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**EXPECTATIONS AND ANXIETY ABOUT
COUNSELLING**

**HAMISH JOHN MCLEOD
1992**

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**EXPECTATIONS AND ANXIETY ABOUT
COUNSELLING**

A thesis presented in partial fulfilment of
the requirements for the degree of
Master of Arts in Psychology at
Massey University

HAMISH JOHN MCLEOD

1992

ABSTRACT

Prior research into expectations about counselling has assumed that failing to meet client expectations will have a detrimental effect on process variables such as state anxiety and adherence to treatment. However, the empirical support for this is equivocal. Both self-regulation theory and the attentional-bias model suggest that experiencing the confirmation of accurate, but negative expectations will result in an increase in state anxiety. Therefore, instead of focussing only on improving accuracy of client expectations it is suggested that the affective valence of the expectations must also be acknowledged. The aim of the present study was to investigate the differential effects of confirmation/disconfirmation of positive or negative expectations on anxiety about seeing a counsellor. Thirty-nine adult clients attending their first session at a university counselling centre completed pre- and post-session measures which assessed their expectations about counselling, and state and trait anxiety. As hypothesised, the effects of disconfirmation of expectations on state anxiety were moderated by the valence of the expectations. However, contrary to what was predicted, those client's who experienced confirmation of negative expectations did not display greater state anxiety than those with positive expectations, and there was no significant relationship between trait anxiety and negative expectations. Simple exposure to therapy resulted in a decrease in state anxiety for all clients regardless of confirmation/disconfirmation and expectation valence. Finally, those clients who had their negative expectations confirmed did not drop out of treatment more than any other group. A preliminary investigation of the validity of using the Expectations About Counseling questionnaire (EAC) to measure positive and negative expectations about counselling revealed that it was not as effective as had been suggested by previous researchers. It was concluded that this factor and a lack of power contributed to the paucity of significant results. The results are discussed in the context of self-regulation theory and the attentional-bias model and an argument is made for the continued use of these two paradigms in future research.

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CHAPTER ONE

The Development of Research into Expectations About Counselling

1.1 Overview of the introduction

It has long been thought that gaining an understanding of the ways client expectations influence therapy will benefit both the practicing clinician and the recipient of any treatment. For instance, Bordin (1955) advocated the modification of counsellor behaviour in order to meet client expectations and thus reduce anxiety and treatment avoidance. However, much of the research in this area is methodologically weak and has been predicated on unsubstantiated assumptions. One such assumption is that disconfirming client expectations inevitably has a detrimental effect on the therapeutic process (eg. Baekeland & Lundwall, 1975). For the purposes of the current research, this assumption will be referred to as the "congruency hypothesis" as it infers that achieving congruency between client expectations and experience is of prime therapeutic importance.

Despite the fact that the congruency hypothesis is not drawn from any clear theoretical base, its widespread acceptance has led many researchers to develop induction procedures for client's entering psychotherapy. This highlights a major weakness in this area, that is, the development of theory has failed to keep up with applied research. Consequently, the findings of research into client expectations about counselling have been equivocal.

Improving understanding of the influence of client expectations on therapy can best be achieved by: (a) acknowledging and avoiding the methodological problems identified in previous studies; and, (b) drawing theoretical input from related, but more theoretically advanced disciplines. Therefore, the current work begins with an overview of research into client expectations with particular emphasis on the problems that have compromised previous studies. Following this is an examination of developments in the area of medical psychology, specifically the emergence of self-regulation theory, and the influence of expectations on preoperative emotional states and post-operative recovery. Self-regulation theory is then discussed in terms of expectations about psychological counselling.

Next, the attentional-bias model of information processing is introduced. This model augments self-regulation theory and provides an insight into the way specific types of expectations influence anxiety. The inclusion of this theory provides added insight into the way the valence of client expectations (whether they are positive or negative) affects anxiety about counselling. The attentional-bias model suggests that some individual's preferentially attend to threatening environmental cues and subsequently experience increased state anxiety, whereas others direct their attention

away from the threat and report less state anxiety. Therefore, it seems plausible that focussing on the negative aspects of an impending experience (holding negative expectations) will increase state anxiety and may adversely influence that experience. Whether or not the expectations are **accurate** may well be immaterial, the important factor may be whether they are predominantly positive or negative.

