

ELEMENTARY SCHOOL COUNSELLORS' PERCEPTIONS OF THEIR
CURRENT ROLE AND THEIR IDEAL ROLE WITH PARENTS AND FAMILIES

by

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Abstract

This study sought to identify B.C. elementary school counsellors' perceptions of: (a) the extent to which they are currently using six different forms of intervention with family members (family consultation, family counselling, family therapy, parent education, parent consultation, parent counselling); (b) the extent to which they would like to use these forms of family member intervention; (c) the need for school districts to offer services for family members; (d) the appropriateness of these functions to the elementary school counsellor role; (e) the severity of the barriers hindering counsellors' performance of the six different forms of family member intervention; and (f) what is needed to overcome these barriers. The accessible sample of 327 elementary counsellors was determined through written contact with school district Heads of Student Services. The survey instrument, developed specifically for this study, was completed and returned by 249 (76.2%) counsellors. Sample means and standard deviations were calculated to determine the counsellors' perceptions of their current and ideal extent of use of the six family member interventions as well as six other "traditional" school counsellor functions. To determine if the differences between these current and ideal means were significant, two-tailed paired samples t tests were conducted. Sample mean and standard

deviation scores were also calculated to determine the counsellors' perceptions of the severity of the barriers to performing the six family member interventions. The results of this study indicate that of the six forms of family member intervention, B.C. elementary counsellors would like to perform parent consultation (\underline{M} =1.86) and family consultation (\underline{M} =2.33) to the greatest extent ("Often"); they also believe these interventions to be the most appropriate to their role. Parent education, parent consultation, and family consultation were reported as the family member interventions most appropriately offered by the school district. "Work Load" and "Work Schedule" were consistently reported as the largest barriers to performing each of the six different forms of family member intervention. The recommendations most frequently made by counsellors to overcome the barriers to family member intervention included: (a) hire more counsellors; (b) provide increased opportunities for training; (c) provide counsellors with a more adequate space in which to work; and (d) redefine, clarify and narrow the role of the elementary school counsellor.

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Dedication

I would like to dedicate this thesis to all elementary school counsellors. Your commitment and efforts towards improving the emotional and social health of children deserves both recognition and support.

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CHAPTER 1

INTRODUCTION

Background to the Problem

It has long been recognized that the family is the single most influencing factor on the personality development of the child (Adler, 1927; Dinkmeyer & Carlson, 1977; Dreikers & Soltz 1964; Freud, 1929; Ginot, 1965). It is within the family that the child learns behavior patterns, attitudes, perceptions of self and relationships, as well as how to respond to the social and academic tasks of school (Adler, 1927; Dreikers & Soltz, 1964; Nicoll, 1984). Family structure and atmosphere contribute significantly to the mental health of the child (Dinkmeyer & Dinkmeyer, 1984). Dysfunctional parent/child and family interaction patterns are recognized as significant factors leading to maladaptive socialization of the child (Adler, 1927; Dreikers & Soltz, 1964; Nicoll, 1984). Hence for nearly 7 decades, authorities have emphasized the importance of studying personal interrelationships at home as a basis for understanding social, emotional, and/or behavioral problems at school (e.g., Adler, 1927; Dreikers & Soltz, 1964; Muro & Dinkmeyer, 1977).

Despite this awareness, conventional school counselling interventions have traditionally focused on the individual student to the exclusion of parents or family. It is

therefore not surprising that there has been longstanding dissatisfaction with the effectiveness of school counselling techniques (Brown & Brown, 1976; Friesen & Der, 1984; Palmo, Lowry, Weldon, & Scioscia, 1984; Umansky & Holloway, 1984).

The school counselling literature of the 1960s and 1970s responded to these issues with rationales for, models of, and research on the effectiveness of parent education and parent consultation. In the 1980s and now in the 1990s this response has expanded and intensified; a greater number of proposals are being offered for the use of family interventions such as consultation, counselling, and/or therapy to treat school problems.

This shift is largely due to an awareness that for over a decade, both society and the family have been experiencing significant changes and a considerable degree of turmoil. More and more children are experiencing the emotional difficulties resulting from societal violence, poverty and unemployment, abuse, substance abuse, and family instability. Divorce and single-parent families are common, and the number of two-career, blended and foster families is rising. Many children today are being raised without the support necessary to weather the stressors of family and societal change (Coldicutt, Green, & Jobson, 1988). These issues are affecting students' behavior, relationships and academic performance at school (Beck, 1984; Goldenberg & Goldenberg, 1981; McDaniel, 1981; Nicoll, 1984; Palmo et

al., 1984). "For many educators, children and youth today are a 'generation at risk'" (Coldicutt, Green, & Jobson, 1988, p. 8).

For the past 25 years it has been repeatedly suggested that the school, and especially the elementary school counsellor, should assume the responsibility of offering services to parents and families (Luckey, 1967; Shaw, 1971; Christensen, 1972; Diekmeier, 1989; Dinkmeyer & Dinkmeyer, 1984). The primary rationale is effectively stated by Strother and Jacobs (1986):

Because the family and the school function as the two most significant institutions affecting the socialization and development of the child, it is crucial that they understand one another through direct communication and cooperate to help the child. (p. 292)

A number of other arguments have been offered to encourage schools to take on this responsibility. In addition to their traditional role of academic education, schools are now being called upon to protect, aid, and nurture children (Coldicutt, Green, & Jobson, 1988). It is argued that despite the presence of various institutions that can support and educate parents, the public school is the optimum choice since it has maximum accessibility to children and parents (Nye, 1988). The elementary school is asserted to be the most ideal setting for intervening with parents and families since the primary school child is still

very dependent upon and connected to the family (Luckey, 1967), and the school is the one resource that is in the life of the child and the family on a long-term and frequent basis (Beck, 1984). It has also been suggested that academic remediation is not as effective as remediating family dysfunction (Bernstein, 1980).

Nonetheless, a gap continues to exist between the perceived need for, and the implementation of parent and family interventions in elementary school counselling programs (Dinkmeyer & Dinkmeyer, 1978; Umansky & Holloway, 1984; Carreiro & Schulz, 1988). Schools are criticized, both by the literature and by elementary counsellors themselves (in consultation with the present author, December, 1990) for seeing "children only in terms of what should be a relatively narrow segment of their lives, and that is what kind of grades they make" (McComb, 1981, p. 277).

In fact, the reasons most often given for the lack of services for parents and/or families are connected to this criticism: lack of administrative support, inadequate counselling program evaluations, training deficiencies, insufficient time, and unmanageable counsellor/pupil ratios. These barriers reflect the lack of priority given to caring for the emotional health of students. Finally, school counsellors themselves have been criticized for their unwillingness to take personal responsibility for changing

their own professional roles (Dinkmeyer & Dinkmeyer, 1978).

For some time now, elementary school counsellors have been asked to develop priorities for their programs and to engage in systematic efforts to implement those priorities (Allan & Ross, 1979; Bonebrake & Borgers, 1984; Wilgus & Shelley, 1988). Research indicates that teachers (Wilgus & Shelley, 1988), principals (Bonebrake & Borgers, 1984), and counsellors themselves (Bonebrake & Borgers, 1984; Carreiro & Schulz, 1988) believe that a higher priority should be placed on parent education/contact/consultation than presently exists. Studies in British Columbia suggest that directors and superintendents (Allan, 1976), principals, and primary and intermediate teachers (Allan, Doi & Reid, 1979) believe that family counselling skills are among those of greatest immediate need. Special services directors and counsellors (Allan & Bolland, 1981) placed an even higher priority on the need for family counselling in elementary school counselling programs. In recent communication with the present author, a number of elementary school principals have expressed the view that counsellors should be intervening with parents more frequently than they are currently doing so (May to November, 1990).

To date there is only one unpublished study, a doctoral dissertation carried out by Beck (1984), that focuses specifically on the attitudes of school counsellors toward family counselling. This study examines the availability of

family counselling in the elementary and middle school setting, as well as elementary school counsellors' perceptions of family counselling as a role function. School counsellors and counsellor educators in metropolitan Milwaukee reported the following: there is a need for family counselling; family counselling is an appropriate function of the school counsellor's role; barriers preventing the implementation of family counselling include a lack of time, a heavy work load, and no appropriate time to meet with families. In addition, school counsellors reported that family counselling is an area in which they would like to obtain more training and increase their involvement.

Beck's (1984) study presupposes that family counselling should be offered in the elementary schools by school counsellors. Thus far there has been no attempt to investigate counsellors' perceptions of the wider range of family member intervention activities. Nor does this or any other study address the lack of distinction made between the terms consultation, counselling and therapy in relation to school counsellor roles. Moreover, it has thus far been assumed that if the elementary school is to intervene with parents and families, it would automatically be the responsibility of the elementary counsellor. Finally, while academic and theoretical understanding have progressed, the long-standing barriers to any kind of involvement of parents and/or families in school counselling programs still exist.

It seems important, especially in light of the current debate about role functions and counsellor responsibility, that elementary school counsellors themselves be consulted regarding their current and potential role with family members, the severity of the barriers preventing them from providing services to family members, and the possible solutions for overcoming barriers.

Purpose of this Study

The primary purpose of this investigation was to determine the perceptions of British Columbia's elementary school counsellors of their current role and their ideal role with parents and families.

More specifically, this research sought to identify elementary school counsellors' perceptions of: (a) the extent to which they are currently using six different forms of intervention with family members (family consultation, family counselling, family therapy, parent education, parent consultation, and/or parent counselling); (b) the extent to which they would like to use these forms of family member intervention; (c) the need for school districts to offer services for family members; (d) the appropriateness of these functions to the elementary school counsellor role; (e) the severity of the barriers hindering counsellors' performance of the six different forms of family member intervention; and (f) what is needed to overcome these barriers.

Definitions

For the purposes of this study, the following terminology and definitions will apply:

Elementary school counsellor. That person employed and labelled "elementary school counsellor" by the school district.

Family. Consists of at least one child and one parent or guardian.

Ideal. The counsellors' perceptions of the type and amount of service they would like to be able to offer to family members.

Family Consultation. The counsellor provides short-term assistance to help a family understand a child's problem within the context of both the school and the family; provides information about community and school programs that may be of assistance; may refer the family for family counselling or therapy; and/or offers suggestions to family members about how to assist the child both at school and at home.

Family Counselling. The counsellor provides assistance to help a family resolve issues (e.g., loss, illness, single-parent family adjustment) that are linked to difficulties that a child is experiencing in school. This assistance could take the form of giving information, facilitating awareness of painful emotions, and teaching strategies for improving communication skills and problem

solving.

Family Therapy. The therapist becomes involved in an intensive treatment process with a family in which one or more children are experiencing difficulties at school. The therapeutic process is intended to create shifts in world views, interpersonal patterns, hierarchies, roles, and rules. Involvement and change occurs at a deeper level than with family counselling.

Parent Education. The counsellor facilitates educational meetings with a group of parents whose children may or may not be experiencing difficulties at school. The primary focus of these meetings is to help parents learn more effective parenting skills and to improve their relationships with their children.

Parent Consultation. The counsellor assists parents to understand their child within the educational and social context of the school; provides information about school or community programs which may be of assistance; and offers suggestions regarding parenting skills which may help the child to grow both at school and at home.

Parent Counselling. The counsellor provides assistance to parents individually or as a couple regarding personal issues such as divorce, loss, substance abuse, family of origin influences on parenting, child behavior influences on the marital relationship, etc. These issues usually come to the attention of the counsellor because of difficulties that

the child is experiencing in school.

Research Questions

1. To what extent are elementary school counsellors currently using each of the following six different forms of intervention with family members: family consultation, family counselling, family therapy, parent education, parent consultation, and/or parent counselling?

2. To what extent would elementary school counsellors ideally like to use each of these forms of intervention with family members?

3. Is there a significant discrepancy between the current extent and the ideal extent of counsellors' use of these forms of family member intervention?

4. Which forms of intervention with family members do elementary counsellors believe should be offered by the school district?

5. Which forms of intervention with family members do elementary school counsellors believe to be appropriate to their role?

6. What are the counsellor-perceived barriers to intervention with family members?

7. To what degree do elementary counsellors perceive these barriers to be hindering their ability to perform each of the six forms of intervention with family members?

8. What are the recommendations of elementary school counsellors for overcoming these barriers?

Assumptions

This study assumes that: (a) the school and the family are the two most significant influences on the development of the child; (b) the school and the family should communicate about the child's development; (c) school counselling programs, as part of their services to students, should offer some form of service to parents and/or families.

Significance of the Study

This study is significant for the following reasons:

1. Unlike previous research, it takes one aspect of elementary school counsellor function, traditionally limited to "contact with parents," and examines it in detail.

2. This study extends Beck's (1984) research on family counselling in elementary schools. It provides data about other counsellor functions with family members, as perceived by counsellors. Moreover, it extends this research to a Canadian context.

3. The data provides information about the current state of family member intervention as it pertains to and is perceived by elementary school counsellors in British Columbia.

4. The data provides information about the ideal state of family member intervention as it pertains to and is perceived by elementary school counsellors in British Columbia.

5. Through data analysis and interpretation, recommendations are made for modifying the role of the elementary school counsellor as it pertains to parents and families.

6. An analysis and interpretation of the data permits recommendations for training elementary school counsellors.

7. The data provides regional information about counsellor-perceived barriers, their severity, and recommended solutions.

CHAPTER 2

REVIEW OF THE LITERATURE

As indicated in the introduction, both parent and family interventions have been recommended for use by the elementary school counsellor in assisting students. This chapter presents a review of the literature pertinent to these two general areas of intervention, as well as to the role of the elementary counsellor in providing services to family members.

The first section of this chapter reviews interventions with parents, including parent education, parent consultation and parent counselling. The specific areas discussed are as follows: school counsellors' recognition of the importance of parents on the development of the child; the difficulties of distinguishing between the three forms of intervention; rationales offered for the school counsellor's use of these interventions; appropriate models of interventions; client issues for which these interventions are deemed appropriate; effectiveness research; barriers preventing the school counsellor from performing these functions; and finally, criticisms of these interventions.

The second section reviews interventions with the family, including family consultation, family counselling, and family therapy. Specific areas discussed include: the

lack of agreement regarding distinctions between the different functions; a comparison of the individual or intrapsychic model with the interpsychic model or family systems theory; rationales for the school counsellor's use of family interventions; effectiveness research; the debate regarding which form(s) of family intervention is (are) appropriate to the elementary counsellor role; models suggested to be appropriate for the school setting; client issues for which these interventions are deemed appropriate; recommendations made for the elementary counsellor's implementation of family interventions; and finally, the barriers preventing the school counsellor from performing these functions.

The third and final section of this chapter reviews the literature pertaining to the role of the elementary school counsellor with parents and families as perceived by teachers, principals, administrators and counsellors themselves, as well as the controversy surrounding the vagueness of this role.

Parent Education, Consultation and Counselling

Awareness of the influence of parents on children. The school counselling literature of the 1960s and 1970s saw an increased awareness of parent and family influence on the child, and expressed dissatisfaction with conventional school counselling interventions. It responded by offering rationales and models for parent education, consultation,

and/or counselling, and presenting research regarding the effectiveness of various approaches to working with parents. Cooney (1981) posited a direct relationship between the emergence of the elementary school counsellor movement in the 1960s and of the role of the school counsellor as parent educator. The developmental emphasis of counselling in the elementary school, combined with the opportunity for prevention rather than remediation, provided an ideal setting for parent education.

Clarke-Stewart (1981) reported several conditions that focused attention on the needs of parents in the 1970s: parents were increasingly seen as the most important influence on the child's development; the school was not seen as effective in changing children; families were under great societal stress; there was evidence that many parents were not effective; and new scientific knowledge on child rearing became available.

Distinguishing between intervention forms. Despite general agreement as to the necessity of working with parents, the literature of the past three decades reveals confusion regarding what form this work should take. There is a lack of consensus regarding the distinctions between intervention forms. Authors have frequently used the terms parent education, parent consultation and parent counselling interchangeably and it is nearly impossible to find agreement regarding definitions (Bundy & Poppen, 1986;

Erchul & Conoley, 1991; Medway, 1988).

