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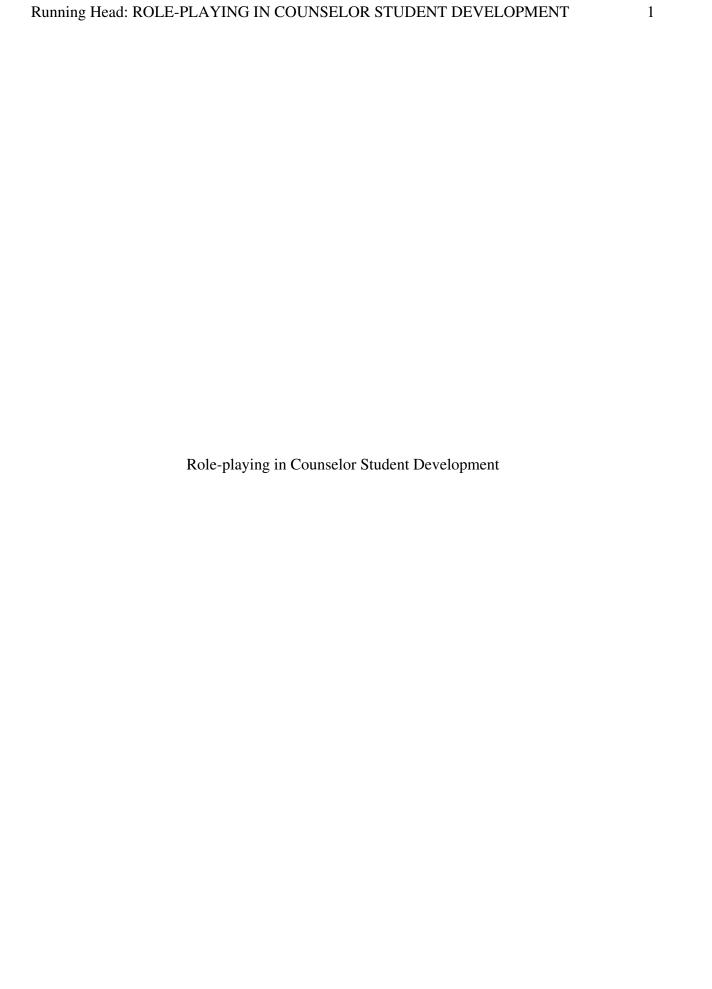
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Role-playing in Counselor Student Development

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Abstract

This study examined how role-plays impacted confidence, competence and empathy as measured by students' (N = 26) and instructor's ratings during practice triads in a microskills course. Repeated ANOVAS revealed no significant difference for scripted versus personal concerns role plays. Paired t-tests revealed significantly higher ratings for empathy, confidence, and skills at different times and for different roles (e.g. counselor, client, observer). Role-play type was correlated with role preference; significant correlations were also found between script preference and specific microskills and confidence, as well as instructor ratings of facilitation skills and empathy.

Keywords: role-playing, role playing, counselor education, empathy, confidence, skills

Role-playing in Counselor Student Development

Role-playing is a pedagogical technique used regularly by counselor educators as a way to provide counseling students the opportunity to practice microskills, apply theory to practice, build skills and confidence, experience common and difficult counseling situations, receive constructive feedback within a safe environment, and demonstrate improvement (Fuqua & Gale, 1982; Shepard, 2002; Seligman, 2005). In addition to building general skills, students can learn how to effectively identify and respond to more complex issues such as counter-transference (Grant, 2006), or practice common counseling tasks such as focusing a session or goal setting (Lent, Hill, & Hoffman, 2003).

Role-playing has been shown to have many positive benefits, including increases in students' empathy (Truax & Carkhuff, 1967), enthusiasm and class participation (Balch, 1983), academic knowledge and empathic understanding (Anderson, 1989), performance (Baker, Daniels & Greeley, 1990; Larson & Daniels, 1998), and reflection of feelings (Robinson & Cabianca, 1985). According to Seligman (2005), role-play practice groups can lead to professional as well as personal development in students. In addition, supervisors can use prescriptive role-plays such as "Demonstrate through role-play the confrontation you plan to use with this client" to enhance the cognitive development of a supervisee (Granello, 2000, p. 40). The impact of the order of role (counselor, client, or observer) on the specific skill of reflection of feelings yielded no significant differences (Robinson and Cabianca; 1985).