The current study has three main objectives. Firstly, it aims to address the gap that exists between theory and applied research into expectations about counselling. Secondly, it will attempt to test the congruency hypothesis by examining the relationship between positive versus negative expectations about counselling and state anxiety. Finally, the way expectations and anxiety influence premature termination of treatment will be briefly discussed in order to provide a preliminary insight into the way these variables may influence therapeutic outcome.

1.2 The origins of research into client expectations about counselling

The idea that client expectations play an important role in counselling has been examined frequently over the past four decades. Numerous studies have attempted to link expectations to: adherence to treatment (Baekeland & Lundwall, 1975; Hardin, Subich, & Holvey, 1988; Hynan, 1990); satisfaction (Lebow, 1982); therapeutic outcome (Sipps & Janeczek, 1986); service utilization (Kushner & Sher, 1989; Tinsley, Brown, de St. Aubin, & Lucek, 1984); client ethnicity (Yeun & Tinsley, 1981); psychosocial development (Tinsley, Hinson, Holt, & Tinsley, 1990); and gender (Hardin & Yanico, 1983; Sipps & Janeczek, 1986). Yet, despite the presence of these and other studies Hardin & Subich (1985) state that "...the most important questions that remain to be answered concern the practical significance of expectations on the actual counseling process, the ways expectations affect the outcome of counseling, and how expectations are modified over the course of counseling." (p.134).

The 1950's is the point in time from which most of today's expectations research has emanated. Kelly (1955) postulated that clients' hold a personalised conceptualisation of the therapeutic relationship and the therapists role within that relationship, before they even enter the first session. This idea was developed further by Goldstein (1962b, cited in Duckro, Beal, & George, 1979, p.260) who delineated two types of expectations held by both therapists and clients. These were: (a) prognostic expectations, which reflect the perceived probability of therapeutic success as defined by the client or the therapist; and, (b) participant role expectations which were defined as the anticipations held by both parties regarding behaviours that will be displayed and by whom.

Through much of the 1960's, the importance of achieving client-therapist congruency became fixed in the minds of theorists and practicing counsellors alike. Unfortunately this uncritical acceptance of the congruency hypothesis was followed by the emergence of applied studies which were not based on any empirically supported theories. The consequence of this has been that the field has developed in a haphazard and inefficient manner. The following is an overview of research into client expectations and their relationship to specific aspects of the counselling process.

1.3 Expectations and adherence to treatment

Baekeland and Lundwall (1975) completed an extensive, and often cited, review of the premature termination of treatment literature and emphatically stated that "...discrepant expectations about treatment promote dropping out." (p.758). However, this conclusion was supported by the citation of only six studies, five of which were published prior to 1965.

More recent research has been marked by ambiguous results and semantic problems. For instance, Hardin et al. (1988) used the Expectations About Counseling Questionnaire (EAC, Tinsley, Workman, & Kass, 1980) to link client expectancies to premature termination of treatment. The results provided no support for the hypothesis that differences in precounselling expectations can explain differences in termination status. Also, they found that problem type did not seem to affect expectations.

Hardin et al. (1988) make several recommendations for future research. Firstly, they encourage the formulation of clear definitions of concepts such as premature termination, and state that client **expectations** must be treated as something distinct from client **preferences**. They also question the ability of the EAC to measure discrete client expectations and suggest that this possible lack of sensitivity may have contributed to their non-significant results. In support of this Hardin et al. cite the doctoral work of Prospero (1987) which suggested that, rather than assessing discrete expectations, the short form of the EAC may be a measure of global positive or negative set toward counselling. This suggestion is highly pertinent to the current study and supports the contention that too much attention has been paid to discrete expectations and their accuracy rather than exploring the role of the predominant affective valence of an individual's expectations.