Brown and Brown (1975) claimed that parent education can be distinguished from parent counselling or parent consultation on the basis of process and content. From their perspective parent education is an intervention that follows an agenda or curriculum and in which the leader uses more traditional pedagogical techniques. However, these authors did not attempt to specifically define parent counselling or consultation. Tavormina (1974), on the other hand, equated parent counselling with parent education, identifying the child as the client in both.

It is often difficult to determine whether a parent group is intended primarily for educational or for therapeutic outcomes. Fine (1989) explained the difficulty of trying to distinguish between parent education and parent group counselling:

Although such a distinction can be made, the separation between parent education and therapy tends to dissolve in actual practice. When a group of people come together repeatedly, sharing their personal experiences and concerns, the process soon takes on an 'air' of group therapy even when the ostensible goals are educational. (p. 14)

The terms parent education and parent training are frequently used interchangeably. According to Dembo, Sweitzer and Lauritzen (1985), parent education is the more

general term, while parent training, subsumed under parent education, is defined as a process that includes at least the component of teaching a specific skill or set of skills.

Dinkmeyer (1968) defined parent consultation as the procedure through which parents and counsellors communicate, with an emphasis on joint planning and collaboration. More specifically, he outlined the activities involved in this intervention as sharing information and ideas, coordinating, comparing observations, providing a sounding board, and developing tentative hypothesis for action. Dinkmeyer and his associates have used the term parent consultation to describe an educational parent group (Dinkmeyer & Dinkmeyer, 1978; Dinkmeyer & McKay, 1974; Muro & Dinkmeyer, 1977).

Parent consultation is defined by Bundy and Poppen (1986) as "...a helping relationship between the counsellor and one or more persons (those receiving consultation) who are responsible for providing care and training for children" (p. 216). This definition is open to a wide range of activities, including those which are defined by others as parent counselling or parent education.

Rationales for intervening with parents. Over the past 3 decades a number of rationales have been offered for the elementary school counsellor's implementation of parent consulting, counselling and/or education programs. Because of the aforementioned difficulty in differentiating between the intervention forms, these rationales often overlap. An

attempt is made here to differentiate where possible.

The rationales given for the elementary school counsellor providing parent consultation and/or for working with parents in general include:

1. It makes counsellors more visible and approachable to the people who have an important role in evaluating their services (Dinkmeyer & Dinkmeyer, 1978; Muro & Dinkmeyer, 1977).

2. It provides a unique opportunity to offer services to parents rather than involving them only when there is a problem or crisis (Dinkmeyer & Dinkmeyer, 1978).

3. These services can provide the means to deal with the ever-increasing demand for services and the frequently unmanageable counsellor-pupil ratio. (Brown & Brown, 1975; Bundy & Poppen, 1986; Dinkmeyer & Dinkmeyer, 1978; Shaw, 1971; Strother & Jacobs, 1986; Umansky & Holloway, 1984).

4. Working with parents addresses the need to focus on prevention rather than remediation (Brown & Brown, 1975; Bundy & Poppen, 1986; Strother & Jacobs, 1986).

5. Since parents are the major influence on the child's development, changing their attitudes and behavior can have a significant impact on the child's development (Brown & Brown, 1975; Conroy, 1987; Tavormina, 1974).

6. Working with parents strengthens the efficiency and impact of interventions with the child ((Brown & Brown, 1975; Bundy & Poppen, 1986; Christensen, 1972; Simon, 1988).

7. School counsellors are frequently the professionals to whom parents turn for assistance (Getz & Gunn, 1988).

Strother and Jacobs (1986) advocated the school counsellor's use of conference-type consultations with parents and outlined the benefits of such intervention. These conferences would provide an opportunity for parents to understand their child's behavior and to learn ways to cope with it. The counsellor would gain an opportunity to understand the child's family world, as well as information about how the child's perception of the world affects her or his school performance and behavior. Finally, the conferences would afford an opportunity to facilitate communication and prevent the misunderstandings that frequently occur between the home and the school.

The following rationales have been offered for the elementary school counsellor's implementation of parent education programs:

1. While the role of parent is one of the most challenging tasks that can be undertaken, parenting is a task for which parents are extremely unprepared and undereducated (Dinkmeyer & Dinkmeyer, 1984; Fine, 1988; Muro & Dinkmeyer, 1977).

2. Corrective efforts in working with parents are best established through educational efforts; since parent education is an educational function it is the responsibility of educators and can most effectively be

provided through the school (Muro & Dinkmeyer, 1977).

3. These programs help parents to find a mutual source of support, to become aware of and understand the impact of their actions, attitudes, and feelings on their children, and to realize that other parents have similar difficulties (Carlson, 1972; Luckey, 1967; Muro & Dinkmeyer, 1977).

4. Parents learn communication skills which, transferred to the home, can positively influence the personality development of the child and maintain the marital relationship (Luckey, 1967).

5. Parent education provides an opportunity to work with a larger number of parents than does a one to one consultation situation.

6. The school counsellor does not have to be an expert in child development or family therapy and only needs to be trained in parent education and consultation (Kelly, 1976).

7. There will be a continuing need for parent education in the future because individuals will have less of an opportunity to learn parenting skills due to smaller family size, an increased use of child care outside the home, and isolation from other family members during child-rearing years (Clarke-Stewart, 1977).

Despite the fact that parents' own personal issues frequently have a direct impact on the child, there has thus far been no attempt to provide specific rationales for the elementary school counsellor providing services to parents

regarding their own difficulties. This is in part due to the lack of distinction between work with parents that is educational and work that is therapeutic. In addition, while some authors acknowledge that benefits are to be gained by parents talking about their own feelings and problems (Luckey, 1967; Navin & Bates, 1987), there still exists a strong belief that the elementary school counsellor's first priority is to assist in correcting the child's difficulties.

Intervention models and client issues. There are a number of theoretical models or approaches to parent education and/or consultation suggested for school counsellors' use, the most popular of which include: Parent Effectiveness Training (Gordon, 1975); a number of behavioral parent training programs (e.g., Becker, 1971); Adlerian parent study groups (Dreikurs & Soltz, 1964); Systematic Training for Effective Parenting (Dinkmeyer & McKay, 1976); and Ginot's humanistic approach (1965).

The use of parent education or consultation has been suggested and/or implemented to improve the attitudes and achievement of remedial readers (Navin & Bates, 1987); to improve parents' understanding of their child's learning disabilities (Gold & Richmond, 1979); to promote parental self understanding (Downing, 1974; Luckey, 1967); to improve communication skills (Ginot, 1965; Bredhopt & Hey, 1985); to prevent child abuse (Bundy & Poppen, 1986; Downing, 1982);

and to learn and improve upon parenting skills (Becker, 1971; Bundy & Poppen, 1986).

A number of authors have cautioned against working with parents to the exclusion of children (Bundy & Poppen, 1986; Dinkmeyer & Carlson, 1973; Umansky & Holloway, 1984). They advocate a more holistic approach in which counselling helps to understand the child, and consultation provides a better understanding of the environment in which the child lives (Dinkmeyer, 1968).

Effectiveness research. Research on the effectiveness of working with parents is limited to the group parent education or consultation model. This research has produced mixed results and has many methodological flaws, making it difficult to draw any firm conclusions. To date, no parent education approach has surfaced as clearly superior (Getz & Gunn, 1988; Henry, 1981). Bundy and Poppen (1986) reviewed articles from the first 19 volumes of the Elementary School Guidance and Counselling Journal and issues of the School Counsellor since 1957 in which elementary school counsellors provided consulting services. Only 8 studies that focused on parent consultation/education (4 Adlerian, 3 PET, 1 Multimodal parent training) met their criteria for inclusion. From these studies the authors concluded that all of the parent groups had a positive effect. Significant changes resulted on such measures as parent attitudes, student motivation, child-rearing behavior, parent-child

communication, and academic achievement. Based on these results the authors suggested that school counsellors should enlarge their consultation role. While Bundy and Poppen (1986) hint at the possibility that these studies are methodologically flawed, they provide no details as to how and why.

Dembo, Sweitzer, and Lauritzen (1985) evaluated 48 investigations of behavioral, PET, and Adlerian parent education programs. Only three of these studies used school counsellors. While these reviewers found that certain changes in parental attitudes and/or child behavior were evident as a result of different educational approaches, these changes were not always consistent and were frequently dependent upon the type of assessment and educational approach used. Few of the studies met the criteria of a well designed research study, and those that were better designed produced mixed results. Consequently, there were not enough well designed studies to be able to draw definitive conclusions about the general effectiveness of parent education, nor the effectiveness of one type of program over another for a certain type of family or person.

A lack of randomization of subjects, absence or inappropriate use of control groups, failure to collect process data, and a lack of long-term follow-up designs were some of the common research problems that Dembo et al. (1985) found in many of the studies. Measurement problems

included: a reliance on self-report data, the use of measures validated for clinical rather than educational purposes, and the measurement of general child-rearing attitudes without a focus on the attitudinal change of parents toward their own children.

Medway and Updyke (1985) reviewed 24 studies published between 1973 and 1984 that involved group parent education interventions (behavioral, reflective or PET, and Adlerian). While many of these studies had been previously reviewed by Dembo et al. (1985), Medway and Updyke used an alternate procedure (meta-analysis) to carry out his review. The data indicated that these programs were effective in that the participants and their children showed an improvement that was 62% greater than a similar untrained population. The few studies that used follow-up measures indicated that the gains endured. However, again, less than half of the studies used adequate experimental procedures.

Clearly, research on the effectiveness of intervening with parents is of questionable quality. As Harmon and Brim (1980; as cited in Fine, 1988) conclude, "Our summation of the available evaluation research...rests on the premise that it is woefully inadequate - a reflection on the state of research and not necessarily on parent education itself" (p. 254).

Despite these mixed results regarding the effectiveness of working with parents, the literature has continued to

encourage school counsellors to increase their involvement with and services to parents (eg. Dinkmeyer & Dinkmeyer, 1984)

Barriers to intervention with parents. Nearly 25 years later a gap continues to exist between the perceived need for, and the implementation of parent consultation, education, or counselling activities in North American elementary school counselling programs (Carreiro & Schulz, 1988; Dinkmeyer & Dinkmeyer, 1984; Splete & Bernstein, 1981; Umansky & Holloway, 1984). There are a number of reasons, based on research and/or clinical experience, given for the reluctance of counsellors to offer parent consultation or education.

Counsellor education programs have been criticized for being slow to provide comprehensive training in consultation (Dinkmeyer & Dinkmeyer, 1984; Erchul & Conoley, 1991; Kahnweiler, 1979). The training that does exist has been described as "insufficient" both by this literature and by students or graduates of counselling psychology at U.B.C. (in consultation with the present author).

Splete and Bernstein (1981) conducted a survey of the consultation training offered to students in United States counselling programs and found that 95% (n=136) of the reporting institutions taught masters students consultation topics and skills, either in a separate course or as part of other courses. However, on average, consultation topics

represented only 15% of the material presented and less than one-half of the institutions required their students to take a separate course in consultation. While the authors concluded that the prevalence of consultation training in counsellor education programs is more widespread than anticipated, they also stated that it still may not be considered a critical component to the preparation of counsellors.

Umansky and Holloway (1984) have claimed that a lack of administrative support hinders the school counsellor's ability to work with parents. However Muro and Dinkmeyer (1977) argued that administrators would be very supportive of counsellors who implement systematic parent consultation and educational programs that are developmental and continuous, rather than crisis based. Schools have been criticized for taking a predominantly crisis oriented approach with parents and families which frequently leads to resentful and defensive confrontations (Dinkmeyer & Dinkmeyer, 1984; Kelly, 1976).

Other factors purported to prevent elementary school counsellors from intervening with parents include: an inflexible work schedule that does not provide an opportunity for evening meetings with working parents (consultation with counsellors in School District # 36, Surrey); the fact that parent consultation is often given less priority than the many other counsellor functions and

is therefore left unattended (Kelly, 1976); and a failure on the part of school counsellors themselves to engage in program evaluation and research (Umansky & Holloway, 1984) which hinders change and tends to leave them ineffective and open to criticism.

Dinkmeyer and Dinkmeyer (1978) have claimed that school counsellors do not take enough responsibility for the state of the school counselling profession: "Do counsellors believe in their capacity to influence the course of their own lives? Or do they believe that choice is only for their clients?" (p. 100). Later (1984) these same authors asserted that school counsellors hold faulty beliefs in that they see themselves as capable of working only with students. Moreover, Muro and Dinkmeyer (1977) contended that school counsellors only "pay lip service" (p. 329) to the importance of the family and parents' influence on the development of the child.

Criticisms of parent consultation and education. While the elementary school is being criticized for not involving parents in school counselling programs, there are also a number of criticisms being made of the parent consultation and/or education model. From the perspective of family systems theory, parents and children are involved in a process of mutual influence and parent education programs have been criticized for failing to consider the effect they can have on the entire family (Doherty & Ryder, 1980; Fine &

Jennings, 1985; Getz & Gunn, 1988). These authors make the following general criticisms of parent education programs:

(a) these programs tend to assume that causality in a parent-child relationship is unidirectional; (b) children are typically left out of the process; (c) parents receive the indirect message that they are at fault, which can result in less confidence and more guilt; (d) since mothers attend much more frequently than fathers, these programs can have a negative effect on the child-rearing partnership and create family division; and (e) typically the same skills are taught to all parents regardless of the specific characteristics of each family.

Concern has also been raised regarding the ethical issues involved in training parents to become more effective controllers of their childrens' behavior. Parent education programs are sometimes viewed as reinforcing gross manipulation of children and the development of covert manipulation in families (Doherty & Ryder, 1980; Fine & Jennings, 1985; Sapon-Shevin, 1982).

Family Consultation, Counselling, and Therapy

Distinguishing between intervention forms. As with the parent interventions discussed above, distinguishing between family consultation, counselling, and therapy proves to be an arduous task. Often the terms family counselling and family therapy are used interchangeably with no clear differentiation in terms of objectives, activities or client

dysfunction. In fact, this reviewer found only one school counselling article that attempted to clearly define and distinguish between different family member interventions (McComb, 1981).

McComb (1981) views family work as a ladder. On the first rung she places family conferencing, which can provide the family with the insight necessary to return home and realign family relationships. She believes that this can be accomplished by the counsellor who has skills in parent conferencing and knowledge of family systems. On the next rung of the ladder McComb (1981) places family counselling, which she views as appropriate for families whose growth patterns have become stuck for longer periods of time. To provide this service the counsellor must have studied, observed, and received supervision in family counselling with a certifiable family therapist. At the top of the ladder is family therapy. This intervention is suitable for families in which one or more members demonstrates a serious psychological disorder. McComb (1981) believes that the school counsellor should refer this type of family to a qualified therapist and provide support to the family's student members while they are in school.

In an interview with McComb (1981), Whitaker defined family counselling as appropriate for those families in which a child or children are experiencing behavior problems (e.g., not doing school work or running away). He used the

term therapy for the treatment of families who are grossly disturbed, or in which one of its members is psychotic or has a serious psychosomatic illness. However Whitaker acknowledged that it is frequently difficult to differentiate between the two intervention forms.

Interpsychic versus intrapsychic models. The field of family counselling or therapy is itself relatively new, and its application to school counselling even newer. Historically, this form of intervention has been performed as a therapeutic process by mental health specialists in noneducational settings (Knox, 1981). While family therapy and/or counselling have not always been viable alternatives for the school counsellor, they are now more frequently being considered necessary for treating children in the school setting (Amatea & Fabrick, 1981; Palmo et al., 1984).

The major assumptions upon which family systems theory is built are radically different from those of the individual counselling approach that is familiar to most school counsellors (Amatea & Fabrick, 1981). School counsellors are usually only trained in theories based on the linear model of dysfunction in which the cause of maladaptive behavior is viewed as residing within the individual (Perosa & Perosa, 1981).

In contrast to individual counselling, which focuses on uncovering and/or relieving a client's intrapsychic conflicts, family counselling or therapy focuses on the

family system itself (Goldenberg & Goldenberg, 1981). In other words the systems perspective is interested in the individual within the context of how family members influence one another. From this perspective the child is seen as reflecting the stresses and strains within the family or the school system, or between the two, rather than as having an intrapsychic problem (Worden, 1981).

