Transparent Counseling Pedagogy: A Strategy for Teaching Clinical Thinking

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Based on a program presented at the ACA Annual Conference & Exhibition, March 26-30, 2008, Honolulu, HI.

The essence of counselor education is helping counselors-in-training learn clinical thinking: the ability to reflect on what clients say and integrate that information with theoretical, diagnostic, and practical insights to arrive at therapeutically meaningful interventions. Research on pedagogy has suggested that involvement in or experience with counseling-related tasks helped counselors-in-training develop more confidence in performing counseling tasks (Tang et al, 2004); that counseling interventions taught through classroom practice of clinical skills would translate directly into actual counseling practice (Cummings, 2000); and that experiential pedagogy using an actor and vignettes enhanced students' abilities to manage the therapeutic alliance and process case conceptualizations (Grant, 2006). In summary, experience with the counseling environment and exposure to clinical thinking can give students the chance to practice thinking as a counselor.

This skill of thinking as a counselor involves a number of dimensions that yield greater timeliness and accuracy in clinical thinking, stemming from the ability to remember and access large, meaningful patterns in counseling with greater speed and depth of problem analysis (Mayfield, Kardash, & Kivlighan, 1999). Yet counseling schemas, the conceptual structures that help counselors make sense of clients and issues, are often difficult to learn due to their abstract nature. To help students create these schemas, Nelson and Neufeldt (1998) suggested that instructors place students in problem-focused situations, and then have them work as groups to find solutions to foster social construction of applied concepts.

As Nelson and Neufeldt (1998) pointed out, pedagogy is needed that provides realistic clinical demonstration with active student involvement and access to the thinking of the counselor. To answer this need, a teaching strategy called "Transparent Counseling Pedagogy," or TCP, was designed to provide a realistic clinical demonstration in the classroom, promote student involvement with socially constructed learning, and make transparent the counselor's thinking.

Transparent Counseling Pedagogy Defined

Transparent Counseling Pedagogy (TCP) is a demonstration strategy in which the "counselor" and the "client" interact with the class to make the counseling process as transparent as possible through the use of dialogue and monologue. Instructors with assistants (advanced counseling students, doctoral students, or outside counselors) portray the counselor and client. The person playing the client is asked to portray an

actual counseling client from his/her experience in each vignette, while always protecting confidentiality. At the beginning of the course, students are placed in stable three- to four-person groups to enhance the social construction process. In each TCP role play, counselor and client interact, then the counselor pauses the interaction by raising a finger to the client and asks students "What would you say next? Discuss in your groups." After a few minutes, each group is asked for their ideas and clinical rationale, allowing students to think both independently and collectively as a group and class as they hear and consider a wide range of clinical possibilities. The counselor gathers that input, and then discusses each topic or question proposed in terms of timing, consistency with the learning point being demonstrated, appropriateness for this client, and appropriateness for the presenting issue. Options are weighed aloud by the counselor and the class, and then the counselor selects one clinical direction or intervention offered, giving the clinical rationale for the choice. If the counselor says something without class input, the counselor pauses the interaction with the client by raising a finger, then thinks aloud in a monologue to highlight the clinical thinking involved.

Post-session processing allows for multiple discussions. First, the client provides her or his reactions to the session, highlighting thoughts about both students' and the counselor's conceptualization, questions, and the direction of counseling in the enacted session. Then the learning points being demonstrated are integrated into the post-session processing. For example, in a counseling theories course, the counselor provides theory-congruent conceptualization hypotheses, based on what is known thus far about the client. The instructor prompts students to evaluate the theory: "Based on what you saw and heard today, would you use this theory? Why or why not? What would you have done differently?" These responses are processed and compared with other theories presented in the course, and the individual style of the counselor is discussed as it relates to the demonstration of theory.

This demonstration strategy is useful in a variety of courses. For example, the authors have used this pedagogical tool in courses in ethics, counseling theories, multicultural counseling, group theories, and counseling skills. Additional courses in which this pedagogy would be applicable includes supervision, career counseling, practicum, internship, assessment, and specialization courses (school counseling, rehabilitation counseling, community counseling) – any course in which clinical thinking is essential.

Use of TCP in a Counseling Theories Course

The course in which TCP was piloted was Counseling Theories. Each class was conducted in three stages. For the first hour, lecture and discussion of the current theory was presented to provide cognitive structure for classroom demonstrations. This included a brief review of the foundation, assumptions, and strategies of each theory, providing students with the content information necessary to synthesize preexisting ideas and new insights relative to the presented counseling theory. For the next 45 minutes, the theory was demonstrated and for the final half hour, the demonstration was discussed. Students

were not asked to participate as clients in any of the demonstrations, and no advance information about the client was given to the class or the counselor to more closely approximate clinical reality.