Heesacker and Heppner (1988) postulated that client motivation and expectations should predict premature termination and, like Hardin et al. (1988), they encouraged the formulation of clear construct definitions. Instead of using an arbitrary definition of premature termination based on the number of completed therapy sessions, the authors made their assessment based on the careful analysis of therapist notes. The main findings were that in brief psychotherapy, those who terminated prematurely displayed less favourable expectations than those who did not. In longer

psychotherapy, premature terminators reported more favourable expectations. This finding is consistent with increasing recognition that different factors may influence dropping out in various phases of treatment (eg. Baekeland & Lundwall, 1974; Pekarik, 1985a). Heesacker and Heppner attempted to explain this by suggesting that a person with **negative** expectations may have them confirmed more rapidly due to a scanning and memory bias which favours negative material. In contrast, they suggest that those who hold positive expectations which are disconfirmed become **gradually** disillusioned. This proposition is consistent with the attentional-bias model discussed in Chapter 3, and suggests that allaying a first-time client's negative expectations may be necessary to ensure that they adhere to treatment long enough to gain some benefit from it.

Hynan (1990) found that early terminators discontinued therapy due to discomfort and situational constraints more often than late terminators. Those who ended therapy later did so because of improvement attributed to the therapeutic experience. Hynan suggested a modest relationship exists between positive experiences in therapy and adherence but this observation failed to reach significance (most probably due to the small sample size used). When viewed in the light of other research (such as Heppner & Heesacker, 1988) it would seem that fostering **positive** expectations prior to counselling and minimising negative experiences in the initial sessions is desirable as this should increase adherence and enhance the possibility that an individual will be exposed to therapy long enough for it to do some good.

In summary, the exact influence of expectations on adherence to treatment is still unclear. However, there is evidence which indicates that the affective valence of expectations and the subsequent confirmation or disconfirmation of those expectations may relate closely to termination status. It is intended that the current study will explore this issue.

1.4 Expectations and satisfaction

An extensive review dealing with satisfaction with mental health treatment revealed that few conclusions can be drawn from previous research (Lebow, 1982). This was attributed to the newness of the field complicated by problems with some of the techniques used to assess consumer satisfaction. The role that client expectations play in determining satisfaction was also unclear. For instance, Severinson (1966, cited in Lebow, 1982) reported that disconfirming client expectations regarding counsellor empathy inevitably reduced satisfaction, while Gladstein (1969, cited in Lebow, 1982) asserted that the multidimensional nature of client expectancies meant that the disconfirmation of any one expectation was not enough to have a detrimental effect. Because the present research is not concerned with assessing satisfaction with

treatment, it is not necessary to elaborate on this issue. However, it can be noted that satisfaction research shares many of the problems evident in other investigations into expectations about counselling.

1.5 Expectations and gender

Hardin and Yanico (1983) used the Expectations About Counseling questionnaire (EAC; Tinsley et al., 1980) to compare expectations, counsellor gender, and problem type. This analogue study failed to find any significant effects attributable to counsellor gender, but did show a significant main effect for subject gender. Also, female subjects expected to assume more responsibility in counselling, and expected counsellors to be more accepting, genuine, and confrontational than did the male subjects. In contrast, men expected counsellors to be more directive and self-disclosing than women did. The authors suggested that their design was not sufficiently sensitive to extrapolate the complicated effect of counsellor gender.

An extension of Hardin and Yanico's (1983) work compared pre-counselling expectations with subject gender traits (Sipps & Janeczek, 1986). Sipps and Janeczek postulated that previously observed differences in client expectations were not simply due to gender but are instead attributable to the individual's level of femininity or masculinity. The results indicate that degree of femininity does significantly influence client expectations, irrespective of the client's gender.

1.6 Expectations and service utilisation

Kushner and Sher (1989) examined the relationship between fear of psychological treatment and service utilisation. Treatment fearfulness was seen as "...a subjective state of apprehension arising from aversive expectations surrounding the seeking and consuming of mental health services." (p.251). Based on scant prior research, the authors predicted that service seekers would be less fearful than those who avoided treatment. Psychological distress and fear of psychotherapy were measured with the Brief Symptom Inventory (BSI; Derogatis, 1975, cited in Kushner & Sher, 1989) and the Thoughts About Psychotherapy Survey (TAPS; Kushner & Sher, 1989) respectively. As predicted, treatment avoiders displayed the highest level of fearfulness, followed by those who reported that they "never needed treatment". Those who needed treatment and sought it displayed the lowest level of fearfulness.