Shift towards family systems perspective. The school counselling literature of the past decade reflects an increased awareness of the impact of the family on the child's development. Many authors are attempting to demonstrate the growing need for school counsellors to work with families. Several articles (e.g., Amatea & Fabrick, 1984; Golden, 1983; Goldenberg & Goldenberg, 1981; McDaniel, 1981; Wilcoxon & Comas, 1987) and books (e.g., Golden & Capuzzi, 1986; Hansen & Okun, 1984; Walsh & Gibling, 1988) describe the use of family consultation, counselling, and/or therapy in the treatment of school problems. Two special issues of The School Counselor (vol. 28(3), 1981; vol. 29(2), 1981) and of the Elementary School Guidance and Counseling Journal (vol. 15(3), 1981; vol. 19(1), 1984) are exclusively devoted to the topic of family counselling.

The recent emergence of these proposals to involve family members in the treatment of the individual student resulted in part from continued frustration with the lack of success of conventional school counselling techniques

(Amatea & Fabrick, 1984; Palmo et al., 1984). Another factor contributing to this new development is a shift in the role of the school counsellor from an emphasis on testing and educational programming to assisting students directly with their interpersonal, emotional and adjustment difficulties (Nicoll, 1984). The apparent consequence of this has been an awareness of the interrelationship between students' difficulties in school (both academic and behavioral) and problems in their families (Friesen, 1976; Nicoll, 1984; Palmo et al., 1984).

According to Friesen (1976), three reasons account for the growing need to include families in elementary school counselling. First, there is increased recognition that a student's emotional disturbance may be a symptom of an unhealthy environment. Secondly, the concept of the family as the most important influence on the development and functioning of the child represents an ideal focus for prevention and intervention. And thirdly, with the development of the community school concept, there are fewer barriers between the school and the community; the family is becoming the natural focus for primary and secondary prevention and treatment.

Rationales for family intervention. The literature presents a number of rationales for offering services to families (consultation, counselling, and/or therapy) in elementary school counselling programs. Many are similar to

the rationales given for working with parents. Those discussed include:

1. At the elementary level this intervention can prevent further and more serious learning difficulties (Bernstein, 1980).

2. The approaches used in family counselling/therapy are applicable to developmental and prevention-oriented school counselling programs (Knox, 1981).

3. School counsellors are often frustrated in their attempts to persuade a family to follow through on a referral for family therapy (Amatea & Fabrick, 1984; Nicoll, 1984).

4. Consultation with parents and teachers, and individual and group counselling are sometimes ineffective for eliminating problem behavior (Amatea & Fabrick, 1984).

5. Working within a systems perspective provides a theoretical and practical base for application to many areas of school intervention (Friesen, 1976; Goldenberg & Goldenberg, 1981).

6. The elementary school counsellor is frequently called in to evaluate and understand a child's classroom behavior. This may be more accurately accomplished with an understanding of the broader context of the child's family atmosphere (Worden, 1981).

7. The school and school counsellor are viewed as much less threatening to parents than traditional counselling

agencies which often carry the stigmas associated with being "mentally ill" (Nicoll, 1984).

8. Family counselling in the school makes this service accessible to all families regardless of income (Nicoll, 1984).

9. The school counsellor is in the optimal position for establishing contact with both the child and all of the significant adults in a child's life (Diekmeier, 1989; Goldenberg & Goldenberg, 1981).

10. Counselling interventions involving the significant adults in the child's life are quicker and more effective in bringing about lasting change (Dicocco, Chalfin, & Olson, 1987; Goldenberg & Goldenberg, 1981; Nicoll, 1984).

11. Since some children are resistant to counselling, the involvement of the family can increase motivation to seek help and may avoid desperate acting out or the worsening of symptoms, which often serve as a means of forcing the family to take action (Framo, 1981).

12. Many significant changes occurring in the structure of the family over the past decade (e.g., divorce, single-parent and blended families, two-career families, substance abuse) are affecting students' behavior, relationships and academic performance at school (Beck, 1984; Goldenberg & Goldenberg, 1981; McDaniel, 1981; Nicoll, 1984; Palmo et al., 1984).

13. The efforts of school personnel can either be supported or sabotaged by the family (Golden, 1983; Nicoll, 1984; Palmo et al., 1984).

14. Counsellors can gain both professionally and personally from pursuing skills in family counselling and can gain more control and a greater sense of direction about their school counselling programs (Palmo et al., 1984).

Effectiveness research. To date there is no evidence to empirically support these rationales, nor the effectiveness of family intervention in elementary schools (either in and of itself or in comparison with parent consultation programs). This is a consequence of both the recency of family counselling/therapy in general and in the schools, and to the overall lack of adequate school counselling effectiveness research. A few documented projects and programs indicate that work with the family is more effective than the customary approach that is typically carried out in the schools, where the child is the primary focus of interest and intervention (Bernstein, 1980; Diekmeier, 1989; Donigan & Giglio, 1971).

Goodman and Kjonaas (1984) conducted a family counselling project in a school setting using Haley's (1976; as cited in Goodman & Kjonaas, 1984) problem-solving method of family treatment. They provided short-term counselling to families that were not considered to be highly dysfunctional. Of the 13 families who participated, 9 (64%)

received a termination rating of either problem resolved (7) or significant progress (2). Two families who started late in the school year reported some changes, two refused ongoing service, and one was referred for marital counselling. Seventy-eight percent of the families referred to the project were willing to accept services without questioning the school's sponsorship. Based on these outcomes, the authors concluded that given the proper motivation and support, school counsellors can develop basic family counselling skills and provide brief and effective services to families. They further recommended that future studies be carried out to compare the effects of family versus individual counselling with pre- and post- follow up tests.

Sloan (1986) used a control-group design to study the effects of counselling and family consultation on the self-concept of high-risk elementary students with behavioral difficulties. The results revealed significant improvement in self-concepts and behavioral quotients for both groups. He concluded that third-, fourth-, and fifth-grade students who are "high risk" with behavioral difficulties may evidence improved self-esteem and behavioral quotients whether they and their families receive direct counselling and consultation services or whether assistance is given indirectly through the classroom teacher.

Based on these very limited reports, it would appear that although there is a conviction that intervention with family members is effective, there is not enough empirical evidence to support this belief.

Family interventions and the elementary counsellor.

Some disagreement exists regarding the appropriateness of family member intervention to the role of the elementary school counsellor as well as regarding what form this intervention should take (consultation, counselling, and/or therapy). The lack of distinction between family counselling and family therapy obviously contributes to the confusion.

Many researchers believe that school counsellors should not be expected to work with severely dysfunctional families who require intensive and long-term family therapy. Rather, school counsellors should prepare and refer such cases to a mental health professional in the community (Beck, 1984; Golden, 1983; Goodman & Kjonaas, 1984; Friesen, 1976; McComb, 1981; Palmo et al., 1984; Strother & Jacobs, 1986; Worden, 1981).

There are others who, through overviews and discussions of the application of current theories and practices, have implied that family therapy is an appropriate form of intervention for the elementary school counsellor to use (Amatea & Fabrick, 1981, Framo, 1981; Goldenberg & Goldenberg, 1981). However, it is unclear as to whether or

not these authors were suggesting that the elementary school counsellor provide short-term or long-term therapy.

Another opinion holds that elementary school counsellors should only become involved in brief family consultation activities (Golden, 1983; Worden, 1981). This requires counsellors to have an understanding of family dynamics that would enable them to assess families, provide short-term consultation to parents and families, and effectively refer more dysfunctional families for therapy.

As a family consultant, the school counsellor is in a critical position to move the more dysfunctional family into therapy (Amatea & Fabrick, 1984). Such referrals are also seen as necessary for managing the counsellor's heavy work load (Bobeles & Conran, 1988; Downing, 1985).

Carl Whitaker has said (McComb, 1981) that school counsellors may already have the skills necessary to conduct family conferences. He recommended that family conferences be used to prevent problem escalation and also to prepare and refer the family who needs more intensive therapy.

Golden (1983) has stated that elementary school counsellors have neither the time nor the administrative support to conduct family therapy. He recommended a brief family conference model (not to exceed 5 conferences) in which the counsellor can assist a family identified as "functional" to effectively manage situational stress and childhood misbehavior.

Others (Beck, 1984; Keat, 1974; Knox, 1981; Palmo et al., 1984; Walsh & Giblin, 1988; Wilcoxon & Comas, 1987) have asserted that school counsellors should have competencies in family counselling. Proponents of this view claim that the necessary skills can be acquired with a manageable amount of training.

It has been suggested that elementary school counsellors want to use and are using family counselling in their counselling programs (Amatea & Fabrick, 1981; Palmo et al., 1984; Wilcoxon, 1986). Without empirical evidence, Wilcoxon (1986) contended that school counsellors understand the conceptual rationale for family counselling and have been practising this type of intervention in schools. Amatea and Fabrick (1981) claimed that "many" school counsellors are attending short term training courses and are effectively applying systems principles and techniques. They asserted that many of these counsellors are reporting more rapid results with "certain" cases than occurred previously with traditional individual counselling.

Lombana and Lombana (1982; as cited in Beck, 1984) found that the activities required by the fewest parents are the most demanding in time required for training and implementation (i.e., family therapy). Those activities needed by the greatest number of parents are those that require little specific training and demand the least amount of time (e.g., brief family counselling and family

conferencing). Beck (1984) believes that to accomplish the latter, the elementary school counsellor may already have the necessary training or require only brief training.

Intervention models and client issues. In addition to the debate regarding which forms of family intervention are appropriate to the role of the elementary school counsellor, on a more specific level, nearly every major theory of family therapy or counselling has been recommended for use in the school setting. Adlerian family counselling (Kern & Carlson, 1981; Nicoll, 1984), Strategic family therapy (Amatea & Lochausen, 1988; Lewis, 1986), Structural family therapy (Carlson, 1987; Perosa & Perosa, 1981), Bowen's theory of family therapy (Mullis & Berger, 1981), and Satir's model of family therapy (Knox, 1981; Seligman, 1981) have all been suggested as suitable for elementary school counselling.

Family intervention by the elementary school counsellor has been recommended to assist families with the following issues: a learning disabled child (Perosa & Perosa, 1981); families of gifted children (Lester & Anderson, 1981); stepfamilies (Kosinski, 1983; Lutz, Jacobs, & Masson, 1981); single-parent families (Baruth & Burggraf, 1984; Green, 1981); and dual-career families (Boswell, 1981).

Recommendations for implementation. Recommendations regarding what steps to take in order to implement family interventions in school counselling programs have been

offered.

Wilcoxon and Comas (1987) have suggested that counsellors increase their understanding of the principles of family systems theory and intervention strategies. They maintain that counsellors should also become aware of the available family services in their communities and the methods for referring students and families to them, and become familiar with current family-based research to enhance their understanding of family dynamics and to assist them in making referral decisions. Finally, counsellors should identify ways to provide follow-up for the student in the school setting once family therapy has terminated.

Palmo et al. (1984) have identified changes that must occur before school counsellors can provide family therapy/counselling. First, counsellors need to be given additional training so that they might have both the skills and the confidence to understand and manage a variety of family structures. Secondly, in order to provide efficient and consistent services, counsellors will have to be flexible in their schedules to allow for sessions during the evenings, on Saturdays and during summer holidays. Thirdly, counsellors should provide family therapy for families of special students (gifted, emotionally and socially disturbed, and handicapped). And finally, they should include other types of intervention with parents (e.g., parent groups).

McComb (1981) believes that family counselling in a school setting must be based upon the following conditions; adequately trained counsellors, judicious and timely application of appropriate family counselling procedures, and the consent and cooperation of the school administrator.

Barriers to family intervention. Many of the same barriers that are said to hinder parent consultation programs are reported as obstacles to the implementation of family counselling or therapy in the elementary schools. The following barriers are reported in the school counselling literature: (a) insufficient time (Beck, 1984; Golden, 1983; Strother & Jacobs, 1986); (b) work overload and vast numbers of students (Beck, 1984; Walsh & Giblin, 1988); (c) parent reluctance (Strother & Jacobs, 1986); (d) the attitude of administrators (Beck, 1984); (e) the inappropriateness of family counselling to the elementary school counsellor role (Beck, 1984); (f) the stringent requirements of membership to the American Association of Marriage and Family Therapy which intimidate school counsellors and render them hesitant to enter this field of practice (Amatea & Fabrick, 1981; Wilcoxon, 1987); (g) the present role of school counsellors as defined by the school system which frequently overburdens them with menial tasks and thus prevents them from expanding upon and intensifying their counselling/therapy functions (McComb, 1981).

An important factor to consider before the elementary

school counsellor participates in any form of family intervention is training (Kern & Carlson, 1981). Both inappropriate training in existing counsellor education programs (Beck, 1984; Bobele & Conran, 1988; Golden, 1983) and a general lack of opportunities for acquiring the necessary training (Fine, 1989; Goldenberg & Goldenberg, 1981; Nicoll, 1984; Perosa & Perosa, 1981) are frequently said to hinder the school counsellor's ability to provide services to families.

It has been recommended that training programs require school counsellors to take course work in family counselling in order to enhance their understanding of the theory and dynamics of family counselling. In addition, counsellors can take advantage of education work shops, courses, association with one of the many family therapy institutes, seminars, in-service training offered by accredited institutions, (Wilcoxon & Comas, 1987), and/or family training centres in order to gain skills and understanding. They might also form a group of their own, affiliated with a private clinic or practitioner who would be willing to supervise or participate in co-therapy with them (Whitaker in McComb, 1981).

The Role of the Elementary School Counsellor

For some time now, the role of the elementary school counsellor has been criticized for its lack of a clear definition and its ineffectiveness. Counsellors are being

asked to develop priorities for their programs and to engage in systematic efforts to implement those priorities (Allan & Ross, 1979; Bonebrake & Borgers, 1984; Furlong, Atkinson, & Janoff, 1979; Wilgus & Shelley, 1988). In addition, they have been asked to examine the congruence, or lack thereof, between their programs, what they actually do, and how others outside the counselling profession view their role (Bonebrake & Borgers, 1984; Kameen, Robinson, & Rotter, 1985; Valine, Higgins, & Hatcher, 1982; Wilgus & Shelley, 1988).

This next section reviews the literature pertaining to how counsellors and other school personnel view the role of the elementary school counsellor. This research has primarily been conducted using one-shot cross-sectional surveys and suffers from many of the common methodological problems associated with this design. For instance, all of the questionnaires used were designed by the investigators and few were subjected to a pre-test, putting the validity of the results at risk. Connected to this problem of validity is the low response rate of many studies (below 60%) and the lack of attempts made to increase response rate through follow-up. In addition, a wide variety of terms have been used to investigate presumably similar functions (e.g. parent contact, parent consultation, parent help, parent education). Finally, the results are often vaguely and incompletely presented, leaving room for doubts about

the validity of the investigator's conclusions.

Administrative, teacher, and counsellor perceptions.

Allan (1977) conducted a questionnaire study to investigate the perceptions of Superintendents and Directors regarding counselling services in the B.C. school system. The counselling services perceived to be of greatest immediate need included working with students both individually (84%) and in groups (80%), and teacher consultation (82%). Family counselling was rated fifth (57%) and respondents commented that in severe situations, counsellors should refer families to community agencies. Another important finding of this study was the extremely unrealistic and unmanageable case loads of counsellors: 2000 to 8000 students to 1 counsellor as compared with the recommended 500 to 1 by the B.C. School Counsellors' Association.

Allan and Boland (1981) conducted a similar counselling needs survey with the Heads of Student Services of 58 non-urban B.C. school districts. The Head was asked to pass one questionnaire on to one of their elementary school counsellors. The Heads (55% return rate) indicated, in order of priority, that the following counselling skills would help their district: individual counselling (88%); classroom management techniques (81%); family counselling (78%); and consultation with teachers and principals (75%). Counselling skills of greatest immediate need were classroom management, family counselling, and individual

counselling. This is an interesting finding in that in no other study has family counselling been rated over individual counselling.

The counsellors participating in this study (22% return) reported that providing teachers with classroom coping skills, establishing specific management strategies, parenting groups, and family counselling were the interventions they found to be the most successful. The largest handicaps to providing services were unrealistic workloads and a lack of time.