Role-playing and Self-Efficacy

Role-playing is also related to counselor self-efficacy (Larson, Clark, Wesley, Koraleski, Daniels, & Smith, 1999; Munson, Stadulis, & Munson, 1986; Munson, Zoerink, & Stadulis, 1986). Larson et al. (1999) found that beginning students who rated their role-play as successful

showed increases in counselor self-efficacy, while those who viewed their role-play as mediocre decreased in their counselor self-efficacy. Self-efficacy has been shown to increase as a result of role-playing, modeling, and visual imaging (Munson, Stadulis, & Munson, 1986; Munson, Zoerink, & Stadulis, 1986). The results of these two studies indicated that all three techniques yielded stronger improvements in counselor performance and counselor self-efficacy as compared to a control group, but that none of the three were better than the other.

Roles in Role-play

In a traditional role-playing situation, a student might be in one of three roles: the counselor, the client, or an observer (Ivey, Ivey, & Zalaquett, 2010; Robinson & Cabianca, 1985). When acting as the client or observer, the student learns through observation, while in the role of the counselor, the student learns through performance (Robinson & Cabianca, 1985). Furr and Carroll (2003) found that beginning students described their experiences of being both counselor and client in role-playing as important, not because of the skills they developed, but because of the affective impact they experienced while playing the counselor and the client. When in the observer role, the student observes the role-plays of other students in the roles of counselor and client, has reactions to both, makes a judgment about their interactions and provides feedback (Boroto, Kalafat, & Cohen 1978). In most role-plays, the instructor also provides feedback to the student counselor (Shepard, 2002).

Preparing for Role-plays

Mental practice of counseling just prior to an actual performance of role-play has been positively correlated with an ability to evaluate one's performance more accurately, differentiate among different levels of empathic responses, and indicate higher levels of pre-role-play confidence as compared to students who did not use mental imagery first (Hazler & Hipple,

1981). Mental practice did not yield higher empathy scores or a difference in subjective evaluations of counselor performance.

Movies have been used to prepare for role-plays, promote diversity sensitivity, and build multicultural competencies (Pinterits & Atkinson, 1998; Villalba & Redmond, 2008), to demonstrate group counseling process (Tyler & Reyolds, 1998), and to teach counseling theory (Koch & Dollarhide, 2000). Toman and Rak (2000) used movies to inform role-plays and to encourage participation in role-plays. A student playing the client role would assume the character role shown in the selected movie. Students (N=182) consistently rated the use of movies as high (4.23 on a 5.0 scale) for preparing them for role-playing, both in terms of content to role-play and feeling encouraged to participate in the role-play.

Alternative Types of Role-play

Instructors have experimented with various types of role-plays. Grant (2006) used actors, with students working with the same actor in a "tag team" approach over the semester while the rest of the class observed via video. She found through a focus group discussion that positives of this approach included learning through observation, practicing specific techniques, and feeling prepared for how to handle "real" client issues, such as hostility. The main negative of this approach was performance anxiety.

Another group of instructors (Dollarhide, Smith, & Lemberger, 2007) described a roleplayings technique in which co-instructors role-played a counseling session. Students were divided into groups of 3-4 members per group, and asked to provide feedback and suggestions as to what should happen next at intervals decided up on by the instructor. The instructor would talk through each of the options presented, and then choose one to complete the next portion of the session. Student evaluations revealed that this approach was highly approved of by the students as a way to learn various theoretical approaches to counseling.

Yet another approach (Duys & Hedstrom, 2000) involved dividing students into groups of 6 to 8 students, and having two students in the group role-play a session and then receive written and verbal feedback to the counselor from the rest of the group. An instructor or doctoral student would be present to facilitate the group discussion.

Content of Role-play

Students might use personal concerns (their own issues) or make up a problem or issue to discuss in the role-play. Anderson et al. (1989) found that students tend draw on their own difficulties when acting out a role-play. Levitov, Fall, and Jennings (1999) suggested that using personal psychological concerns in a role-play can taint the opinion of the student's peers and faculty, while Brenner (1999) stated that bringing personal issues to the role-play provides an important opportunity for learning, Furr and Carroll (2003) reported that "participants reported that learning to trust each other and to take risks in sharing personal information was beneficial to understanding the dynamics of the counseling relationship" (p. 487). Research comparing the effectiveness of using personal versus scripted issues in role-playing is lacking at the present time.

Purpose of the Study

The purpose of this study was to further counselor educators' understanding of a commonly used pedagogical tool, i.e., role-play, on students' confidence, skills and empathy, and to learn about the impact of each role in a triadic role-playing session on these three variables. In addition, we hoped to provide statistical support for the type of role-play that most significantly impacts these variables. The following research questions guided this study:

Research Question 1: Is type of role-play (scripted or personal concern) significantly correlated to student or instructor ratings of skills, confidence, and empathy?