In conclusion, Kushner and Sher (1989) suggest that their results are consistent with, but do not necessarily substantiate the view that fearfulness leads to service avoidance. The correlational design made it imprudent to infer any causal relationship between level of treatment fearfulness and service utilisation but there was a positive relationship between fearfulness and level of psychological distress. That is, those

who displayed more fear were more distressed prior to entering therapy. The authors note that therapy can be "...a potentially difficult, embarrassing, and overall risky enterprise..." (Kushner & Sher, p.256) and thus can be viewed in a negative or fear-provoking way. This has practical implications in that many people who could benefit from psychological help may avoid therapy because they find it frightening. This is consistent with the views espoused in the current study. That is, the nature of an individual's expectations (i.e. are they positive or negative) must be acknowledged if service delivery is to be enhanced.

Tinsley et al. (1984) found that the client's view of the problem and the perceived skills of the health professional involved can affect expectations and service utilisation. They found that certain problems are seen as appropriate for some help-providers but not for others and conclude that any study of help-seeking behaviour needs to address the possible moderating influence of problem type. This means that researchers need to rule out the possibility that treatment avoidance is simply due to the client perceiving the identified help-giver as inappropriate for their specific problem.

Paradoxically, Tinsley et al. (1984) cling to the view that failing to meet client expectancies has negative consequences yet state that researchers must still answer the question "...just what are the effects of violating client expectancies?" (p.159). This is indicative of the degree to which the congruency hypothesis has become established in this field despite the absence of strong empirical support. In response to Tinsley et al.'s findings, the current design controls for any unwanted variance attributable to problem type.

1.7 Expectations and client ethnicity

Yeun and Tinsley (1981) used the EAC to compare the expectancies of American university students with those of African, Chinese, and Iranian students. This study was born out of the increasing need to accommodate foreign students in campus counselling settings and the acknowledgement of the possible role that ethnicity plays in determining expectations. The authors point out that expectancies are modified through interaction with the environment and therefore are strongly influenced by cultural factors. Significant differences were found between the four groups of students on 12 of the 17 expectancy scales. The authors observed that the Chinese, Iranian, and African students expected to play a more passive role in the counselling process. In contrast, the American students expected to assume more personal responsibility while the counsellor adopted a less directive and passive role. Findings like this reflect the degree to which extraneous factors such as socialisation and ethnicity can impinge on the formation of expectations and therefore may cause unwanted variance if they are not controlled for. As a consequence, the current study

made provision for subjects to indicate which ethnic group they identified with, thus allowing for further analysis based on this information should the need arise.

1.8 General research into client expectations

Tinsley and Harris (1976) carried out an important study which looked at the counselling expectations of 287 undergraduate students attending Southern Illinois University. In contrast to other work at the time, they measured a wide range of client expectations pertaining to the counsellor and the counselling environment. Close examination of those expectations presented an insight into the way a non-therapeutically sophisticated population views counselling. Essentially, the subjects indicated that they believed counselling could be *generally* helpful but they doubted that it could ever be of any help to them personally. In response, Tinsley and Harris suggested that many potential clients may never seek counselling due to their low expectancy that they will be helped.

This research was followed by the development of the Expectations About Counseling questionnaire (EAC, Tinsley et al., 1980) which has become a popular research instrument due to its psychometric properties and ease of administration. Tinsley et al. (1980) constructed this measure in order to address what they saw as the inadequacies present in previous expectations research. They note, as did Duckro et al. (1979), that previous efforts had focussed on too narrow a band of client expectancies and had subsequently paid insufficient attention to prognostic and participant role expectations. Hence, the EAC was constructed in order to try and measure "...all of the theoretically important expectancies a client might have about counseling." (Tinsley et al., 1980, p.563). It includes scales which measure expectancies regarding: counselling outcome, the client's attitudes and behaviours, the counsellor's attitudes and behaviours, counsellor characteristics, and characteristics of the counselling process.

Two advantages of the EAC over the customised instruments used in many other studies are that its widespread use allows for outcome comparisons between studies and the standardisation of measurement procedures reduces unwanted variance previously attributed to differing research methodologies.