The B.C. elementary school teachers surveyed by Medland (1976) felt that counselling services should be mainly student centered; however, in terms of consulting with significant adults, they reported that the prime recipient should be parents. While 81% reported that counsellors should help parents understand the difficulties their child may be having in school, only 41.8% believed this was presently happening. Seventy-six percent said counsellors should help parents to plan more effective ways of communicating with and disciplining their children. Only 38% felt this was being done.

Wilgus and Shelley (1988) investigated teachers' perceptions of how elementary school counsellors spend their time, how the teachers expect counsellors to spend their time, and the actual percentage of time spent in different counsellor functions. Results indicated that individual

counselling accounted for 19% of the counsellors' actual time, other non-counselling jobs accounted for 15%, staff consultation for 14%, parent contact for 8%, group counselling for 7% and parent education accounted for 3% of the counsellors' actual time. The remaining 34% of counsellors' time was devoted to indirect counselling functions (ie. testing, classroom observation, etc.). The teachers reported that they would like counsellors to place a higher priority on parent education.

Allan, Doi, and Reid (1979) sent three questionnaires to 150 random and representative B.C. elementary schools. They were to be completed by the principal, a primary teacher, and an intermediate teacher. The results indicated general agreement as to the needs for counselling services. The three areas of greatest immediate need were in individual counselling, help with discipline problems, and family counselling. Principals and teachers agreed that consulting with parents was a key skill required of counsellors and this was followed by limited family counselling.

It was suggested by Beck (1984) and by counsellors in consultation with the present author (May to December, 1990) that the attitude of administrators is a potential barrier to school counsellors' working with families. Bonebrake & Borgers (1984) however, found that counsellors and principals agreed on the counselling and consulting functions that should receive the most and the least

emphasis. They agreed that consultation with teachers and parents is important (ranked by counsellors as 2nd and 4th respectively and by principals as 3rd and 5th). Moreover, in communication with the present author, elementary school principals have expressed the view that counsellors should be intervening with parents more frequently than they are currently doing so (May to December, 1990).

Merchant and Zingle (1977) investigated current counsellor functions in Canadian urban areas. They found that over two thirds of the respondents "conduct(ed) parent conferences to discuss a child's needing help in terms of a special class or agency referral" (p.207). Their research also revealed that crisis-oriented consultation is frequent and consultation regarding normal child development is infrequent. Group work with parents is also infrequent. The researchers suggested that counsellors should put more effort into teacher and parent group consultation and group counselling with children in order to better cope with the counsellor-pupil work load.

Allan and Ross (1979) surveyed B.C. elementary school counsellors regarding their perceptions of their current and ideal role. The counsellors spent 39% of their time with students (25% individually and 14% in groups), 21% with teachers, and 16% with parents (12% individually and 4% in groups). When asked how they would ideally like to spend their time, counsellors responded that they would like to

spend more time with parents (an increase from 16% to 20%). Congruent with this finding were the counsellors' reports that they would like to be more involved in preventative and developmental counselling. "Overload" and "lack of time" were the main inhibiting factors to successful role fulfilment.

Elementary school counsellors in California reported a similarity between the amount of time they actually spend and would ideally like to spend in a number of role activities (Furlong, Atkinson, & Janoff, 1979). These counsellors indicated that their time is actually spent performing the following functions in descending order: counselling, consultation with teachers, pupil appraisal, and parent help. Ideally they would like to spend their time: counselling, consultation with teachers, parent help, and change agent. However, a 38% return rate must be taken into account when judging the validity of these results.

Morse and Russell (1988) investigated Kansas elementary school counsellors' perceptions of their actual and ideal roles and the discrepancies between these roles. Parent consultation was not ranked among the five highest role functions and no reports were given as to where it was ranked for either the actual or ideal role. However the authors did report that the counsellors perceived parent consultation and teacher consultation as similar roles and would like to be more involved in both. Furthermore,

conflict was found to exist between the actual and ideal role functions and parent consultation had one of the three highest discrepancy scores. Once again, however, this study contains many of the aforementioned methodological problems, a fact which must be considered in the evaluation of these results.

The majority of counsellors responding to a questionnaire study carried out in 5 Canadian provinces (Carreiro & Schulz, 1988) reported that they spent little actual time in contact with parents. However, they ranked this activity high in value and reported that they would like to spend more time contacting parents.

To date there is only one unpublished study, a doctoral dissertation carried out by Beck (1984), that focuses directly on the attitudes of school counsellors toward their role with families. This study was primarily concerned with the availability of family counselling in the elementary and middle school setting, as well as the perceptions of elementary school counsellors and counsellor educators of family counselling as a role function. School counsellors and counsellor educators in metropolitan Milwaukee reported the following: 90.4% of the counsellors and 92.3% of the counsellor educators indicated that family counselling is an appropriate function of the elementary school counsellor's role; 40.4% of counsellors and 69.65% of counsellor educators believed that counsellors should do more family

counselling; 81.5% of counsellors and 78.3% of counsellor educators felt that there is a need for family counselling to be offered in the schools.

According to these elementary counsellors, the barriers preventing the implementation of family counselling were work load (81.6%), lack of training (71.1%), and no satisfactory time (64.0%). According to the counsellor educators, lack of training (84.6%), work load (80.8%), and administrative attitude (65.4%) were the most severe barriers.

Role controversy. Any attempt to clarify the role of the elementary school counsellor requires that school counsellors themselves determine what their functions are, provide rationales for these functions, and communicate their role and functions to both the community and school personnel. Many researchers have warned that if counsellors do not take this responsibility, the status quo will be maintained; others outside the counselling profession will dictate counsellors' role (Boy, 1972; Day, 1980; Schrader, 1989; Wilgus & Shelley, 1988). Counsellors are told by teachers, principals, students, and parents what their role ought to be. It has been suggested that in their attempts to meet the demands of so many others, they have failed to establish a clear identity (Carr, 1979; Valine et al., 1982). Contributing to this vulnerability to criticism by outside forces is the school counsellors' lack of a legally

identified or widely recognized set of skills or knowledge (Day & Sparacio, 1980). Moreover, without a clearly defined role, consistent services cannot be provided and it becomes easier for low priority activities to replace high priority activities.

Elementary school counsellors are being asked to accelerate their rate of change. Wrenn (1979) believes that in order for this to happen, counsellors must first come to accept that students are not their only clients; teachers, staff, and parents also require their services. Moreover, he has claimed that while counsellors frequently complain about being told what to do, they rarely take the responsibility to make it clear to their employer what they believe their functions should be.

On the other hand, while Boy (1972) agrees that counsellors need to establish priorities, he has also argued that the first priority of the school counsellor should be counselling students. From his perspective, the best way to affect the child's internalized world is to counsel the student; hence, consultation should be a secondary function of the school counsellor.

If the school counselor does not make counseling (students) his major role, then he will forever be pulled in different directions depending upon the theoretical inclination of those who tug at his sleeve (p. 168).

Regardless of current debates as to what the counsellor's role should be, as Wilgus and Shelley (1988) so aptly stated:

The responsibility for redefining the counselor's role, clearly articulating that role, and giving life to the counselor of the future lies within each individual counselor. A supportive counselor partnership can facilitate this process of responsible service to children, teachers, and parents. (p.265)

Day and Sparacio (1980) have added that despite significant concern and criticism regarding the role of the school counsellor, many counsellors and counsellor educators treat the situation as an old issue and do not actively and systematically attempt to correct the shortcomings of their profession. The present study is aimed at facilitating the process of change.

CHAPTER 3

METHOD

This chapter is divided into four sections describing the research procedures of this study: sample, design, collection of data, and data analysis. These sections discuss the processes undertaken in order to identify the accessible sample, design the questionnaire, collect the data, and finally to analyze the data obtained from the sample.

Sample

At the time that this study was conducted, there existed no established listing of elementary school counsellors in British Columbia. This was due in part to a lack of direct provincial funding for these programs prior to September 1990, as well as to the unspecified membership requirements of the B.C. School Counsellors' Association. The Association's membership listing does not distinguish between elementary and secondary counsellors (L. Green, personal communication, January 16, 1990; V. Joshi, personal communication, November 1990).

The target population for this study was all elementary school counsellors in British Columbia. To identify an accessible sample, a letter was sent to the supervisors of elementary counsellors of all 76 British Columbia school districts, requesting the names and school addresses of

their elementary school counsellors (see Appendix A). Forty-six school districts responded to this initial request, reporting 240 elementary counsellors. An additional 18 districts responded to a second request for this information (see Appendix A). In total, 64 districts (84%) reported 327 elementary school counsellors, representing 92% of the elementary school student population. Districts that did not respond tended to be small and rural, which frequently do not employ elementary counsellors. The sample for this study consisted of those elementary school counsellors who completed and returned the questionnaire.

Design

Questionnaire development. A review of the literature aided in the initial development of a survey instrument to be used specifically for this study. Based on this initial questionnaire, preliminary interviews were conducted in August 1990 with 7 elementary school counsellors in the British Columbia Lower Mainland (Burnaby, Delta, Surrey, and Vancouver). Interviews were semi-structured, requesting counsellors to comment generally on their beliefs about the role of elementary school counsellors with parents and families, and to answer specific questions taken directly from the questionnaire. The results of these interviews led to the first revision of the questionnaire.

"Working" definitions of the six different forms of family member intervention (family consultation, family counselling, family therapy, parent education, parent consultation, parent counselling) were also developed at this time. These definitions prefaced the questionnaire and were intended initially to be presented as an optional aide to assist respondents with making distinctions between the intervention forms.

In December 1990 a second pilot study was carried out with the revised questionnaire. A copy of the questionnaire, "working" definitions, and a self-addressed stamped return envelope were sent to a representative sample of 15 Lower Mainland elementary school counsellors. The accompanying cover letter explained the purpose of the proposed study and requested their participation in the pilot by both completing and commenting on the questionnaire.

Of the 15 counsellors, 13 or 87% responded. Of these, 2 counsellors commented on the questionnaire without completing it, resulting in 11 (73%) completed questionnaires. This pilot group indicated that they found the questionnaire to be clear and easy to complete. Eighty-two percent of respondents reported that they had in fact used the "working" definitions to complete the questionnaire. It was therefore decided that the optional component would be removed and that respondents in the

actual study would be asked to use these definitions to complete the questionnaire. This adjustment was made in an attempt to lessen the variability between respondents regarding their understanding of these terms. Counsellor comments obtained from this pre-test were reviewed and, where appropriate, final changes were made to the questionnaire.

Questionnaire and research questions. The purpose of this sub-section is to clarify the relationship between the research questions and the questionnaire items (see Appendix B).

"Part II," item 2 of the questionnaire asked counsellors to indicate how often they "would like" to perform 13 different functions; item 3 of this section asked them to indicate how often they currently "do" perform these same functions. These two questionnaire items were designed to address research questions 1 to 3 as follows:

1. To what extent are elementary school counsellors currently using each of the following six different forms of intervention with family members: family consultation, family counselling, family therapy, parent education, parent consultation, and/or parent counselling?

2. To what extent would elementary school counsellors ideally like to use each of these forms of intervention with family members?

3. Is there a significant discrepancy between the current extent and the ideal extent of counsellors' use of these forms of family member intervention?

Six additional direct contact functions, traditionally associated with the role of the school counsellor, were included in order to provide a more clearly defined context within which to explore the frequency of use of family member interventions. As well, parent consultation was subdivided into two categories, consultation via the telephone and face to face, to more accurately reflect the methods used by school counsellors to perform this function.

While the author acknowledges that many elementary school counsellors assume other duties (e.g. program planning, assessment, curriculum development), for the purposes of this study, it was decided that the questionnaire would focus exclusively on direct counselling, consulting, and therapy services with students, staff, parents, and other professionals.

Questionnaire item 1 of "Part II" asked counsellors the following question: "In your opinion, should the following services for parents and families be offered by: the appropriately trained elementary school counsellor; another helping professional within the school district; or another helping professional outside the school district?" This item was designed to address research questions 4 and 5 as follows:

4. Which forms of intervention with family members do elementary counsellors believe should be offered by the school district?

5. Which forms of intervention with family members do elementary school counsellors believe to be appropriate to their role?

The fourth item of "Part II" of the questionnaire asked counsellors to use a rating scale from 1 (not a barrier) to 4 (large barrier) to rate nine factors in terms of how greatly they hindered their ability to perform each of the six different forms of intervention with family members. This item was designed to address the following research questions:

6. What are the counsellor-perceived barriers to intervention with family members?

7. To what degree do elementary counsellors perceive these barriers to be hindering their ability to perform each of the six forms of intervention with family members?

Finally, questionnaire item number 5 of this same section addresses research question 8 which requests the recommendations of elementary counsellors for overcoming the barriers to family member intervention.

In addition to these items which specifically address the research questions of this study, elementary counsellors were requested to provide the following background information: gender; age; education and training;

counselling experience; and work-setting factors.

Questionnaire items are both closed (Likert-type, and multiple-choice) and open form, appropriate to the information sought (see Appendix B).

Data Collection

In March 1991, a questionnaire accompanied by a letter of transmittal was sent to each of the elementary school counsellors on the compiled list (see Appendix B). A double envelope strategy was used to permit the recording of non-respondents for follow-up while maintaining anonymity. Both a coded return envelope (self-addressed and stamped) and a blank envelope were sent with the questionnaires.

Respondents were asked to anonymously complete the questionnaire, place it in the blank envelope first, then in the return envelope, and to return the questionnaire within one week of receiving it. The two return envelopes were separated by the investigator as they were received, thus permitting identification of non-respondents while preventing the possibility of matching completed questionnaires to respondents.

By April 12th, 166 or 50.8% of the counsellors had responded. As the response rate had diminished, a follow-up reminder letter was sent at this time to all non-respondents (see Appendix C). A second response record was kept and when a decrease in responses was again noted, a follow-up letter along with another copy of the questionnaire was

mailed to each of the remaining non-respondents (see Appendix C). At the time of this second follow-up (May 9th) 210 or 64.2% of the counsellors had responded. By June 14th this second follow-up resulted in a total 253 (77.4%) completed and returned questionnaires.

Data Analysis

The Statistical Package for the Social Sciences (SPSS-X) was used to analyze the data. For demographic, background, and work-setting data (entitled "General Information" on the questionnaire), cases were counted and frequencies were reported. The purpose of this information was to describe the sample of B.C. elementary counsellors who participated in this study.

The first question in "Part II" asked respondents to indicate their opinion regarding which of three different helping professionals they believe should offer each of the six forms of service to family members. The information obtained from this question was recorded and tallied for each item and the percentages calculated.

For questions 2 and 3 of "Part II," respondents were asked to indicate the extent to which they currently perform (question 2) and would like to perform (question 3) a list of 13 potential school counsellor functions. Each of the five response categories was assigned a score: very often = 5, often = 4, sometimes = 3, almost never = 2, and never = 1. Respondents' scores were recorded and sample means and

standard deviations for each function for both current and ideal categories calculated.

To determine the discrepancy between the current extent and the ideal extent to which the counsellors perform the different counselling functions, a mean difference score was calculated. Based on these mean difference scores, t values were calculated in order to test for significant differences between current and ideal means. Despite the ordinal nature of this data, the t test has been found to provide an accurate estimate of significance (Borg & Gall, 1983; Glass & Hopkins, 1984).

Question 4 of "Part II" asked counsellors to rate potential barriers in terms of how large a hinderance they are to performing each of the six different forms of intervention with family members. Each of the four barrier categories (large barrier, moderate barrier, small barrier, not a barrier) was assigned a score from 4 (large barrier) to 1 (not a barrier). Respondents' scores were recorded and sample means and standard deviations for each barrier-intervention pair calculated.

Any reported additional barriers (open-ended portion of question 4), as well as recommendations for overcoming barriers (question 5) were recorded, analyzed for commonalities and the percentages for categories calculated.

CHAPTER 4

Results

In its presentation of the results obtained from this study, this chapter first addresses the questionnaire return rate and the demographic results. A brief summary then provides a context within which to conceptualize the questionnaire results in general. This is followed by a presentation of the results obtained from the questionnaire items in terms of the specific research questions they were designed to address. The chapter concludes with a summary of the results specific to the research questions addressing family member intervention.