Research Question 2: What impact does playing each role in a practice triad have on self ratings of confidence, skills, and empathy?

Research Question 3: Is student preference for using scripted or personal issues for role-play significantly correlated with student or instructor ratings of skills, confidence, and empathy?

Method

Participants

Participants included 26 counselor education masters' level students (25 females, 1 male) enrolled in a beginning counseling skills course in a Southeastern urban university. In terms of ethnicity, 73.1% were Caucasian (N=19), 11.5% were African American (N=3), 11.5% were Latino (N=3), and 3.8% indicated "other ethnicity" (N=1). Participation was voluntary and not related to class evaluation. Eighty-four percent of students (N=21) indicated that they had no experience as a counselor, four percent had ½ year (N=1), four percent had 1 year (N=1), four percent had 2 years (N=1) and eight percent had 3 or more years (N=2). Fifty percent indicated that they had not participated in counseling (N=13), while fifty percent indicated that they had.

Course Format

This course, a pre-requisite course for most of the other counseling courses offered in the program, is taken during a student's first semester, and includes intensive training on counseling microskills, such as reflection of feelings and content, paraphrasing, confrontation and summarizing. Each class meeting includes a presentation of counseling principles and specific counseling skills. One hour of the weekly class time is devoted to practicing skills in an

observation laboratory. Students are divided into counseling triads, and take turns playing the counselor, client, and observer. The role-plays are recorded every week and are evaluated twice during the semester by the instructor and classmates, with students choosing the recordings to be evaluated.

Instrumentation

Participants completed 3 forms at the beginning and end of the semester. The forms were created based on review of the literature of specific counseling students microskills, as well as desired student outcomes identified for the course. The Pre-Role-play Self-Evaluation Form asked participants to evaluate their skills in the following areas: nonverbal, listening, responding and reflecting, confronting and facilitating. They were also asked to provide a rating on their overall counseling skills, confidence, empathy, and to indicate their feelings and beliefs about role playing.

The Post Role-play Form asked participants to reflect on the counseling experience from the perspective of counselor, client, observer, and at the end of the experiential activity (when all three roles had been completed). The Instructor Rating Form included the same questions as the Pre-Role-play Self Evaluation form and were completed by the instructor after reviewing videotapes of the same sessions evaluated by the students. All forms used a Likert Scale to evaluate each skill area. The answers ranged from: 5= Extremely well developed to 1= Continue practice, or N= No appropriate opportunity.

Procedure

At the beginning of the semester, the instructor informed the students of the study and distributed consent forms. Students were told that by participating, they would be receiving extra feedback on their skills through the Instructor Rating Form. Students who chose not to

participate or wished to leave the study were still provided with standard feedback on their performance in the role plays.

The instruments were administered to the students at the beginning and end of the semester. The instructor collected the self-ratings but did not view them. Participants completed the Pre-role Play Form prior to beginning role playing in class. Participants were randomly assigned to counseling triads twice during the semester. Participants were assigned to one of two types of role play triads for the semester: 1) scripted problem or 2) personal concern. While one author (Shepard, 2002) suggested the use of one client script developed by the class, we opted for multiple scripts as a way to expose students to the variety of issues a client might present. The scripts reflected common problems presented by clients in a counseling setting. Participants in the scripted problem triads were randomly assigned one of ten scripted problems to role play as clients in their triads during the first of half of the semester. When they role-played the counselor, their client also had scripted problems. Two sample scripts are included below:

Script 1: You are a beginning freshman in college. This is your first time being far away from home and you're experiencing a wide variety of emotions (excitement, fear, etc). You haven't made any friends yet, and you're feeling lonely. You're coming to counseling in the hopes that it will make you feel better.

Script 2: You are responsible for caring for your elderly mother. Her health has deteriorated significantly. You find it difficult and stressful to care for her. You feel guilty because you are considering placing her in a nursing home. You are seeking counseling to help you sort out this decision.

Participants in the personal concern triads discussed real personal concerns as clients and counseled clients with personal concerns. Students were advised to consider personal boundaries

when choosing a personal concern, and given examples of possible issues to discuss. Some of the issues (both scripted and personal) included: anxiety/stress management, relationship issues, career confusion, family relationships, time management and parenting concerns.