Other research into general expectations and attitudes about counselling has been carried out using a variety of measures (Cash, Kehr, & Salzbach, 1978; Surgenor, 1985; Furnam & Wardly, 1990). Cash et al. measured client help seeking attitudes in an analogue study using the Fischer-Turner Attitudes Toward Seeking Professional Psychological Help inventory (ATSPPH, Fischer & Turner, 1970, cited in Cash et al., 1978). They found that therapeutically experienced subjects held more favourable attitudes toward counselling than those who were therapeutically naive and

that the Fischer-Turner scale reliably differentiates between these two groups. Those who had not experienced therapy before expressed doubts about its helpfulness. This finding is consistent with the view that fostering **positive** or favourable attitudes toward counselling will enhance service utilisation (Kushner & Sher, 1989; Tinsley & Harris, 1976).

Surgenor (1985) used a modified version of the Fischer-Turner scale to measure attitudes toward counselling in New Zealand. Young people and the therapeutically naive displayed negative attitudes toward seeking and obtaining psychological help while those who were therapeutically experienced, female, well educated, and older displayed more positive attitudes. The author suggests that this is a warning to psychology as a profession that there is a need to examine ways in which services can be made available to all those who need it, not just a select few.

The idea that experience is an important determinant of attitudes toward psychological help was also explored by Furnham and Wardley (1990). However, the pattern they observed was the opposite to that reported by Surgenor (1985). Overall, the subjects' responses were mostly positive, but older subjects tended to be **more** skeptical about the benefits of psychotherapy while those who were more educated believed **less** in its possible benefits. However, the most important point was that experience in psychotherapy correlated with **higher** levels of pessimism about the process. This finding is at odds with the research that has been cited up until now and could be construed as support for the view that this area is poorly understood. However, the most parsimonious explanation is that the use of a "psychotherapy" rather than "counselling" client sample led to differing results.

One of the main benefits of general research into expectations about counselling and psychotherapy is that it provides an insight into the clients' perception of the encounter. The fact that practitioners are constantly exposed to their discipline inevitably means that they lose touch with how a therapeutically naive person views the experience. It is therefore desirable to gain an understanding of the expectations that people bring with them to therapy in order to more effectively establish rapport and trust. Hence, the current study is useful in that it quantifies the expectations of a group of therapeutically naive clients, and by using the EAC it is possible to make comparisons with other samples.

1.9 A summary of the main problems with expectations research

In the most influential review of the expectations literature to date, Duckro, Beal, & George (1979) challenge the assumption that the disconfirmation of client expectations automatically has a deleterious effect on therapy process and outcome. Of the 43 studies reviewed, 21 provided support for the congruency hypothesis, while 22

did not. This lack of concordance was attributed to the following methodological limitations present in the literature.

Firstly, there has been a tendency for researchers to use ill-conceived research methodologies (eg. Klepac & Page, cited in Duckro et al., 1979). This criticism reflects Duckro et al.'s dissatisfaction with the means by which client expectations have been measured by some researchers. For instance, some studies used open-ended response forms which were subjectively interpreted by the investigator. In another instance, the instrument items were objectively generated but were administered verbally by an intake worker giving rise to the suggestion that a positive response bias occurred. These concerns are also voiced by Tinsley, Bowman, & Ray (1988) who advocate a programmatic approach to expectations research. They recommend the use of the EAC due to its psychometric properties, widespread use, and broad focus.

A second weakness of previous research relates to ambiguity regarding the definition of "*expectations*". Apfelbaum (1958, cited in Duckro et al., 1979) defined expectations as the *anticipation* of some event. However, this practice of stating clear construct definitions has not been emulated by many other authors and consequently, the problem of separating client *expectations* from client *preferences* has emerged. To avoid these problems, Duckro et al state that researchers should clearly define client "expectations" at the outset of any study. In response to this, the current study adopts a precise operational definition of "expectations" taken from the work of Grantham and Gordon (1986). (See Section 4.2).

A final concern expressed by Duckro et al. (1979) is that the theories that have been used in this area in the past have predominantly been inappropriate and have not enhanced the development of the field. The current study acknowledges all of these concerns in its design: A psychometrically sound and widely used research instrument has been chosen - the EAC. A clear definition of "expectations" has been selected, and an attempt is being made to forge a link between appropriate theory and applied research. It is to the introduction of relevant theory that we now turn.