Questionnaire Returns

Of the 327 questionnaires that were mailed to B.C. elementary school counsellors, 253 (77.4%) were completed and returned. Four (1.2%) of these questionnaires were completed by child care workers and therefore could not be used for the purposes of this research project. The remaining 249 (76.2%) questionnaires constituted the data for this study.

Demographic and Background Results

Tables 1 through 5 present the demographic, education, training, work experience and work-setting data for the counsellors who participated in this study and who represent B.C. elementary school counsellors.

Table 1

Demographic Characteristics of Elementary School Counsellors

Characteristic	<u>n</u>	% of respondents
Gender		
Female	139	55.8
Male	110	44.2
Age		
20-29	5	2.0
30-39	58	23.4
40-49	136	54.8
50-59	42	16.9
60 +	7	2.8

Table 2

Education of Elementary School Counsellors

Characteristic	<u>n</u>	% of respondents
Undergraduate		
B.Ed.	92	37.2
B.A.	33	13.4
B.Sc.	9	3.6
Diploma in counselling	2	.8
Diploma in teaching	4	1.6
Two degrees	31	12.6
Diplomas in counselling and teaching	1	.4
Degree, diploma in counselling	13	5.3
Degree, diploma in teaching	44	17.8
Degree, diplomas in counselling and teaching	3	1.2
Other	15	6.0
Graduate		
No graduate degree	45	18.1
M.Ed.	147	59.0
M.A.	42	16.7
M.A and M.Ed.	7	2.8
Other	8	3.2

Table 3

Parent and Family Training

Characteristic	<u>n</u>	% of respondents
Courses or workshops taken re:		
Working with parents	196	81.0
Working with families	226	91.1
Supervised training		
Family consultation	61	24.5
Family counselling	103	41.4
Family therapy	66	26.5
Parent education	68	27.3
Parent consultation	56	22.5
Counselling adults	104	41.8
Couples counselling	43	17.3

Table 4

Work Experience of Elementary School Counsellors

Characteristic	<u>n</u>	% of respondents
Elementary counsellor		
2 years or less	73	29.6
3 or 4 years	63	25.5
5 to 9 years	47	19.0
10 years or more	64	25.9
Counsellor outside the school system	65	26.1

Table 5

Characteristics of Work Assignment

Characteristic	<u>n</u>	% of respondents
Percentage of assignment		
50% or less	43	17.3
60% to 90%	44	17.7
100%	162	65.1
Number of assigned schools		
One	36	14.5
Two	60	24.2
Three	60	24.2
Four	43	17.3
Five or more	49	19.8
Counsellor/pupil ratio		
499 students or less	39	15.9
500-749	25	10.2
750-999	55	22.4
1000 or more	127	51.5
Other family workers employed		
at the school	45	18.1
Other family workers employed		
by the school district	118	48.8

The following is a brief summary, highlighting those results which are of particular importance and which will be further discussed in Chapter 5.

Demographic characteristics. The results indicate nearly equal percentages of male (44.2%) and female (55.8%) elementary counsellors, and that more than half (54.8%) of these counsellors are between the ages of 40 and 49.

Education. Two hundred and twenty-six or 91.1% of the elementary counsellors reported holding an undergraduate degree. The undergraduate degree most often reported was a B.Ed. (54.5%), and 73.1% of the counsellors have had teacher training (B.Ed. and/or Diploma in teaching). In terms of graduate level education, 81.1% of the counsellors hold a masters's degree, the majority (61.8%), an M.Ed.

Parent and family training. The large majority of B.C. elementary school counsellors have taken workshops or courses concerning counselling or therapy with parents (81.0%) and families (91.1%). Counsellors seek supervised training most frequently for family counselling (41.4%) and counselling adults (41.8%) and least frequently for couples counselling (17.3%). Only 27.3% of the counsellors have obtained supervised training in parent education.

Work experience. Few of the counsellors (26.1%) have practiced their profession in settings outside of the school system. More than half (55.7%) of them have been employed as elementary counsellors for 4 or fewer years.

Work assignment. The majority of B.C. elementary counsellors are employed full-time (65.1%), work in 3 or more schools (61.3%), and are responsible for 500 or more students (84.1%).

Few (18.1%) of the counsellors reported any other family workers (consultants, counsellors, or therapists) employed at their school. Those that were referred to most frequently included child care workers, school psychologists, and "Family Advancement Workers" (jointly employed by Vancouver School Board and Family Services).

Nearly half (48.8%) of the respondents reported that there are other family workers employed by their school district. These consultants, counsellors, and therapists were most frequently reported to be district counsellors, school psychologists, community youth and family workers, and "Family Advancement Workers."

Results Summary

In general the results of this questionnaire study suggest that B.C. elementary counsellors have fairly traditional views of their role, both currently and in terms of their visions for the future. Counselling individual students, consultation with staff (teachers, administration, etc.), and consultation with other professionals are the functions that they would ideally like to perform to the greatest extent.

Telephone consultation is currently elementary

counsellors' most frequent form of contact with parents; however they would ideally prefer to consult with parents face to face. Even so, they would prefer to consult with other professionals more often than with parents. The only family intervention that they would like to use to any large extent is family consultation.

Hence, despite a general indication that these elementary school counsellors would ideally like to perform family member interventions to a greater extent, it is clear that they see themselves first as counsellors to children, secondly as consultants to staff and other professionals, thirdly as consultants to parents, and fourth as family consultants.

Research Questions

Research question 1. "To what extent are elementary school counsellors currently using each of the six following different forms of intervention with family members: parent education, parent consultation, parent counselling, family consultation, family counselling, and family therapy?"

Table 6 lists the means and standard deviations of the counsellors' ratings of the current extent to which they use 13 counsellor functions. The results indicate that parent consultation ranked 3rd (via telephone $M=1.99$, $SD=.80$) and 4.5 (face to face $M=2.18$, $SD=.73$) and is currently being performed "Often." The remaining five family member interventions were ranked as those functions currently being

Table 6

Means and Standard Deviations of Counsellors' **Current** Extent of Intervention Use

Intervention	<u>n</u>	<u>M</u> ^a	<u>SD</u>
Counselling students	249	1.30	.55
Consultation with staff	248	1.59	.73
Parent consultation - telephone	249	1.99	.80
Parent consultation - face to face	249	2.18	.73
Consultation with other professionals	249	2.18	.86
Group counselling	249	2.53	.93
Classroom instruction	249	2.78	1.03
Counselling staff	249	2.92	.93
Family consultation	247	2.93	1.02
Parent education	240	3.21	.92
Parent counselling	249	3.31	1.01
Family counselling	247	3.57	.99
Family therapy	246	4.50	.78

^aMean range = 1-5 where 1 denotes "Very Often", 2 denotes "Often", 3 denotes "Sometimes", 4 denotes "Almost Never", and 5 denotes "Never".

performed to the least extent, from family consultation ($\underline{M}=2.93$, $\underline{SD}=1.02$) which ranked 9th and is being performed "Sometimes" to family therapy ($\underline{M}=4.50$, $\underline{SD}=.78$) which ranked 13th and is being performed "Almost Never."

These results further indicate that B.C. elementary counsellors are currently performing, to the greatest extent, those functions that have traditionally been associated with the role of the school counsellor. They are counselling students "Very Often" ($\underline{M}=1.30$, $\underline{SD}=.55$), and consulting with staff ($\underline{M}=1.59$, $\underline{SD}=.73$), parents ($\underline{M}s=1.99$ and 2.18), and other professionals ($\underline{M}=2.18$, $\underline{SD}=.86$) "Often."

Research question 2. "To what extent would elementary school counsellors ideally like to use each of these (six) forms of intervention with family members?"

Table 7 lists the means and standard deviations of the counsellors' ratings of the extent to which they "would like" to perform these same 13 functions. The means indicate that B.C. elementary counsellors would like to use all family member interventions (with the exception of telephone parent consultation) more frequently. However in relation to some of the more "traditional" school counsellor functions, this increase did not necessarily result in a higher frequency ranking. For instance, although the counsellors would like to use face to face parent consultation more "Often" ($\underline{M}=1.86$), they would also like to consult with other professionals more "Often" ($\underline{M}=1.81$).

Table 7

Means and Standard Deviations of Counsellors' **Ideal** Extent of Intervention Use

Intervention	<u>n</u>	<u>M</u> ^a	<u>SD</u>
Counselling students	247	1.37	.64
Consultation with staff	246	1.50	.65
Consultation with other professionals	248	1.81	.69
Parent consultation - face to face	247	1.86	.63
Group Counselling	247	2.00	.84
Parent consultation - telephone	245	2.02	.86
Family consultation	247	2.33	.90
Classroom instruction	246	2.62	1.11
Parent education	244	2.73	.83
Counselling staff	248	2.89	.92
Family counselling	247	3.03	1.15
Parent counselling	244	3.04	1.07
Family therapy	234	3.97	1.12

^aMean range = 1-5 where 1 denotes "Very Often", 2 denotes "Often", 3 denotes "Sometimes", 4 denotes "Almost Never", and 5 denotes "Never".

Both the means and rating positions of family consultation ($\underline{M}=2.33$, $\underline{SD}=.90$) and parent education ($\underline{M}=2.73$, $\underline{SD}=.83$) (7th and 9th respectively) indicate that counsellors would like to use these interventions more frequently. However, they would prefer to perform family consultation ("Often") more frequently than parent education ("Sometimes"). Family counselling (11th, "Sometimes"), parent counselling (12th, "Sometimes") and family therapy (13th, "Almost Never") retain the low ranking that they were given in the preceding section. In comparison with all other functions, counsellors would still like to perform these to the least extent.

While the order of the frequency rating changes somewhat between current and ideal functions, elementary counsellors would ideally like to perform to the greatest extent those same "traditional" school counsellor functions that they are currently most often performing. They would like to counsel students and consult with staff "Very Often," and consult with other professionals and parents, and counsel groups of students "Often."

Research question 3. "Is there a significant discrepancy between the current extent and the ideal extent of counsellors' use of these forms of family member intervention?"

Table 8 presents both the mean difference scores and t values for the 13 counsellor functions. With the exception

Table 8

Mean Differences Between Current and Ideal Extent of
Intervention Use

Intervention	Mean Difference ^a	<u>t</u>
Parent education	-.4768	-8.72**
Parent consultation - face to face	-.3279	-7.31**
Parent consultation - telephone	.0245	0.50
Parent counselling	-.2705	-4.32**
Family consultation	-.6000	-9.66**
Family counselling	-.5407	-7.92**
Family therapy	-.5279	-8.90**
Counselling students	.0688	1.79
Classroom instruction	-.1463	-2.67**
Group counselling	-.5344	-10.06**
Consultation with staff	-.0857	-1.97*
Counselling staff	-.0282	-0.51
Consultation with other professionals	-.3790	-6.84**

^aNegative t values denote higher frequency for ideal use.

Positive t values denote higher frequency for current use.

*p<.05. **p<.01.

of telephone parent consultation, all differences between current and ideal mean scores for family member interventions are significant ($t=+2.601$, $p=.01$). Thus there is sufficient evidence to indicate that B.C. elementary school counsellors would ideally like to use parent education, parent consultation (face to face), parent counselling, family consultation, family counselling, and family therapy more than they are currently doing so.

Of the 6 "traditional" counsellor functions, differences between current and ideal use are significant for classroom instruction ($t=-2.67$, $p=.008$), group counselling ($t=-10.06$, $p=.000$), and consultation with other professionals ($t=-6.84$, $p=.000$). Hence there is sufficient evidence to indicate that B.C. elementary counsellors would also ideally like to perform these traditional counsellor functions more than they do currently.

Research questions 4 and 5. Question 4 asks "Which forms of intervention with family members do elementary counsellors believe should be offered by the school district?" Question 5 asks: "Which forms of intervention with family members do elementary school counsellors believe to be appropriate to their role?"

In order to address these two research questions, the questionnaire asked counsellors to indicate which of three different helping professionals (the school counsellor, another counsellor employed by the district, or another

Table 9

Helping Professional Role Appropriateness for Family Member Interventions

Intervention	Counsellor			
	<u>n</u>	%School	%District	%Other
Parent Education	234	56.0	21.8	22.2
Parent Consultation	242	97.1	2.1	.8
Parent Counselling	241	38.6	11.2	50.2
Family Consultation	242	81.4	4.5	14.0
Family Counselling	241	43.6	15.8	40.7
Family Therapy	242	7.0	14.0	78.9

Note. District = another helping professional employed by the school district; Other = other helping professionals not employed by the school district.

employed outside the district) they believe should offer each of the six different family member interventions (see Appendix A). The results are listed in Table 9.

"School" and "district" counsellor percentages were combined to determine which interventions counsellors believe should be offered by the school district, regardless of the professional involved. Parent consultation (99.2%), family consultation (85.9%), and parent education (77.8%) were indicated as the family member interventions that the respondents most clearly believe should be offered by the school district. Elementary counsellors are somewhat more divided as to whether parent counselling and family counselling should be offered by the school district (49.8% and 59.4% respectively) or by an outside helping professional (50.2% and 40.7% respectively). They clearly indicated that family therapy is an intervention that should not be the role of the school counsellor nor the school district (78.9%).

Concerning the role of the elementary counsellors themselves, the majority reported that parent consultation (97.1%) and family consultation (81.4%) are interventions appropriate to their role. A little over half reported parent education (56.0%) as an appropriate role function, while less than half of the respondents reported parent counselling (38.6%) and family counselling (43.6%) as interventions appropriate to the role of the elementary

school counsellor.

The results of research questions 1 through 5 suggest that, in terms of family members, the majority of elementary school counsellors believe that their role should be primarily consultation. They are somewhat divided as to whether parent or family counselling is a role-appropriate activity, however there is a clear consensus that family therapy should not be part of their role as school counsellors.

Research questions 6 and 7. Question 6 asks: "What are the counsellor-perceived barriers to intervention with family members?" Taking this further, Question 7 asks: "To what degree do elementary school counsellors perceive these barriers to be hindering their ability to perform each of the six forms of intervention with family members?"

Tables 10 through 15 list, from largest to smallest, the sample means and standard deviations for counsellor-perceived barrier severity for each intervention. The means for "Work Load" indicate that it was rated as the largest barrier for each of the six family member interventions. It was rated as a "Large barrier" (\underline{M} =3.64, \underline{SD} =.89) to family therapy and as a "Moderate barrier" (\underline{M} =3.06-3.50) to the remaining five interventions.

The means for "Work Schedule" indicate that it was the second largest and most consistent barrier; counsellors rated it as a "Moderate barrier" (\underline{M} s=2.91-3.50) to 5 out of

Table 10

Means and Standard Deviations of Counsellor Perceived
Barriers to Parent Education

<u>Barrier</u>	<u>n</u>	<u>M^a</u>	<u>SD</u>
Work load	241	3.44	.84
Work schedule	241	3.15	1.00
Parent reluctance	240	2.16	.94
Lack of facilities	241	1.88	1.13
Role definition	237	1.83	1.08
Lack of training	240	1.50	.84
Administrative attitude	239	1.33	.68
Theoretical orientation	241	1.27	.66
Teacher attitude	239	1.26	.61

^aMean range = 1 to 4 where 1 denotes "Not a barrier",
 2 denotes "Small barrier", 3 denotes "Moderate barrier",
 4 denotes "Large barrier".

Table 11

Means and Standard Deviations of Counsellor Perceived
Barriers to Parent Consultation

<u>Barrier</u>	<u>n</u>	<u>M^a</u>	<u>SD</u>
Work load	240	2.70	1.09
Work schedule	243	2.49	1.06
Parent reluctance	239	1.75	.83
Lack of facilities	241	1.72	1.05
Role definition	236	1.29	.65
Lack of training	240	1.21	.57
Teacher attitude	239	1.15	.42
Administrative attitude	239	1.12	.39
Theoretical orientation	240	1.08	.36

^aMean range = 1 to 4 where 1 denotes "Not a barrier",
 2 denotes "Small barrier", 3 denotes "Moderate barrier",
 4 denotes "Large barrier".

