**. They refer to several aspects unique to the use of distance counseling, technology and/or social media that should be added to the customary protocol of informed consent: "distance counseling physical location of practice and contact information; risks and benefits of engaging in the use of distance counseling,



technology and/or social media; possibility of technology failure and alternate methods of service delivery; anticipated response time; emergency procedures to follow when counselor is not available; time zone difference (...) social media policy”.

Regarding their attitude towards the use of technology, some counselors have demonstrated resistance, but others have jumped right in, trying to maximize the benefits it provides in reaching populations in need and promoting their services. **Social media** seems to be more than a technological resource these days; it is becoming a cultural movement, that should not be labeled as good or bad, but should be considered through the ethical principles that guide our practice.

The code (American Counseling Association, 2014) states that counselors respect the privacy of their clients’ presence on social media unless given consent to view such information. An invasion of privacy would also be considered searching online information (“Google-ing”) about a client, especially if a counselor feels like the client is holding back information.

Another challenge that comes from the availability of information in the social media resides in the fact that distinguishing boundaries between the personal and the professional profile can be tricky. The code states clearly that counselors who are on Facebook both personally and professionally need to set up distinct, separate profiles for each. More specific recommendations suggest that the security settings on the personal Facebook page should be as high as possible so that one cannot be found accidentally (Meyers, 2014)

If a client initiates a social media connection and asks the counselor to connect with him on social media, the topic should be discussed and the motives investigated. The counselor should make sure that the client understands that social media activity cannot be a mode of direct counselor-client communication (Meyers, 2014). If the counselor still decides to connect with a client it should be for the scope of discussing the content and addressing potential problems related to client’s online activity, such as cyberbullying. However, ethical counselors should always respect their clients’ virtual privacy.

Another area that has been clarified in the revised code refers to providing **pro bono services**. The modification refers to broadening the notion and including besides offering free counseling, reduced rates or addressing unmet needs, activities such as public speaking, putting free professional information on their websites or volunteering counseling services in case of a disaster. All these are

related to the idea of social justice as an attempt to do what one can as a counselor to improve access to services and information (Meyers, 2014).

An interesting development of the confidentiality guidelines refers to the fact that the responsibility to protect **confidentiality begins even before the counselor takes on a client** and continues after the client's death. We can consider the case of a student who is referred by his tutor for counseling services. In some cases, the referring agent may follow up to see if the student has sought services. The code points out that prospective clients – someone who has an appointment but has not yet come in for services – is afforded the same privacy and confidentiality as a regular client (Meyers, 2014).

### **Conclusions**

The code of ethics, with their mandatory and aspirational aspects, are important both for the professionals inside the community as well as for the clients that are being served by the profession. In order to generate such benefits, a code of ethics must be relevant for the societal climate and the challenges the practitioners face daily, it must provide means to ensure accountability by enforcing the standards and it should be accepted as a common ground that defines sound, ethical conduct for a group of professionals that identify themselves with those standards and, therefore, with a profession.

In Romania, there are several code of ethics acknowledged in specializations of counseling - career counseling (Institute of Educational Sciences, 2004); school counseling (Centrul Judetean de Resurse si Asistenta Educationala Cluj, 2015) - that instruct the practice and enforce ethical conduct in relation with the clients. There is also a general code of ethics (ACROM, 2012), addressed to all those who identify themselves as counselors, who aims not only the direct benefits related to protecting the public and the professionals, but also the indirect purpose of inspiring professional identity and cohesion for the various professionals who call themselves counselors.

For any of these codes there are challenges that arise from the fast changes in the society such as technology, social media, converging roles or accessibility of information that increases the risks on privacy. In order to maintain relevance for the current and future practice of counseling in Romania, these national ethical codes need keep the pace with the evolving reality and address these changes.