At midpoint in the semester, students were assigned to new groups, but the group problem type stayed consistent (i.e., students assigned to a group with a scripted problem received a different script, and students assigned to the personal concerns group used a new personal concern). New scripts were given at midpoint, and students in the personal concerns group were asked to use new concerns as a way to increase exposure to common client issues and students. Group membership was changed in an effort to provide participants exposure to diverse counseling styles, personalities, and backgrounds.

Role-plays were evaluated twice during the semester: at the first role-play session and at the last role-play session of the semester. For the first session of every triad, the order of participation (counselor, client, observer) was randomly assigned. After performing each role in the triad (e.g. counselor, client, and observer), participants completed the portion of the Post-Role-play Form that related to that role. At the end of the session, they completed the remainder of the form which addressed the entire role-playing session. Evaluation of the recorded "counselor" sessions were completed by the instructor using the Instructor Rating Form. Written feedback was provided to the participants for each session.

Data Analyses

Repeated one-way ANOVAS were used to examine the mean ratings of confidence, skills and empathy categories rated by the student and instructor using role-play group as the between subjects variable at Time A and B. Categories included specific microskills (nonverbal, listening, responding and reflecting, confronting and facilitating) and overall ratings of skills, confidence

and empathy. Paired t-tests were used to determine the role (counselor, client, observer) that had the greatest impact on confidence, skills and empathy at time A and B. Percentages were calculated to determine which role students preferred for building confidence, skills and empathy, and Chi-square analyses were used to examine if these preferences differed significantly by type of role-play. Pearson Product Moment Correlations were conducted to identify relationships among preference for using scripts and the variables listed above.

RESULTS

Repeated One-Way ANOVAs were used to examine if type of role-play (scripted or personal concern) impacted confidence, skills, and empathy differently, with type of role-play as the between-subjects factor. Type of role-play (scripted or personal) did not have a significant impact on microskills, overall skills, confidence, or empathy at Time A or B as indicated by instructor or student ratings.

Paired t-tests were used to determine which role (counselor, client, or observer) had the greatest impact on confidence, skills, and empathy at Time A and Time B (see Table 1). Significant differences were found for two pairs on empathy at Time A. Students who had just played the counselor role or the client role rated their empathetic responses significantly higher than when they played the observer role. At Time B, significant differences were found among the roles for self-ratings of confidence and skills. Students in the counselor role rated their confidence and skills significantly higher than when they were in any other role.

Students were asked which role they preferred for building confidence, skills and empathy. Percentages for these preferences are reported in Table 2. At Time A and Time B, the majority of participants stated that playing the counselor role most enhanced their skills and confidence, while students preferred the client role at both times for developing empathy. Chi-

square analyses revealed one significant difference. At Time A, students in the scripted group preferred the Observer role for developing empathy (N=5; 55.6%) over the Counselor role (N=3; 33.30%) or Client role (N=1; 11.1%), while those who used personal concerns preferred the Client role (N=7; 63.6%) over the Counselor role (N=3; 27.30%) or Observer role (N=1; 9.10%), X^2 (2, N = 20) = 7.04, p = .03. Students were asked to rate their belief that role-plays were an effective way to build confidence, skills, and empathy. At both Time A and B, students indicated strong agreement for the three variables, with the lowest average rating a 4.44 and the highest a 5.0 (on a 5.0 scale).

Pearson-product moment correlations were used to examine correlations between a rated preference for scripted role-plays, microskills, overall skills, and confidence. Preference for using a script at Time A was negatively correlated to students' pre-role-play evaluation of nonverbal skills (r = -.61**, p < .01), listening (r = -.75**, p < .01), confrontation (r = -.63**, p < .01), facilitation (r = -.61**, p < .01), overall skills (r = -.56*, p < .05), and overall confidence (r = -.61**, p < .01). No significant relationships were found between preference for script at Time A and empathy, nor between preference for script and instructor ratings. Preference for script at Time B yielded no significant correlations with self ratings, but two significant correlations with instructor ratings of facilitation skills (r = .85**, p < .01) and empathy (r = .55*, p < .05).

Discussion and Implications

This study provides empirical information on the pedagogical tool of role-playing in a beginning counselor education course. We found that at the beginning and end of the course, students consistently highly rated the beliefs that role-play was helpful in developing skills, confidence, and empathy. We also found that type of role-play (scripted or personal) did not have a significant impact on specific microskills, overall skills, confidence, or empathy at Time

A or B as indicated by instructor or student ratings. Thus, instructors can use either scripts or personal concerns knowing that students see this technique as valuable, and without concern that one type of role-play is inferior to the other in terms of building student skills, confidence, or empathy. Given the concerns about the use of personal issues in this type of training exercise, our findings suggest that instructors can feel confident in the use of scripts as an effective alternative.