Table 12

Means and Standard Deviations of Counsellor Perceived
Barriers to Parent Counselling

Barrier	<u>n</u>	<u>M</u> ^a	<u>SD</u>
Work load	239	3.31	.90
Work schedule	240	3.05	1.01
Role definition	236	2.35	1.16
Parent reluctance	238	2.26	.93
Lack of facilities	240	1.96	1.15
Lack of training	239	1.59	.88
Administrative attitude	236	1.57	.88
Theoretical orientation	239	1.41	.84
Teacher attitude	237	1.36	.75

^aMean range = 1 to 4 where 1 denotes "Not a barrier",
 2 denotes "Small barrier", 3 denotes "Moderate barrier",
 4 denotes "Large barrier".

Table 13

Means and Standard Deviations of Counsellor Perceived
Barriers to Family Consultation

Barrier	<u>n</u>	<u>M^a</u>	<u>SD</u>
Work load	239	3.06	1.00
Work schedule	237	2.91	1.06
Parent reluctance	237	2.14	.93
Lack of facilities	239	2.01	1.10
Role definition	236	1.81	1.05
Lack of training	238	1.47	.81
Administrative attitude	237	1.36	.74
Teacher attitude	237	1.29	.63
Theoretical orientation	238	1.24	.66

^aMean range = 1 to 4 where 1 denotes "Not a barrier",
 2 denotes "Small barrier", 3 denotes "Moderate barrier",
 4 denotes "Large barrier".

Table 14

Means and Standard Deviations of Counsellor Perceived
Barriers to Family Counselling

Barrier	<u>n</u>	<u>M^a</u>	<u>SD</u>
Work load	239	3.50	.87
Work schedule	239	3.31	.94
Role definition	238	2.74	1.20
Parent reluctance	237	2.49	.99
Lack of facilities	240	2.30	1.22
Lack of training	240	2.01	1.05
Administrative attitude	237	1.81	1.09
Theoretical orientation	239	1.59	1.00
Teacher attitude	235	1.47	.81

^aMean range = 1 to 4 where 1 denotes "Not a barrier",
 2 denotes "Small barrier", 3 denotes "Moderate barrier",
 4 denotes "Large barrier".

Table 15

Means and Standard Deviations of Counsellor Perceived
Barriers to Family Therapy

<u>Barrier</u>	<u>n</u>	<u>M^a</u>	<u>SD</u>
Work load	228	3.64	.89
Role definition	232	3.53	.91
Work schedule	231	3.50	.94
Lack of training	234	2.86	1.20
Parent reluctance	223	2.78	1.04
Lack of facilities	231	2.44	1.29
Administrative attitude	225	2.37	1.25
Theoretical orientation	233	2.12	1.26
Teacher attitude	222	1.73	1.00

^aMean range = 1 to 4 where 1 denotes "Not a barrier",
 2 denotes "Small barrier", 3 denotes "Moderate barrier",
 4 denotes "Large barrier".

6 family member interventions. With regard to parent consultation, "Work Schedule" was rated as a "Small barrier" ($\underline{M}=2.49$, $\underline{SD}=1.06$).

Parent Reluctance," "Lack of Facilities," and "Lack of Training" received the ratings of "Not a barrier" or "Small barrier" with regard to all family member interventions except family therapy. "Role Definition" was rated similarly, except with regard to family counselling and family therapy, where it was rated as a "Moderate barrier."

"Administrative Attitude," "Teacher Attitude," and "Theoretical Orientation" received the ratings of "Not a barrier" or "Small barrier" ($\underline{M}s=1.08-2.37$), and were reported by counsellors to be hindering their performance to the least extent for each of the six family member interventions.

In order to compare interventions based on overall barrier severity, a mean score for all 9 barriers for each intervention was calculated. In order of barrier severity from the least to the greatest, interventions were ranked as: parent consultation ($\underline{M}=1.61$), family consultation ($\underline{M}=1.92$), parent education ($\underline{M}=1.98$), parent counselling ($\underline{M}=2.09$), family counselling ($\underline{M}=2.36$), and family therapy ($\underline{M}=2.77$). In general, as the level of intensity of the intervention increased, so too does the severity of the barriers to performing the intervention.

Counsellors were also asked to report any additional barriers to working with family members. This open-ended question was responded to by 126 (50.6%) counsellors. The majority of these respondents reiterated and highlighted some of the barriers that they had already rated. Those most frequently reiterated were: (a) Work load or counsellor/pupil ratio ($\underline{n}=44$), (b) inflexibility in work schedule ($\underline{n}=24$), (c) inadequate and inappropriate facilities ($\underline{n}=15$), and (d) the broadness of the elementary counsellor role ($\underline{n}=14$).

The 4 most frequently reported additional barriers include: (a) A lack of adequate and appropriate services within the community to which to refer parents and families ($\underline{n}=11$), (b) a lack of funding from the ministry ($\underline{n}=10$), (c) cultural and language differences between counsellor and client ($\underline{n}=10$), and (d) a lack of understanding on the part of parents, school staff and the community regarding the role and importance of the elementary school counsellor ($n=10$).

Research question 8. "What are the recommendations of elementary school counsellors for overcoming these barriers?"

Open-ended questionnaire item number 5, "Part II" was responded to by 194 (77.9%) of the counsellors. The 8 recommendations most frequently made by the elementary counsellors include:

1. Hire more counsellors; decrease the counsellor/pupil ratio; provide more counselling time for schools (n=108). Comment e.g., "There is no way these parent/family counselling ideas could even be considered without a VERY significant increase in the number of counsellors hired in the district and the counsellor 'time allotted.'"

2. Provide counsellors with increased opportunities for supervised training, district workshops and in-service training (n=41). Comment e.g., "More training in family therapy, accessible weekend workshops, supervised training."

3. Provide counsellors with an appropriate space in which to work (n=34). Comment e.g., "Not the book-room, medical room, storage room."

4. Redefine, clarify and narrow the role of the elementary school counsellor (n=34). Comment e.g.s., "Remove 'teaching' function..." "Reducing administrative demands on counsellors would also permit more time to undertake family counselling activities."

5. Educate teachers, administrators, parents and the community about the need for and the role of the elementary school counsellor (n=27). Comment e.g., "Continued 'advertising' of the role, expertise, and mandate with teachers, administrators, and parents; as well as with other agencies in the community."

6. Make work hours for counsellors flexible (n=22). Comment e.g., "Freedom to work in [the] evening, instead of

[during the] day, rather than being expected to do both."

7. Increase the community resources to which families can be referred ($n=16$). Comment e.g., "The structure of the facilities to which I can refer has disappeared over the last fifteen years. If people don't have \$60-\$80 per hour they don't receive therapy, the wait lists are huge."

8. Increased support from school boards and the ministry ($n=15$). Comment e.g.s., "Increased ministry (provincial) support within the fiscal framework, plus district support and services."

In addition to these recommendations, 21 counsellors made comments directly stating that working with families in counselling or therapy is not the role of the elementary school counsellor. One counsellor wrote: "I do not see myself as a parent counsellor, family counsellor, or even a family therapist. Consulting yes, counselling no."

Research Question Results Summary

The results of this study suggest that B.C. elementary school counsellors are currently using parent consultation "Often," family consultation, parent education, and parent counselling "Sometimes," and are "Almost Never" providing family counselling and family therapy. They are consulting with parents over the telephone more often than in person.

Elementary counsellors would ideally like to consult with parents in person more "Often" than by telephone; they would like to use family consultation "Often," parent

education, parent counselling and family counselling "Sometimes," and would still "Almost Never" like to use family therapy interventions.

While these semantic categories do not necessarily indicate higher ideal frequency ratings, t tests did reveal that counsellors would like to use all forms of family member intervention, with the exception of telephone parent consultation, more frequently than they do currently. However when both current and ideal frequencies are considered in relationship to counsellors' performance of other "traditional" functions, these family member interventions are not a priority. Moreover, counsellors would also like to be able to perform some of their traditional functions more often than they are currently able to.

The results of this study further indicate that elementary counsellors in B.C. believe that family consultation and parent consultation are the family member interventions most appropriate to their role. In addition, the majority reported that in terms of the interventions that should be offered by the school district (parent education, parent consultation, family consultation), they themselves would be the most appropriate counsellors to carry out these functions.

"Work Load" and "Work Schedule" were consistently reported as the largest barriers to performing each of the

six different forms of family member intervention.

"Administrative Attitude," "Teacher Attitude," and "Theoretical Orientation" were consistently rated as the smallest barriers to the counsellors' performance of each intervention. Generally, as the level of intensity of the intervention increases, so too does the severity of the barriers to performing the intervention.

A number of recommendations were made to overcome the barriers to family member intervention. Those most frequently reported include: (a) hire more counsellors; (b) provide increased opportunities for training; (c) provide counsellors with a more adequate space in which to work; (d) redefine, clarify and narrow the role of the elementary school counsellor; and (e) educate teachers, administrators, parents and the community about the need for and the role of the elementary school counsellor.

CHAPTER 5

Discussion

This final chapter begins with a discussion and interpretation of the research findings which is divided into five subsections: demographic, background and work-setting data; the current and ideal extent of family member intervention use; the role of the school district and the elementary counsellor with parents and families; barriers to family member intervention; and counsellor recommendations. At times these sections overlap in an attempt to discuss the potential relationships between results. The final sections of this chapter address the limitations of the study and the implications and recommendations for future changes and research.

Discussion, and Interpretation of Results

Demographic, background, and work-setting data. The results of this study indicate that there is a relatively equal proportion of male (44.2%) and female (55.8%) elementary counsellors in B.C.. This finding was unexpected, as it is generally assumed that women greatly outnumber men in this profession.

Over half (54.8%) of the elementary counsellors in B.C. are between the ages of 40-49. This result is similar to Beck's (1984) Milwaukee study in which the average age of counsellors was 42. This finding might be a consequence of

two factors: (a) many elementary counsellors have a teaching career before becoming counsellors; and (b) university graduate counsellor training programs in B.C. prefer to admit more "mature" and experienced individuals.

Relatively few elementary counsellors (26.1%) have been employed as counsellors outside of the school system, while more than half (55.1%) have been elementary school counsellors for only 4 or fewer years. These results might also reflect the previous teaching careers of many school counsellors. They may also be a consequence of the relatively new emergence of elementary counselling as a separate profession and the recent increase in the hiring of elementary counsellors in B.C.. Compared with the 323 B.C. elementary counsellors reported for this study, there were only 97 counsellors reported in 1979 (Allan & Ross, 1979).

In this study, 81.8% of the counsellors reported having a master's degree, 59.0% of which held M.Ed.'s and 16.7% held M.A.'s. Compared with the results of Allan and Ross (1979) it appears that B.C. counsellors are more highly educated than previously (69% in 1979) and are more frequently choosing the M.Ed. (35% in 1979) over the M.A. (27% in 1979). Over 91% of the counsellors in this study hold an undergraduate degree.

It is interesting to note that while currently counsellors are providing minimal services for family members, the large majority have taken courses or workshops

addressing the topics of counselling or therapy with parents (81.0%) and families (91.1%). Furthermore, while counsellors "Almost Never" use family counselling as a method of intervention and only "Sometimes" provide counselling for parents, more counsellors reported having had supervised training in family counselling (41.4%) and counselling adults (41.8%) than in the other forms of family member intervention. This finding may be partly explained by the fact that counsellor training programs in B.C. tend to focus their supervised training component on "counselling" rather than on education or consultation functions.

Regarding the work-setting of B.C. elementary counsellors, the majority work full-time (65.1%), work in 3 or more schools (61.3%), and have a counsellor/pupil ratio greater than the 500 to 1 recommended by the British Columbia School Counsellors' Association (84.1%). It is distressing to note that 51.5% of the counsellors are responsible for 1000 or more students and only 15.9% are responsible for the recommended number of students.

Current and ideal extent of use of family member interventions. The results of this study indicate that B.C. elementary school counsellors would ideally like to perform all family member interventions, with the exception of telephone parent consultation, to a greater extent than they do currently. Parent consultation, followed by family

consultation are the methods of family member contact that they both currently and would ideally like to use to the greatest extent ("Often"). In relationship to these two family member consultation activities and to other traditional school counsellor functions, elementary counsellors are not particularly interested in devoting their time to parent education ("Sometimes"), parent counselling ("Sometimes") or family counselling ("Sometimes") and are especially uninterested in providing family therapy ("Almost Never").

These results are consistent with the suggestion made by a number of authors that consultation provides the means to deal with unmanageable counsellor/pupil ratios (e.g., Dinkmeyer & Dinkmeyer, 1978; Merchant & Zingle, 1977; Umansky & Holloway, 1984). It is interesting to note that in this study, the frequency of both current and ideal performance decreases as the duration and intensity of interventions increases.

B.C. elementary counsellors currently perform to the greatest extent those functions which can most easily be performed within the school setting and within school hours: counselling students, consultation with staff, and telephone parent consultation. While these results might be explained by such factors as theoretical orientation, role definition and training, they may just as likely be a consequence of unmanageable counsellor/pupil ratios and the expectations

for counsellors to work during class hours. In fact, other findings of this study would seem to support this explanation: elementary school counsellors would like to consult with parents in person more frequently than by telephone; and "Work Load" and "Work Schedule" are the two greatest barriers to the performance of all six family member interventions.

Considering that it is generally acknowledged that parents and family are primary influences on the child, the finding that elementary counsellors would like to consult with professionals more frequently than with parents or families was unexpected. A couple of possible explanations exist for this finding. First, because elementary counsellors work primarily in isolation with minimal peer contact, this finding may reflect a need for greater professional support and supervision. It is also equally likely that counsellors see this function as consistent with their role as consultants: by referring parents and families to other services they are able to serve more students. However the latter explanation is somewhat confusing in light of the fact that some consultation with parents and/or families is necessary in order to make successful referrals to other services.

It is also surprising to find that not only would elementary counsellors like to be more involved in classroom instruction, but they would also prefer to engage in this

activity more often than in parent education and family counselling. The author's own experience had led her to assume that elementary counsellors were struggling to be acknowledged as counsellors rather than teachers. It is unclear whether this result reflects an actual desire to be involved in teaching or expresses comfort with a role with which many have experience. It can also be surmised that classroom instruction may be viewed as another means to both manage and perhaps escape an overwhelming caseload. Still another possibility exists; perhaps this result reflects a desire not to teach traditional classroom subjects, but rather to teach guidance programs (e.g., "Learning for Living") to classrooms of students.

Morse and Russell (1988) focused primarily on the traditional aspects of the elementary counsellor role, however some important comparisons can still be made with the present study. Both B.C. and Kansas elementary counsellors reported that they would like to be involved in parent consultation activities to a greater extent. In addition, the discrepancies found in this study between the current and ideal frequencies of function performance are consistent with the conclusions made by Morse and Russell (1988) that conflict exists between the actual and ideal functions of elementary school counsellors.

The results of the present study are not consistent with those of Furlong, Atkinson, and Janoff (1979) who found that

the actual and ideal roles of California elementary school counsellors are congruent. However, in both studies counsellors ranked the individual counselling of students as the activity that currently does and ideally would take most of their time, with consulting ranked second, and parent help third.

A direct and precise comparison of the current and ideal results of this study with those of the Beck (1984) study, which focused exclusively on family counselling, cannot be accurately accomplished due to differences in questionnaire design and data analysis. However, a general comparison does reveal some important similarities.

Milwaukee elementary counsellors (Beck, 1984) were evenly divided: half reported that they currently performed family counselling "Sometimes," (49.5%) and the other half "Never" (49.5%). In the present study, less than half (35.6%) of the counsellors reported that they currently perform family counselling "Sometimes," while approximately half (53.4%) used this function "Almost Never" or "Never."

Concerning the ideal use of family counselling, 40.4% of the counsellors in Beck's (1984) study said they would like to do "More" family counselling. However, despite the fact that one of Beck's research questions focused directly on discrepancies between current and ideal ratings, no adequate attempt was made to measure these, nor was any attempt made to discuss the significance of this result in and of itself

nor in relation to other counsellor functions. In the current study, results of a paired samples t test ($t=-7.92$, $p=.000$) between current and ideal means indicated that B.C. elementary counsellors would ideally like to use family counselling to a greater extent than they currently do. However, in relation to traditional school counsellor functions, parent consultation, family consultation, and parent education, family counselling is not a priority for B.C. elementary counsellors.