The TCP demonstrations involved the instructor and an advanced doctoral student who alternated as either client or counselor, allowing students to be exposed to different counseling styles with different theories. Each client portrayed was based on former clients of the co-instructors with identifying information altered; confidentiality was rigorously protected. Each client was portrayed in three class sessions by only one person, which allowed students to see one client consistently presented for multiple counseling sessions. It was also beneficial for students to see several clients with various issues. Because of time constraints and the number of theories to be demonstrated, a new theory was demonstrated in each class, meaning each client was counseled using three different theories. This allowed students to see the application of different theories to the same client and issue, which facilitated students' theoretical reflection and evaluation. Students were able to see more than the one-session counseling relationship typical of most role plays. In each demonstration, dialogue was used to elicit the student groups' suggestions for direction, and monologue was used to share clinical thinking.

After each demonstration, students were asked to discuss their reactions with the class. Prompts were offered to explore students' reactions to the session: What did you notice in terms of the effectiveness of the theory? Personal style of the counselor? Unique qualities of this client? How effective would this theory be with this client? What theories might be more effective? What did you notice relative to the presenting issue(s), and what hypotheses might you generate about deeper or underlying issue(s)? What would be the "starting point" to address these deeper issues, given this theory, given other theories?

Student Evaluations

There were 28 students enrolled in the counseling theories course, all of whom gave their voluntary informed consent as defined by the university's Institutional Review Board. Responses were collected from 26 of these students; two students turned in their evaluations too late to be included in analyses. In the class, 27 of the 28 students were women. Thirteen of the students were second-career adults; the other 15 students were traditional-age students in their mid-to-late 20's. Two students were African-American; the remainder were Caucasian. Ten of the students were enrolled in the Marriage and Family Therapy track and 18 were enrolled in the School Counseling track.

In this class, three demonstration methods were used: TCP, the Shostrom (1965) tapes of Gloria, and non-transparent traditional role plays without the use of dialogue or monologue. To evaluate the three classroom demonstration methods, students were asked to respond to a written survey that was distributed during the second-to-last class and collected anonymously before the final class. In the survey, they were asked to think about the best session (as they defined it) of the Gloria tapes (Shostrom, 1965), the non-

transparent role-plays, and the Transparent Counseling Pedagogy, and to respond to 7 questions about each on separate sections of the survey. As they reflected on the best session for each demonstration strategy, they were then asked to indicate, on a 4-point Likert-like scale (3=A Lot, 2=Some, 1=Little, 0=None) the following: (a) How much will you remember from that session? (b) How confident are you that you could use the theory in a time-efficient manner? (c) How much did you learn about the *theory* from that session? (d) How much did you learn about the *client* from that session? (e) How much did you learn about the *issue* from that session? (f) How comfortable are you that you could use this approach if you chose to? (g) How involved were you in that session? and (h) How much did you enjoy that session? Students were then asked to respond to two open-ended questions: "Of the three demonstration strategies, which one was the most effective in helping you understand the material, and why?" and "Please add any comments you would like to make about any of the demonstration strategies used in this class."

For the evaluations, descriptive statistics were determined to identify any patterns in responses (see Table 1). For all items except one, mean values were lowest for the Gloria tapes and highest for the TCP demonstrations, indicating that students reported gaining the most understanding of demonstrated theories from the TCP sessions. The exception to this pattern was in responses to the amount of information retained from the demonstration; for this question, mean scores are the same for non-transparent role plays and TCP.

Responses to the open-ended questions were grouped by all three authors independently and then in consultation to arrive at congruence. To the question of which demonstration strategy was the most effective in helping them learn the material, 2 students identified the Gloria tapes (Shostrom, 1965), 2 reported the non-transparent role plays, 2 indicated both live demonstrations (TCP and the non-transparent role plays), and 3 said they learned equally from all demonstration strategies. The remaining 17 of the 26 students reported that TCP was the most effective in helping them understand the course material. Reasons given clustered around four themes. The first was Active Student Involvement, highlighting that students felt more engaged and involved during the TCP demonstrations. The second theme is the Value of Peer Interaction, highlighting the value of hearing other students' perspectives in the social construction of knowing. The third theme included comments on the Value of Hearing the Clinical Thinking of the Counselor in TCP. The fourth theme, General Comments on TCP, included the following quotes: "Personal input, seeing applications, and team discussion is best (for me!)," and "The transparent counseling was so helpful in bringing the theories to life. It gave me a much better understanding of how to actually apply each theory. I feel like I learned so much more from watching you and [the doctoral student co-instructor] than I ever could from reading a book or even listening to a conventional lecture."