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**JURNALUL ROMÂN DE CONSILIERE**  
**(ROMANIAN JOURNAL OF COUNSELING)**

**GHID PENTRU AUTORI**

**Jurnalul Român de Consiliere (Romanian Journal of Counseling)** este o publicație bilingvă ce publică articole cu subiecte din domeniul consilierii adresate către diverse tipuri de clienți în contexte diferite, precum și teme relaționate cu formarea și supervizarea consilierilor. Articolele trebuie să fie elaborate într-un limbaj academic, pe baza literaturii de specialitate existente și să includă implicații relevante pentru practica consilierii. În general, articolele se vor încadra într-una dintre următoarele categorii, deși pot fi acceptate și alte tipuri de manuscrise:

**1. Perspective teoretice (Theory).** Articolele din această categorie se focalizează pe abordări teoretice noi despre o temă anume, review-uri de literatură, integrarea cercetărilor publicate pe o anumită temă într-o manieră inovativă, o abordare critică asupra modului în care este tratat un concept în literatură, etc. Toate temele abordate sunt în legătură cu domeniul consilierii.

**2. Cercetări empirice (Research) .** Articolele din această categorie pot fi cercetări calitative sau cantitative. În aceste manuscrise cadrul teoretic prezintă contextul și necesitatea abordării temei, conducând în mod logic spre obiectivul și întrebările cercetării. Metodologia include o descriere completă a participanților, a variabilelor și instrumentelor utilizate, o analiză a datelor, iar rezultatele sunt discutate sub aspectul semnificației lor. În secțiunea de Discuții sunt prezentate concluziile și implicațiile pentru practica în consiliere și cercetări viitoare.

**3. Contributii marcante (Profiles) .** Articolele din această categorie prezintă organizații, proiecte sau personalități care au avut contribuții marcante asupra consilierii prin leadership sau practici inovative.

**4. Tendinte (Trends)** - În această categorie sunt incluse recenzii de carti, prezentări de evenimente, conferinte din domeniul consilierii, menite să ofere cititorilor informații despre literatura și noile tendințe din domeniul consilierii.

**5. Bune practici (Best practices)** - Articolele din această categorie se focalizeaza pe intervenții de consiliere care si-au dovedit eficienta empiric (outcome data). Sunt acceptate manuscrise care prezintă eficiența unor abordări inovative în practica consilierii sau a formării și supervizării de consilieri, pornind de la teorii sau rezultate empirice. De asemenea, sunt acceptate și articole care se focalizează pe eficiența unor intervenții punctuale în contexte particulare susținută cu argumente empirice. Manuscrisele pot fi studii de caz, meta-analize, review-uri de literatura sau aspecte practice despre o temă.

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Un exemplu complet de manuscris poate fi găsit în „*Publication Manual of the American Psychological Association, Sixth Edition*” sau pe pagina Purdue Online Writing Lab: <http://owl.english.purdue.edu/owl/resource/560/18/> sau pagina APA (Apa Style tutorial): <http://www.apastyle.org/learn/tutorials/basics-tutorial.aspx>

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Rezumatul (*abstract*) și titlul lucrării sunt plasate pe pagina 2. Rezumatul nu trebuie să depășească 150 de cuvinte. Eticheta Rezumat trebuie să apară cu litere mari și mici, centrat, în partea de sus a paginii. Rezumatul trebuie să aibă un singur paragraf, adică să fie redactat fără alineate. Autorul va propune și un titlu scurt. Este necesar să fie incluse 3-5 cuvinte cheie după fiecare rezumat.

### **Paginile textului principal**

În pregătirea manuscrisului, autorul va începe cu o introducere care va fi plasată pe pagina 3. Titlul manuscrisului va fi scris cu litere mari și litere mici, centrat în partea de sus a paginii și urmat de conținutul textului lucrării. Secțiunile următoare ale lucrării vor fi prezentate fără spații libere. Când începe o nouă secțiune, aceasta nu trebuie poziționată pe o pagină nouă.