Role of elementary counsellors and the district with family members. Consistent with the above findings, the majority of B.C. elementary counsellors believe that parent and family consultation are the most appropriate family member interventions to their role. It is interesting to note that only a little over half (56.0%) of the counsellors reported parent education as an appropriate function; in the past, the school has been regarded as the most appropriate setting in which to provide this service (Muro & Dinkmeyer, 1977).

It is also important to highlight that while parent and family counselling are not priorities in terms of time (would like to perform "Sometimes"), a sizeable percentage (38.6% and 43.6% respectively) of the counsellors believe these to be appropriate functions to be performed by elementary counsellors. An analysis of the frequency results of the ideal extent of performance for these two

interventions does not provide further explanations for these findings.

In terms of the role of the school district in providing services to family members, parent education, parent consultation and family consultation were all deemed appropriate. However, it is clear that elementary counsellors view their own role as the most appropriate within the district for providing these services. In fact, another district helping professional was not considered to be a more appropriate role for providing any of the six family member interventions. With regard to parent counselling and family counselling, B.C. elementary counsellors are fairly evenly divided about whether these interventions are most appropriately offered by the school district (49.8% and 59.3% respectively) or by other community professionals (50.2% and 40.7% respectively).

Barriers to intervention with family members. The majority of the counsellors in Beck's study reported "Work Load" (81.6%) as a barrier to family counselling. In the present study, not only was "Work Load" rated as a "Moderate barrier" bordering on a "Large barrier" ($\underline{M}=3.50$) to family counselling, but it was also reported to be the most severe barrier to the performance of all the family member interventions that were under investigation.

"Work Schedule" ($\underline{M}=3.31$), reported as the second most severe barrier to family counselling by B.C. elementary

counsellors, was reported to be a barrier (referred to as "Lack of Time") by the third largest percentage (64.0%) of Milwaukee counsellors (Beck, 1984). While "Lack of Training" was reported by the second largest percentage (71.1%) of counsellors in the Beck (1984) study, in this study it was rated as a "Small barrier" ($\underline{M}=2.01$) to family counselling. This last inconsistency may be explained by the fact that only 25.4% of the Milwaukee counsellors had taken a course in family counselling, whereas 91.1% of B.C. elementary counsellors have taken a course or workshop in family counselling or family therapy, and 41.1% have received supervised training in family counselling.

Only 10.5% of the elementary counsellors in Beck's (1984) study reported "Contract Restraints" as a barrier to family counselling, while this study's comparable counterpart "Role Definition," was rated as a "Moderate barrier" ($\underline{M}=2.74$). However the results of both studies indicate that "Administrative Attitude" ($\underline{M}=1.81$ and 20.2% respectively) and "Lack of Facilities" ($\underline{M}= 2.30$) or "No Facilities" (19.3%) are relatively small barriers to the provision of family counselling services by elementary counsellors.

The results regarding the barriers "Work Load" and "Work Schedule" are also consistent with a study carried out by Allan and Ross (1979). Twelve years ago, B.C. elementary counsellors reported that "overload" and "lack of time" were

the main inhibiting factors to successful job completion. Hence, these factors continue to hinder counsellors in the performance of their role.

In general, the results concerning barriers are consistent with and support the results previously discussed regarding the elementary counsellors' role in, and extent of performance of family member interventions. This is most evident in that all nine barriers were rated as the least severe to performing parent and family consultation, the two methods of family member intervention that counsellors would like to perform to the greatest extent and deem the most appropriate to their role.

"Role Definition," rated as a "Large barrier" to family therapy ($\bar{M}=3.53$) supports the finding that the majority of counsellors (93%) do not believe this to be a function appropriate to their role. Furthermore, in comparison to the other family member interventions, all barriers were rated as more severe (either as "Moderate" or "Large") to the performance of family therapy, a service they would not like to provide ("Almost Never"). However, there is no way to determine whether the severity of the barriers actually impedes counsellors' willingness to perform this function, or whether a lack of willingness to perform this function strengthens the counsellors' perceptions of barrier severity.

Contrary to the beliefs held by Umansky and Holloway

(1984), "Administrative Attitude" was not reported to greatly hinder the counsellors' performance of any of the family member interventions. The same was found for both "Teacher Attitude" and "Theoretical Orientation." These results suggest, at least from the perspective of elementary counsellors, that the attitudes of administrators, teachers, and the counsellors themselves are not to any great degree preventing elementary counsellors from working with parents or families. Considered in perspective with the findings as a whole, it would seem that elementary counsellors are not theoretically opposed to working with parents and families; they just do not see these functions as priorities for their role.

The finding that "Parent Reluctance" is a "Moderate barrier" to elementary school counsellors' implementation of family therapy provides some support to the claim of Strother and Jacobs (1986) that parents are unwilling to participate in this process. However, these results may be a consequence not only of parent reluctance but also of counsellor training; few reported that they were trained in family therapy and therefore are likely unprepared to engage reluctant parents and/or families in the process of therapy.

The two greatest barriers to family member interventions, "Work Load" and "Work Schedule," could explain the significant differences found between what B.C. elementary counsellors are doing and what they would like to

be doing in terms of working with parents and families. It may also be the case that these barriers account for a great deal of the role conflict experienced by counsellors in terms of traditional functions as well.

The significance of these barriers becomes even greater in light of the fact that a number of the counsellors reiterated "work load" or "counsellor/pupil ratio" ($\underline{n}=44$) and "lack of flexibility in work schedule" ($n=24$) when requested to indicate additional barriers. Regarding the latter, one counsellor wrote of the difficulty in: "...scheduling services to meet parent/family needs while also having to take into consideration the amount of time that the counsellor puts into the job." The problems of time and work load are interconnected and the comments made by elementary counsellors give the impression that their present working conditions lead them to feel overwhelmed and hopeless about their jobs: "My caseload is so full I can barely keep my head above water coping with school issues. Even though I know in my heart if I had the time to work with the home in many cases the school problems would improve"; "The job of the elementary counsellor is enormously stressful."

A few ($\underline{n}=15$) counsellors reiterated that inadequate and inappropriate facilities hindered their ability to effectively carry out their role functions. One counsellor wrote that a "lack of facilities is a perennial problem, not

just for working with parents. It doesn't stop me from doing anything, it merely stops me from doing it effectively." Counsellors reported that they worked in "closets," "principals' offices," "staff rooms," and "nurses' rooms." However these comments are inconsistent with the counsellors' mean ratings that reported "Lack of Facilities" as a "Small barrier."

Other counsellors (n=14) reiterated that the broadness of the elementary counsellor role was a major barrier to their ability to provide services for parents and families. One counsellor wrote: "I don't think its possible to do what is expected of us at the school level (seeing individuals, groups, classes, consultation) AND see parents and especially families on a regular basis."

The most frequently reported "additional" barriers were indicated as such by a small number of respondents. Eleven elementary counsellors reported that a lack of adequate and appropriate services within the community was a barrier to working with parents and families. These counsellors made such comments as: "...families have to wait 3-4 months for family services or pay \$50 to \$60/hour for private practice work. I can often see the momentum for change completely disappear in a matter of minutes." This lack of services may account for the reluctance of counsellors to even consult with parents or families, since they have few referral resources to offer.

Ten counsellors reported that a lack of funding from the ministry is a barrier to parent or family intervention. One counsellor wrote that there is a "Poor attitude of the ministry towards its provision of service for the social and emotional issues of children." The same number of counsellors ($n=10$) believe that cultural and language differences between the counsellor and client hinder their ability to work with parents and families: "...in Vancouver where I work 50%-60% of the families do not speak English." Finally, counsellors ($n=10$) reported as a barrier the lack of understanding on the part of parents, school staff, and the community regarding the role and importance of the elementary counsellor: "There is a tendency to not see counsellors as professionals."

Other barriers that were mentioned ($n=5$ to 9), and may be important to be aware of in the future, include:

(a) mandate confusion of the ministries regarding whose role it is to work with families; (b) the attitude of teachers and administrators that children can and should be "fixed"; (c) circumstances within the family (e.g., dual career families); (d) a lack of training and/or supervision opportunities; and (e) for various reasons, some counsellors felt that the school is an inappropriate place for conducting family counselling or therapy.

Counsellor recommendations. Despite the low priority given to many of the family member interventions in

comparison with traditional school counsellor functions, the majority (77.9%) of the responding counsellors offered recommendations for overcoming the barriers to working with parents and families. This may in part be due to the fact that the majority of the recommendations could be applied to all forms of family member intervention, that is, both those which counsellors would, and those which they would not like to perform. Furthermore, many of the recommendations (e.g., hire more counsellors, redefine the counsellor role, provide an appropriate space in which to work, etc.) can also be identified as issues with which counsellors have been generally concerned for some time. The following is a discussion of the eight most frequently reported recommendations.

Overwhelmingly, counsellors ($n=108$) recommended that in order for them to be able to work with parents and families, the present counsellor/pupil ratio must be drastically reduced. In their words, "more elementary counsellors need to be hired" or school districts must "provide more counselling time for schools." It was suggested that one counsellor be hired for every elementary school or for every 300 to 400 students. Given the present ratio, this recommendation makes intuitive sense, not only in terms of family member intervention but also in terms of the role conflict generally experienced by B.C. elementary counsellors.

The second largest number ($n=41$) of counsellors recommended that increased training opportunities be provided to overcome barriers. This is surprising in that "Lack of Training" was rated as either "Not" or only a "Small" barrier to 5 out of the 6 family member interventions. Some of the suggestions that were made for providing counsellors with such training included:

(a) "Training programs offered through summer institutes...;" (b) "...accessible weekend workshops, supervised training."; (c) "in-service ... with trained, accredited, teaching supervisors in family systems theory and practice."; and (d) "U.B.C. counselling psychology could set up a certification program during the evenings or on Saturdays to accommodate the counsellors who need a refresher course or to learn how to work with families."

Thirty-four elementary counsellors recommended that counsellors be provided with an appropriate space in which to work. This recommendation is clearly directed at a general lack of appropriate space, not just for carrying out functions with parents or families. One counsellor reported that she is "... often distressed by the lack of privacy." This recommendation contradicts the low barrier ratings that counsellors gave to "Lack of facilities" for all six family member interventions. With specific regard to space for sessions with two or more individuals, another counsellor recommended "that ministry building requirements ensure

facilities for small group meetings in each school."

Counsellors ($n=34$) also recommended that the role of the elementary school counsellor be narrowed, clarified and/or redefined. Many called for a reduction or a removal of teaching and administrative functions from their role. Here again, there was a sense that elementary counsellors already feel overwhelmed with the demands of their role. If they are to be expected to work with families, "...the role of the elementary counsellor in family interventions has to be clearly defined." However, few of these counsellors made such recommendations as: "Change the role definition to recognize that the majority of childrens' problems are systemically based and counselling must include family members."

Counsellor impressions of a lack of professional credibility are evident in their recommendations that teachers, parents and the community be educated regarding the importance and the role of the elementary counsellor ($n=27$).

Given that "Work Schedule" was rated as the second largest barrier to intervening with family members, it is somewhat surprising to find that more counsellors ($n=22$) did not recommend flexible work schedules. Experience offers the following possible explanation: the author has been in contact with many elementary counsellors who cite inflexibility in their work schedule as a reason for not

working with parents and families, but who have made no attempt to get permission from their administrators to create flexibility; in reality many are reluctant to work evenings.

Elementary counsellors ($n=16$) also recommended an increase in the number of community agencies to which families can be referred. The lack of such facilities is frequently highlighted by such comments as: "The structure of the facilities to which I can refer has disappeared over the last fifteen years. If people don't have \$60 to \$80 per hour they don't receive therapy, the wait lists are huge."

Fifteen counsellors made recommendations such as: "More support from administration, board and entire school system for school based counselling." The form this support could take was suggested to be "encouragement," "direction," and "funding."

A number of other recommendations were suggested for overcoming the barriers to providing services for parents and families. Although offered by only a small number ($n=6$ to 12) of counsellors, these recommendations may nonetheless be important to any future considerations of role modification. The following quotations represent these recommendations: (a) "Counsellors networking, sharing, and problem solving"; (b) "increase the opportunity for liaison with other agencies to coordinate services"; (c) "create specialization within the elementary school counsellor

role"; (d) "counsellor training programs should emphasize more family training"; (e) as a job requirement "all elementary school counsellors should have training in family systems counselling and therapy"; (f) "Counsellors should prioritize their time and goals"; and (g) educate teachers regarding "classroom management," "the social/emotional needs of children," and "listening skills."

Rather than offering recommendations, a few ($n=21$) counsellors used the open-ended question to clearly state their belief that working with families in counselling or therapy is not the role of the elementary school counsellor: "Working with families is not nor should it be the role of the elementary school counsellor - cannot be all things to all people." Apparently feeling the pressures placed on the school system for the emotional health of children and families, one counsellor wrote that "Government and community need to see these services as community social demands, not as more and more demands to be made upon the school system." Similarly, another counsellor suggested that "counselling the family needs to be done in the community as a part of society not as a school function."

Limitations

The scope of this study was restricted to elementary school counsellors in British Columbia; its findings may therefore only be generalized to this group of counsellors.

The questionnaire used in this investigation was

developed specifically for it; consequently, there is no data to support its reliability. In order to help establish face validity prior to actual data collection, two pilots of the questionnaire were conducted with elementary school counsellors in the B.C. Lower Mainland. The questionnaire was revised based on the results of these pilots.

These pilot studies indicated that some of the counsellors' perceptions seemed to be affected by their need to appear consistent and competent. As a result, the ordering of the questionnaire items was changed somewhat; counsellors were asked to respond to the "ideal" scenario before the "current" one in an attempt to lessen this tendency to "look good." Even though a discrepancy was found between current and ideal performance on most functions, it was not possible to eliminate all tendency of respondents to "look good"; hence this factor may have reduced the degree of the discrepancies.

In addition, while the response rate of 76.2% is quite adequate, there is a possibility that the 23.8% who did not respond represent a biased sampling (Borg & Gall, 1983). The response rate may also have been affected by school district strikes that were occurring in different parts of the province during the data collection period. In addition, some of the comments made by counsellors who responded to the follow-up mailings suggested that perhaps the initial request to "return the questionnaire within one

week of receiving it," (see Appendix B), rather than "A.S.A.P.," deterred some from responding. These factors should be considered in future studies.

Concerning the questionnaire itself, there are some changes that would be recommended in the event that it or a modified version were used in the future. In "Part I" item 5 the first category should have read "500 or less" instead of "499 or less" in order to more accurately reflect the British Columbia School Counsellors' Association counsellor/pupil ratio recommendations. For item 8 of this same section "Diploma in teaching" would have been better described as "Diploma or Certificate in teaching" in order to more accurately reflect the language used in B.C. to describe such training (see Appendix B).

Many counsellors appeared to misunderstand the actual intent of item 12 of "Part I" and responded in terms of whether or not any type of consultant, counsellor or therapist was employed at their school or in their district. This item could have been more accurately written as: "Are there any other family counsellors, family consultants, and/or family therapists employed..." in order to more clearly specify "family" workers. The questionnaire's request for written descriptions of these helping professionals assisted in the interpretation and categorization of these responses; however, the accuracy of this information was unavoidably lessened.

Finally, despite the fact that in "Part II," item 1 the counsellors were instructed to choose only one response, some reported that certain parent and/or family interventions should be offered by more than one type of helping professional. Since this study was interested in counsellor perceptions of the appropriateness of family member interventions to the elementary counsellor role and to the school district, multiple responses were prioritized as follows: any time a respondent checked "School Counsellor," this response was recorded, and others ignored; if they checked "Another Inside the School District" as well as "Another Outside the School District," the former was recorded. These issues may have been more accurately addressed if contained in three separate items.

Implications and Future Recommendations

While the practical implications of the results of this investigation pertain specifically to B.C. elementary counselling, it is hoped that some of this study's findings and implications will be useful to those involved in the development and implementation of elementary counselling programs in other regions of Canada.