The primary instructor also reported that, when using this pedagogy, students were more active, more involved, and took more risks in their questions and suggestions than in 12

prior years of teaching this course. The assignments and final exam case study challenged students to examine and evaluate each theory as applied to unique clients and unique issues*;* as a result, we saw greater levels of clinical insight in all assignments.

Implications for Counselor Educators

TCP appears to hold some promise for preparing students to conduct case conceptualizations. Instead of just hearing about or seeing a demonstration, students are given an opportunity in TCP to reflect on, and react to, the application of clinical concepts and clinical thinking immediately after the demonstration. This allows students to practice conceptual skills prior to their actual practicum experience, and to do so with feedback from peers and guidance from the instructor. As a result, TCP introduces students to the process of collaborating with others and hearing different points of view in order to determine the most appropriate approach for a particular client with a particular issue.

It appears that TCP may promote also intentionality (Ivey & Ivey, 2003). In TCP, clinical intentionality is modeled; *clinicaland critical* thinking are highlighted. Students are encouraged to think strategically and systematically about ways that course concepts (counseling theory, ethical guidelines, multicultural counseling, etc.) inform clinical decision making, instead of solely relying on instinct. TCP introduces students to divergent *clinical* perspectives while granting them the freedom to begin *critical* thinking about the most effective approach.

Although it was gratifying to have students approach the instructors to share how much they learned from the TCP demonstration, there were challenges in conducting this particular demonstration in terms of portraying the counselor, portraying the client, and the physical layout of the class. Portraying the counselor and then processing the counseling session with students requires a very high level of concentration. The counselor must not only demonstrate good counseling, he or she must also (a) attend to the client in an impromptu role play (i.e., attending to non-verbal and vocal affective cues); (b) be aware of demonstrating a course-relevant concept (i.e., thinking ahead to the demonstration of learning points); (c) attend to self-talk and sharing that with the class (i.e., sharing conflicting directions or topics for further exploration); and (d) attempt to time the request for student input in such a way as to maximize their learning (i.e., at the end of a meaningful client disclosure). Specific to the counseling theories course, we wanted to demonstrate the effect of personal style on theory, emphasizing that one person's use of a particular theory would be unique to that clinician. Finally, instructors will need to prepare for student questions and challenges in their role as counselor. The illusion of instructor infallibility does not last long in this setting, but in the long run, the honest sharing of human fallibility may empower students to take risks themselves. The balance of course concepts, personal style, learning/teaching moments, and clinical risk-taking is delicate.

Portraying the client as realistic and believable was also a challenge. We learned that it is important to resist the temptation to overplay the client by being too resistant or too compliant. If the portrayed client is too demanding or uncooperative, the students may become demoralized and frustrated. If the client is too compliant, students may be set up for failure when future clients do not demonstrate positive change in a short amount of time. The best way to avoid these challenges is to remain true to what is known about the actual client being portrayed (without violating confidentiality).

Logistical challenges included preparation and planning. For implementation, there is a need for a co-instructor as well as for non-student volunteers for additional role plays. Second, the class meeting time would need to be long enough for a presentation of the material, the TCP demonstration, and sufficient time to process the experience. Third, the room will need to be large enough so that the TCP takes place in the center of the room, where all students are able to see and hear, and everyone has access to a front row seat. A final point worth noting is that instructors will expend more energy portraying counselors and clients in addition to presenting the material. Just as the students are encouraged to be more than passive learners, the instructors are also challenged to come out from "behind the desk," into the students' space.

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Table 1

Student Evaluations (N=26) of Three Classroom Demonstrations

Respondents were asked to think about the best session of each demonstration strategy, then rate that session on their experience of the theory demonstrated.	GLORIA TAPES (SHOSTROM, 1965)	ROLE PLAY WITHOUT TRANSPARENT ELEMENTS	TRANSPARENT COUNSELING PEDAGOGY
Amount retained	2.57 (.50)	2.61 (.63)	2.61 (.50)
Confidence in time-efficient use	1.73 (.66)	2.11 (.71)	2.19 (.75)
Learning about theory	2.46 (.76)	2.54 (.51)	2.77 (.42)
Learning about client	2.34 (.69)	2.61 (.57)	2.77 (.42)
Learning about issue	2.15 (.46)	2.53 (.58)	2.77 (.42)
Could use theoretical approach if chosen	1.92 (.69)	2.11 (.65)	2.15 (.73)
Involvement	2.5 (.71)	2.77 (.51)	2.88 (.32)
Enjoyment	2.5 (.76)	2.84 (.46)	2.92 (.27)

Note: Within columns: Mean (Standard deviation); 3 = A lot, 2 = Some, 1 = A little, 0 = None