Această parte a lucrării trebuie să includă:

- Prezentarea problemei. Această secțiune prezintă problema specifică care va fi investigată și descrie strategia de cercetare. Această secțiune nu trebuie etichetată ca Introducere.
- Explorarea importanței problemei. Această secțiune prezintă motivul pentru care problema necesită o nouă cercetare. Autorul va prezenta această problemă în funcție de tipul de cercetare (studiu empiric, review sistematic și meta-analiză, lucrare metodologică sau studiu de caz).
- Descrierea literaturii relevante și evidențierea continuității logice între cercetările anterioare și cercetarea propusă.
- Precizarea fiecărei ipoteze formulate și oferirea unui argument teoretic privind modul în care a fost desprinsă din teorie sau conectată logic cu studiile anterioare.

## Metodă

Această secțiune descrie detaliat cum a fost realizat studiul, incluzând și definițiile conceptuale și operaționale ale variabilelor utilizate în studiu. Autorul ar trebui să includă:

- Descrierea eșantionului, prin descrierea caracteristicilor majore ale acestuia, în special a caracteristicilor care pot conta în interpretarea rezultatelor.
- Procedura de eșantionare, prin descrierea modalității de selecție a participanților: metoda de eșantionare, procentul celor care au fost contactați și au participat la cercetare, numărul participanților care s-au oferit să participe la cercetare etc.
- Mărimea eșantionului, putere și precizie.
- Măsurătorile prin descrierea metodelor utilizate pentru a colecta datele și a îmbogăți calitatea măsurătorilor.
- Designul de cercetare.
- Manipulări experimentale sau proceduri.
- Descrierea sarcinilor.

## Rezultate

Această secțiune sumarizează datele colectate și analiza datelor realizată pentru a testa ipotezele propuse. Autorul trebuie să raporteze analiza datelor cât mai detaliat, astfel încât să permită justificarea concluziilor.

## Discuții

Această secțiune evaluează și interpretează implicațiile rezultatelor, autorii făcând referire la ipotezele propuse. Autorul va examina, interpreta, cataloga rezultatele și va face inferențe pe baza lor. Autorul va insista pe consecințele teoretice sau practice ale rezultatelor obținute. De asemenea, trebuie prezentate limitele studiului și ale direcțiilor viitoare de cercetare.

## Bibliografie

Referințele sunt citările în ordinea alfabetică de la sfârșitul lucrării. Această listă trebuie să includă toate lucrările citate în cadrul manuscrisului. Referințele trebuie scrise după următorul model:

### 1. Reviste (exemple selective)

Autor, A.A., Autor, B. B., & Autor, C.C. (an). Titlul articolului. *Titlul Jurnalului*, xx, pp-pp. doi: xx.xxxxxxxx

Autor, A.A., & Autor, B.B. (in press). Titlul articolului. *Titlul Jurnalului*. Retrieved from <http://cogprints.org/5780/1/ECSRAP.F07.pdf>

### 2. Cărți

Autor, A.A. (an). *Titlul lucrării*. Locație: Editură.

Autor, A.A. (an). *Titlul lucrării*. Retrieved from <http://www.xxxxxx>

### 3. Capitole din cărți (exemple selective)

Autor, A.A., & Autor, B.B. (an). Titlul capitolului. In A. Editorul, B. Editorul, & C. Editorul (Eds.), *Titlul cărții* (pp. xxx-xxx). Locație: Editură.

Autor, A.A., & Autor, B.B. (an). Titlul capitolului. In A. Editorul, B. Editorul, & C. Editorul (Eds.), *Titlul cărții* (pp. xxx-xxx). Retrieved from <http://www.xxxxxx>

#### 4. Conferințe și simpozioane (exemple selective)

Contributor, A.A., Contributor, B.B., Contributor, C.C., & Contributor, D.D. (an, lună). Titlul lucrării. In E.E. Chairperson (Chair), *Titlul simpozionului*. Symposium conducted at the meeting of [Numele Organizației], Locația.

Presenter, A.A. (an, lună). *Titlul lucrării sau posterului*. Paper or poster session presented at the meeting of [Numele Organizației], Locație.