Recommendations regarding services for parents and families. Elementary counsellors in B.C. believe that parent consultation and family consultation are the two most appropriate forms of family member intervention to their role. Moreover, they would like to be involved in these

activities "Often." However there are a number of barriers which counsellors perceive to be hindering their ability to provide such services, or for that matter, any other form of service to parents or families.

Given these findings, in combination with counsellor recommendations as well as the underlying assumption that elementary school counselling programs should offer some form of service to parents and/or families, it is recommended that elementary counsellors and those involved in the training and hiring of these professionals begin to actively work towards making parent and family consultation activities a clearly defined aspect of the elementary school counsellor role.

More specifically, the practical recommendations pertaining to this study are as follows:

1. More efforts must be made to decrease counsellor/pupil ratios to reflect the 500 to 1 that has been recommended by the British Columbia School Counsellors' Association. This recommendation is the most important, not only in order to realize the counsellors' wishes to consult with more parents and family members, but also to address the high degree of role conflict and stress experienced by elementary counsellors.

2. Elementary counsellors need both permission and support in order to be able to create flexibility within their work schedules. In this way they will be able to meet

the needs of working parents without having to overextend themselves.

3. Counsellor educators need to examine the congruence between their training programs, the role demands that counsellors actually face and the professional role they would like to fulfil.

4. Increased responsibility should be taken by the province's universities in the continuing education of counsellors.

5. School counsellor graduate level training programs should place more emphasis on instruction in family systems theory and parent and family consultation skills.

6. Alternate training opportunities must be developed that are accessible to rural counsellors as well as to counsellors who are already working in the field.

7. Knowledge of and skills in parent and family consultation should be necessary job qualifications for elementary school counsellors.

8. Since parent counselling, family counselling, and family therapy are not priorities for elementary school counsellors, nor can they realistically be accomplished in addition to the many other role requirements, a sufficient number of community resources must be established in order to accommodate referrals and provide these services.

9. The provision of an appropriate space for counsellors in which to work with children and small groups (i.e.,

parents, families, students) should be made mandatory in every school that receives these services.

10. The role of the elementary counsellor as a consultant to parents and families must be clarified and established through promotion and the education of school staff, parents, and the community as a whole. Furthermore this role component should be consistent across districts in order to provide consistent services for B.C. students, parents and families.

11. Finally, elementary counsellors must become more active and "must assume leadership in defining their own role, rather than waiting until the demands and definitions of others shape the counsellors' role" (Morse & Russell, 1988, p.61).

Recommendations for further research. Were some of these recommendations, particularly a decrease in counsellor/pupil ratio, to be realized, it would be valuable to carry out another similar study in order to explore the effects of barrier reduction on the counsellors' current and ideal delivery of services to parents and families.

An educational and training needs assessment would help to determine the location, timing, form, and content needs of elementary counsellors in terms of parent and family intervention training programs.

Since the role of the elementary school counsellor affects and is affected by many populations, it would be

worthwhile to investigate the perceptions and needs of these groups. Students, parents, and school personnel could be consulted regarding the current and ideal role of the elementary school counsellor with parents and families, and/or the needs of students, parents and families could be assessed regarding school counselling services.

Perhaps most importantly, a great deal more research needs to be conducted in order to determine the effectiveness of school based family member interventions in comparison with the traditional school counsellor interventions that focus primarily on the individual student.

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Appendix A

Request for counsellor names
Follow-up request



Department of Counselling Psychology
Faculty of Education
5780 Toronto Road
Vancouver, B.C. Canada V6T 1L2

November 5, 1990

Dear Head of Student Services /
Supervisor of Elementary Counsellors:

I am a M.A. candidate in the Department of Counselling Psychology at the University of British Columbia. Under the direction of Dr. John Allan (Faculty of Education) I am carrying out a study regarding the functions of elementary school counsellors with parents and families. In essence, this study addresses how elementary school counsellors currently and ideally perceive their roles with parents and/or families.

I would greatly appreciate it if you could send me a listing of the elementary school counsellors in your district, along with the names and addresses of their schools, so that I can mail my brief survey to them. Please mail the list of names and addresses to:

Dr. John Allan
University of British Columbia
Faculty of Education
Department of Counselling Psychology
5780 Toronto Road
Vancouver, B.C. V6T 1L2

This study will assist in both the training and practice of elementary school counsellors in British Columbia. Thank-you in advance for your cooperation and commitment to improving on the effectiveness of our profession.

Sincerely,

Kym Samis

THE UNIVERSITY OF BRITISH COLUMBIA

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Department of Counselling Psychology
Faculty of Education
5780 Toronto Road
Vancouver, B.C. Canada V6T 1L2

January 28, 1991

Dear Head of Student Services /
Supervisor of Elementary Counsellors:

I am a M.A. candidate in the Department of Counselling Psychology at the University of British Columbia. Under the direction of Dr. John Allan (Faculty of Education) I am carrying out a study regarding the functions of elementary school counsellors with parents and families. In essence, this study addresses how elementary school counsellors currently and ideally perceive their roles with parents and/or families. A review of recent literature indicates an increasing number of advocates for school counsellor intervention with parents and families. However this issue has received little direct input from elementary school counsellors themselves.

In November 1990 I wrote to you requesting a listing of the elementary school counsellors in your district, along with the names and addresses of their schools. As I have not yet received a reply from you, I would like to make a second request for this information so that I can mail my brief survey to them. The date to mail my questionnaires draws near and it is important that all elementary school counsellors in British Columbia have the opportunity to participate. Please mail the list of names and addresses to:


Dr. John Allan
University of British Columbia
Department of Counselling Psychology
5780 Toronto Road
Vancouver, B.C. V6T 1L2

If your district does not employ any elementary school counsellors or if for any reason you do not wish to send the information, please let me know. Thank-you in advance for your cooperation and commitment to improving on the effectiveness of our profession.

Sincerely,

Kym Samis

Appendix B
Covering letter
Questionnaire



Department of Counselling Psychology
Faculty of Education
5780 Toronto Road
Vancouver, B.C. Canada V6T 1L2

March 11, 1991

Dear Counsellor:

The role of the elementary school counsellor is currently a topic of considerable discussion and concern. A review of recent literature indicates an increasing number of advocates for school counsellor intervention with parents and families. We are interested in your views regarding this counsellor role issue.

As an M.A. candidate in the Department of Counselling Psychology at U.B.C. under the supervision of Dr. John Allan (Faculty of Education; phone 228-4625), I am investigating Elementary school counsellors' perceptions of their current and ideal functions with parents and families.

The purpose of the enclosed questionnaire, which has been developed specifically for this survey, is to determine how elementary school counsellors in B.C. are currently working with parents and families, and how they would like to be able to work with parents and families. I would greatly appreciate it if you could spare some of your valuable time to contribute your views by completing this questionnaire.

Your responses will be used to make recommendations regarding: the role of the elementary school counsellor with parents and families; any necessary modifications to the demands made upon counsellors; and any necessary modifications to graduate training programs so that they more accurately reflect job demands and learning needs.

The questionnaire should take no more than 25 to 35 minutes to complete. "Working" definitions of counsellor functions have been provided to assist you. Please do not put your name on the questionnaire. Once you have completed it, deposit it in the provided blank envelope first and then in the pre-addressed stamped return envelope. This will ensure the confidentiality of your responses; no connection will be made between any individual and her or his answers. Completion of the questionnaire assumes your consent to participate and, of course, you hold the right to refuse to participate or to withdraw from the study at any time.

Please return the questionnaire within one week of receiving it. A final report on the results will be forwarded to all B.C. school district supervisors of Elementary School Counsellors.

Thank-you for your time and important contribution.

Sincerely yours,

Kymberle Samis
Dept. of Counselling Psychology
University of British Columbia

**ELEMENTARY SCHOOL COUNSELLOR SURVEY:
YOUR ROLE WITH PARENTS AND FAMILIES**

DEFINITIONS

The following are "working" definitions of six different forms of intervention with parents and families. Please use these definitions to complete the questionnaire. Because we are primarily concerned with elementary school counselling, for the purpose of this questionnaire, a family consists of at least one child and one parent or guardian.

Parent Education.

The counsellor facilitates educational meetings with a group of parents whose children may or may not be experiencing difficulties at school. The primary focus of these meetings is to help parents learn more effective parenting skills and to improve their relationships with their children.

Parent Consultation.

The counsellor assists parents to understand their child within the educational and social context of the school; provides information about school or community programs which may be of assistance; and offers suggestions regarding parenting skills which may help the child to grow both at school and at home.

Parent Counselling.

The counsellor provides assistance to parents individually or as a couple regarding personal issues such as divorce, loss, substance abuse, family of origin influences on parenting, child behaviour influences on the marital relationship, etc. These issues usually come to the attention of the counsellor because of difficulties that the child is experiencing in school.

Family Consultation.

The counsellor provides short-term assistance to help a child and his or her family explore and understand the child's problem within the context of both the school and the family; provides information about community and school programs that may be of assistance; may refer the family for family counselling or therapy; and/or offers suggestions to family members about how to assist the child both at school and at home.

Family Counselling.

The counsellor provides assistance to help a child and his or her family resolve issues (e.g., loss, illness, single-parent family adjustment) that are linked to difficulties that the child is experiencing in school. This assistance could take the form of giving information, facilitating awareness of painful emotions, and teaching strategies for improving communication skills and problem solving.

Family Therapy

The therapist becomes involved in an intensive treatment process with a family in which one or more children are experiencing difficulties at school. The therapeutic process is intended to create shifts in world views, interpersonal patterns, hierarchies, roles, and rules. Involvement and change occurs at a deeper level than with family counselling.

Elementary School Counsellor Survey

Part I - General Information

DIRECTIONS: Please check or fill in the appropriate responses to questions 1 through 12.

1. Gender: ☐ Female ☐ Male

2. What is your age?

- | | |
|-----------------------------|-----------------------------|
| <input type="radio"/> 20-24 | <input type="radio"/> 45-49 |
| <input type="radio"/> 25-29 | <input type="radio"/> 50-54 |
| <input type="radio"/> 30-34 | <input type="radio"/> 55-59 |
| <input type="radio"/> 35-39 | <input type="radio"/> 60-64 |
| <input type="radio"/> 40-44 | <input type="radio"/> 65+ |

3. For what percentage of time are you currently employed as an elementary school counsellor?

- ☐ 30% or less ☐ 40% ☐ 50% ☐ 60% ☐ 70% ☐ 80% ☐ 90% ☐ 100%

4. How many schools are you responsible for? _____

5. What is your counsellor/pupil ratio (i.e., how many students, in total, attend the schools for which you are responsible)?

- ☐ 499 or less ☐ 500→749 ☐ 750→999 ☐ 1000→1249 ☐ 1250→1499 ☐ 1500 or more

6. Have you worked as a counsellor outside of a school system? If yes, for how many years? _____

7. How many years have you been employed as an elementary school counsellor? _____

8. Please indicate if you hold any of the following undergraduate degrees or diplomas.

- ☐ B.Ed. ☐ B.S.W. ☐ Diploma in guidance counselling. ☐ Other.
- ☐ B.A. ☐ B.Sc. ☐ Diploma in teaching.

9. Please indicate if you hold any of the following graduate degrees.

- ☐ M.Ed. ☐ M.S.W. ☐ Other
- ☐ M.A. ☐ M.Sc.

10. Have you taken any courses or workshops which specifically addressed the topic of counselling or therapy with:

(a) Parents

(b) Families

☐ yes

☐ no

☐ yes

☐ no

11. Have you ever received supervised training in (please check):

(Supervised training is here defined as at least 15 hours of contact with a counsellor trainer regarding face to face work with clients).

☐ Family Consultation

☐ Parent Education

☐ Counselling Adults

☐ Family Counselling

☐ Parent Consultation

☐ Couples Counselling

☐ Family Therapy

12. Are there any other family counsellors, consultants, and/or therapists employed:

(a) at your school?

☐ yes

☐ no

If yes, please explain their function.

(b) in your school district?

☐ yes

☐ no

If yes, please explain their function.

Part II - Counselling Services

1. In your opinion, should the following services for parents and families be offered by: the appropriately trained elementary school counsellor; another helping professional from within the school district; or another helping professional outside the school district? Please place ONE check in each section for each item.

	School Counsellor	Another INSIDE The School District	Another OUTSIDE The School District
Parent Education			
Parent Consultation (face to face)			
Parent Counselling (individual or couple)			
Family Consultation			
Family Counselling			
Family Therapy			

2. Here are some potential school counsellor functions. Please place ONE check in each section for each item in terms of how often you **WOULD LIKE** to perform these functions.

I **WOULD LIKE** to do this:

	Very Often	Often	Sometimes	Almost Never	Never
Parent Education					
Parent Consultation (face to face)					
Parent Consultation (telephone)					
Parent Counselling (individual or couple)					
Family Consultation					
Family Counselling					
Family Therapy					
Counselling Students (one on one)					
Classroom Instruction					
Group Counselling					
Consultation with Staff (Teachers and Administration)					
Counselling Staff (Teachers and Administration)					
Consultation with other Professionals					

3. Please place ONE check for each item in terms of how often you **DO** these same potential elementary school counsellor functions.

I **DO** this:

	Very Often	Often	Sometimes	Almost Never	Never
Parent Education					
Parent Consultation (face to face)					
Parent Consultation (telephone)					
Parent Counselling (individual or couple)					
Family Consultation					
Family Counselling					
Family Therapy					
Counselling Students (one on one)					
Classroom Instruction					
Group Counselling					
Consultation with Staff (Teachers and Administration)					
Counselling Staff (Teachers and Administration)					
Consultation with other Professionals					

4. Please rate each of the following items in terms of how great a barrier they are, for you as a school counsellor, to performing each of the six different forms of intervention with family members. Please choose one response for each barrier-intervention pair from the following scale:

4 = large barrier
 3 = moderate barrier
 2 = small barrier
 1 = not a barrier

	Parent Education	Parent Consultation	Parent Counselling	Family Consultation	Family Counselling	Family Therapy
Work Load						
Role Definition						
Work Schedule						
Lack of Facilities						
Lack of Training						
Parent Reluctance						
Teacher Attitude						
Administrative Attitude						
My Theoretical Orientation						

Are there any other barriers to working with family members which have not been included in the above list?
 Please explain:

5. What are your recommendations for overcoming these barriers?

Thank-you for your time and important contribution to this study.

Appendix C

First follow-up letter
Second follow-up letter

THE UNIVERSITY OF BRITISH COLUMBIA



Department of Counselling Psychology
Faculty of Education
5780 Toronto Road
Vancouver, B.C. Canada V6T 1L2

April 12, 1991

Dear Counsellors:

We hope you had an enjoyable and relaxing Spring Break. Now that you are back to work we would really appreciate your taking the time to complete and return the questionnaire we sent to you in March (entitled "Elementary School Counsellor Survey: Your Role With Parents and Families"). Your voice regarding the future role of elementary school counsellors is extremely important!

Sincerely yours,

Dr. John Allan

Kym Samis

University of British Columbia
Department of Counselling Psychology
Faculty of Education
5780 Toronto Road
Vancouver, B.C., V6T 1L2

THE UNIVERSITY OF BRITISH COLUMBIA

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Department of Counselling Psychology
Faculty of Education
5780 Toronto Road
Vancouver, B.C. Canada V6T 1L2

May 10, 1991

Dear Counsellor:

In March we sent the enclosed questionnaire to all elementary school counsellors in B.C. (n = 327). While many have responded, there are still many others (33%) who have not voiced their views about what their role should be with parents and families.

Thus far the results indicate that the majority of counsellors are overburdened with an unmanageable counsellor/pupil ratio, and are frustrated with the lack of time they have to provide effective services for children alone and/or family members. At the same time, the literature suggests that school counsellors do not take enough responsibility for changing their role. The enclosed survey is aimed directly at these two problems. Its results and implications will be widely circulated (e.g., to the B.C.S.C.A., B.C.T.F., and district supervisors) in order to maximize its impact. However both the validity and force of its practical implications are lessened with each counsellor who does not participate.

This is an opportunity for each and every B.C. elementary counsellor to have a voice regarding their present and future role. Please take the time to contribute your opinions and recommendations by completing and returning the questionnaire, not just "for the sake of the children" - but this time also for yourself.

Sincerely yours,

Dr. John Allan

Kym Samis