

Using live demonstration to prepare students for direct counselling practice

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Abstract

Live demonstration is an important pedagogic tool in courses aimed at teaching students how to conduct counselling. It facilitates the integration of theory and practice. In this paper, the elements of live demonstration are outlined, and related limitations and dilemmas are discussed. It is emphasised that for live demonstration to be effective clients should be pre-screened for suitability, informed consent should receive due attention, confidentiality should be strictly guarded, a consent form should be signed and resources should be readily available in case of crises. In addition, faculty need to make arrangements for therapeutic continuity should further counselling be necessary at the end of the course. Clients' needs should be of commanding importance throughout the process. The future research is indicated to address these issues and further evaluate how this innovative teaching method may contribute to the training of future counsellors and therapists.

Keywords: Live demonstration, counselling, one-way-mirror, supervision.

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1. Introduction

Preparation of students for practice in social work, counselling, psychology, occupational therapy and nursing has rested on a latent assumption that academia will do research, theory building and dissemination, and field work placements will expose students to clients and assist them in gaining competency in intervention skills (Nuthall, 2004). This has the potential to create a bifurcation between the two major elements of counselling education – theory and direct practice. This division of labour may be comfortable to both academics and field education supervisors alike, but may not be in the best interest of the students. In the classroom, students are exposed to theory, and may sometimes even engage in simulations. However, they almost never can see real clients and sense the complexity of the application of practice theory in real-life situations with actual clients. In the field, they do not often see a well-articulated theory-based application including the integration of several theories and approaches; they just see ‘how things are done’. Often the supervisor cannot provide the theoretical basis for his/her work, nor the relevant research data. The students are left to do the integration between theory and practice on their own. Some may do this successfully in a drawn out process, but others may never get to this state. Many practitioners report that the absence of such integration hampers their practice. Academic departments may bring practitioners from the field to teach but without student’s exposure to their direct work with clients their contribution remains potentially unfulfilled (Corlett, 2000; Maben, Latter & Clark, 2006; Pilalis, 1986; Sheppard, 1995; Sung-Chan & Yuen-Tsang, 2008). In this paper, an innovative teaching method that can bridge this apparent gap is outlined – live demonstration that facilitated practice learning. Dilemma questions that are related to this educational approach are discussed.

Here, students are live observers of a real therapeutic process. In addition, they are required to counsel one client system – individual, couple or family – throughout the course, so they have a chance to apply class learning to their direct work in the field. They are supervised at the local agencies where they practice. However, they also bring their own therapeutic work for discussion in the class and write about their cases in their weekly notes to the teacher.

2. Live Demonstration Facilitated Practice Learning

Live demonstration is used to teach counselling practice with three separate populations – individuals, families and children. Live practice with clients becomes the main venue for teaching such practice. Small classes, with up to 20 students, meet with their instructor weekly for 3 hours, for an entire academic year, in a dedicated communications laboratory – consisting of a treatment room and adjacent observation room equipped with audio-visual equipment.

The course begins with an introduction to the syllabus and a brief theoretical orientation to the field of practice, for example, a look at the guiding principles and intervention models of family therapy. Next, students are asked to consider their caseloads at their place of work or field practicum setting and choose clients who might be appropriate and benefit from participation in the course. The client receives treatment from the instructor, a senior practitioner, at no cost. There is due consideration given to issues of informed consent and confidentiality. That is, the clients are informed about the fact that students are watching them and sign a consent form. They know that they can withdraw their participation at any given moment and that this is perfectly acceptable. Furthermore, clients screen the students before the demonstration begins to make sure that no student is known to them prior to the demonstration. The students also sign a form attesting to their obligation to keep all information about clients strictly confidential.

Each course meeting is divided into three parts. Initially, there is a theoretical discussion of the case to be worked with highlighting the thoughts of teacher and students about how the session ought to proceed. Based on the available assessment information, hypotheses are posited that may illuminate intervention directions, including likely client stances. Ethical and logistical complexities are considered.

In the second and lengthiest segment of each course meeting, the client joins the class, and a treatment session is conducted by the teacher, who is assisted by the student who invited the client from their caseload, to participate in the course. The other students observe through a one way mirror and document proceedings.