Our research also examined how the counselor, client, and observer roles impacted self ratings of skills, confidence, and empathy at the beginning and end of the semester. We found that while there were differences at Time A on self-ratings of empathy, with highest ratings during the Counselor and Client roles, there were no differences on ratings of skills or confidence. The opposite happened at Time B, when self ratings of skills and confidence (but not empathy) showed significant differences when in the Counselor role.

A difference between preference and self-ratings was noted. At Time A, students preferred the client role for developing empathy but rated themselves higher on empathy while they were in the counselor role. Our findings confirm Furr and Carroll's (2003), in that students value the Counselor and Client roles because of their affective impacts, and provide evidence that the Observer role also has an affective impact. While our research did not address specifically whether students valued role-play or specific roles for skill development or affective impact, our findings do suggest that that each role serves a purpose for some students, and thus has value as a pedagogical technique. Further research is necessary to identify group characteristics of those who prefer the different roles, and might yield implications for more individual teaching and learning approaches. For example, students who prefer the observer role

for building skills, empathy, and confidence might take advantage of additional videos prior to acting in the counselor or client role.

Both scripted and personal concerns role-plays have a similar impact on student and instructor evaluations of the student's skills, confidence, and empathy. Students who preferred using scripts at Time A rated themselves lower on most of the microskills, including nonverbal, listening, confrontation, and facilitation, as well as their overall skills and confidence, but not on empathy. However, preference for script was unrelated to how the instructor rated students at Time A. In addition, those who were in the scripted group at Time A preferred the observer role over the other roles for enhancing empathy, while those in the personal concerns group preferred the client role over the other roles. Perhaps these students had lower counselor self-efficacy to begin with, and felt safer with a problem crafted by the instructor as compared to an unknown problem a classmate by provide.

The negative relations between preference for scripts and self-ratings disappeared at Time B, but those preferring scripts at Time B had higher instructor ratings for facilitation skills and empathy. It is possible that this difference reflects a change in student confidence over time. Perhaps the personal concerns generated by students at the end of the semester don't offer enough diversity in terms of issues and difficulty, while scripts would ensure variety. Further research might examine if the timing of introducing scripts impacts skills, confidence and empathy.

Conclusion

The results of this study as well as the recommendations should be interpreted with an awareness of the study's limitations, which mainly include a small sample size and the lack of a standardized instrument. Despite these limitations, we believe that this study lays an important

foundation for future research into the pedagogical technique of role-play. While our research begins to answer two basic questions about role-plays, we must strongly echo the sentiments of Fuqua and Gale (1982), who made a call for future researchers to examine which elements of role-play provides the most successful behavior and attitude changes.

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Table 1

Impact of Roles on Self-Rating of Confidence, Skills, and Empathy

	Pair 1			Pair 2			Pair 3		
Counselor	Co.	Cl.	T	Co.	Obs.	T	Cl.	Obs.	T
Variable									
Time A									
Confidence	3.11	2.72	1.69	3.11	3.05	.325	2.75	3.05	-1.24
Skills	3.15	2.85	1.45	3.15	3.2	237	2.85	3.20	-1.79
Empathy	3.63	3.58	.27	3.63	3.26	2.35*	3.65	3.30	2.35*
for Client									
Time B									
Confidence	4.13	3.31	4.33**	4.13	3.67	2.82*	3.27	3.67	-2.10
Skills	4.31	3.44	3.05**	4.31	3.81	2.45*	3.44	3.81	-1.19
Empathy	4.00	4.13	57	4.00	3.81	.61	4.13	3.81	1.43
for Client									

Note: *p < .05; ** p <.01; *** "Co = Counselor; Cl = Client; Obs = Observer"

Table 2: Preferred Role for Developing Confidence, Skills, and Empathy

		Time B				
	Counselor	Client	Observer	Counselor	Client	Observer
Skills	11 (55%)	2 (10%)	7 (35%)	12 (60%)	1 (5%)	3 (15%)
Confidence	13 (65%)	4 (20%)	3 (15%)	14 (70%)	2 (10%)	0 (0%)
Empathy	6 (30%)	8 (40%)	6 (30%)	5 (25%)	7 (35%)	4 (20%)

Note: At Time B, 4 ratings (20%) were missing.