Pentru o descriere detaliată a procedurii privind citarea altor tipuri de lucrări decât cele listate anterior, autorii vor consulta „*Publication Manual of the American Psychological Association, Sixth Edition*”. Exemple concrete pot fi găsite la pagina APA style: <http://flash1r.apa.org/apastyle/basics/data/resources/sample-references2.pdf> sau APA style at Purdue Online Writing Lab, toate link-urile legate de reference list : <http://owl.english.purdue.edu/owl/resource/560/05/>

#### Note de subsol

Notele de subsol sunt utilizate pentru a oferi informații suplimentare sau pentru a confirma statutul drepturilor de autor.

#### Anexe

Anexele manuscrisului (etichetate ANEXA 1, ANEXA 2 etc.) conțin materiale suplimentare față de conținutul lucrării, cum ar fi informații legate de proceduri metodologice lungi, calcule etc.

#### Tabele și figuri

Autorul trebuie să numeroteze toate tabelele și figurile cu cifre arabe, în ordinea în care au fost menționate pentru prima dată în textul manuscrisului, indiferent dacă o discuție mai detaliată a tabelului sau figurii este prezentă ulterior în text. Autorul ar trebui să le eticheteze Tabelul 1, Tabelul 2 ș.a.m.d. sau Figura 1, Figura 2 ș.a.m.d.. Prezentați prima dată toate tabelele, ulterior figurile. Plasați tabelele și figurile după anexele de la sfârșitul manuscrisului și indicați poziția fiecăruia/fiecăreia în text astfel:

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Inserați Tabelul 1 aici

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Fiecare tabel sau figură trebuie să aibă o propoziție de introducere în text. Formatul acceptat este cel standard (canonic). Fiecare tabel trebuie să raporteze un singur tip de analiză (care trebuie să fie identificată din denumirea tabelului) și fiecare coloană și rând trebuie să conțină un singur tip de date.

#### Citări

Este important ca autorul să menționeze fiecare lucrare citată în manuscris în secțiunea Bibliografie. Autorii pot cita în text astfel:

##### 1. Un singur autor

Numele și anul: S-a arătat că X este asociat cu Y (Autor, an)



Numai anul: Autorul (an) a arătat că .....

## **2. Doi autori sau mai mulți autori**

Când o lucrare are doi autori, autorul trebuie să citeze numele ambilor autori ori de câte ori apare referința în text. Când o lucrare are trei, patru sau cinci autori, autorul trebuie să citeze toți autorii prima dată. În citările ulterioare va fi inclus numele primului autor urmat de sintagma et al. (fără Italic și cu un punct după al.) și anul apariției lucrării.

## **3. Două sau mai multe lucrări citate**

Autorul trebuie să ordoneze citările în ordine alfabetică. Două sau mai multe lucrări ale aceluiași autor (sau ale aceluiași grup de autori) publicate în același an vor fi marcate prin adăugarea unui „a”, „b” ș.a.m.d. după anul publicării.

## **4. Lucrări fără autor identificat sau Autor anonim**

Când o lucrare nu are un autor identificat, autorul trebuie să citeze în text titlul lucrării și anul. Se va poziționa între ghilimele titlul articolului, capitolului sau a paginii web și se va marca cu Italic numele revistei, cărții, broșurii sau a raportului:

... privind angajamentul organizațional (“Study Report”, 2011)

... cartea *Corelate motivaționale* (2011)

## **5. Numărul paginilor în citări**

Pentru a cita o parte specifică dintr-o anumită sursă, autorul trebuie să indice pagina, capitolul, figura, tabelul sau formula. Întotdeauna va fi menționat numărul paginii:

(Johnny, 2011, p. 13)

## **6. Sursele secundare**

Când sursele originale nu sunt disponibile în format fizic, autorul trebuie să menționeze a doua sursă în lista bibliografică iar în text să menționeze lucrarea originală și să citeze sursa secundară:

... raportul elaborat de Minnie (citată în Smith, 2011).