The last segment of the session consists of a discussion on what was done, related questions and dilemmas as well as alternate courses of therapeutic action. Students may relate what they have observed in the live counselling demonstration to course reading assignments and homework tasks. There is an emphasis on parallel process and this topic is highlighted throughout. It should be mentioned that, several times during the year clients are not invited and structured discussions occur in the course, which allows an in-depth analysis of therapeutic processes that have unfolded in the course of the live counselling demonstration.

Students are expected to complete reading assignments at home, related to counselling theory, interventions and techniques. They correspond with each other between sessions, regarding the reading, and send weekly personal reflections, via e-mail, to the teacher in which they describe the parallel process that they experience. Highlighted here is the manner in which the learning experience affects both their professional and personal lives. This weekly correspondence allows the teacher to support the students in their readings, personal experiences and challenges and difficulties.

3. Challenges and Dilemmas Related to Live Demonstration Facilitated Practice Learning

3.1. Suitability of clients for live demonstration

Several questions arise when considering which clients may be suitable to take part in live demonstration. Some potential participants may feel embarrassed to expose their problems and struggles in front of strangers, who observe from behind a one-way mirror. Although most clients usually forget that they are being watched and focus on their personal issues, any hesitation should be respected and no attempt should be made to convince them to take part. Only those who genuinely wish to participate and realise the potential benefit for themselves from the process should be included. It is also important to emphasise that clients are free to choose those topics and issues they wish to share topics to discuss and that they can change their mind at any given point throughout the process.

It is important to thoroughly review the case prior to the decision whether or not to include a person or a family in the demonstration. Clients who are actively psychotic, suicidal or are in the midst of an acute crisis should be excluded. At such times, they need all their energy and resources to recover, and being observed from behind a one-way mirror might add stress to their already difficult situation. It should also be emphasised that, some events are unexpected and clients may fall into crisis during the demonstration. In such cases, clinical support should be available and provided (Charles, Ticheli-Kallikas, Tyner & Barber-Stephens, 2005).

Finally, it is generally preferable to include clients who are verbally expressive. Those who are not and have little to share may make the learning experience difficult for both the teacher – therapist and students.

3.2. Confidentiality

As noted, students and teachers are required to keep strict confidentiality regarding clients and their issues. Further, clients, at the beginning of the demonstration, screen the class to verify that they do not know the students from their daily lives. Students whom they know on a personal level are excused from the class. Sessions are never video-taped in order to prevent any outside person from access to the sessions. Despite these measures, confidentiality may sometimes still be threatened. For instance, the town in which the university is located is small and clients may be seen entering.

Students tend to talk and share their experiences among themselves and thus may, unintentionally, reveal confidential information to those in their vicinity. Finally, confidential information may be leaked through students' e-mails. These potential problems around protecting confidentiality should be openly discussed by the teacher from the onset of the course, and participants should be reminded of them repeatedly and regularly.

3.3. Legal issues

Live demonstration involves some legal issues such as insuring clients on their way to the class, during the live demonstration presentation and on the way home, and providing insurance and legal support to teachers in case of complaints and law suits. It should be emphasised that these difficult legal issues may be extremely rare. Nonetheless even one incident can cause significant pain and harm. Thus, it is important to get the university's legal officers to provide their agreement for the project and offer legal and insurance services as needed.

4. Live Supervision or Live Demonstration?

Many teachers prefer to supervise students treating the clients rather than demonstrate how they themselves work clinically (Berger & Dammann, 1982; Montalvo, 1973; Saltzburg, Greene & Drew, 2010; Storm, Todd, Sprenkle & Morgan, 2001). In this more familiar model, students themselves counsel clients while being tutored by the teacher via headphones or telephone. In live demonstration, the teacher takes primary responsibility for conducting the session and the students watch via one-way mirror.

There are benefits to live supervision: students learn by doing, and they are being trained in real-life situations. On the other hand, the clients do not get to be treated by experienced therapists, and the students do not get to see how their teachers who are highly trained and experienced conduct the sessions. Thus, there are advantages and disadvantages in both methods.

4.1. One case or many?

Live supervision may involve many clients who come for one or two sessions, or one client or family who comes for 10–14 sessions throughout the semester. Each system has its own benefits and challenges. If a different client arrives at each class – students may learn about various psychological conditions and how to treat them. They are able to observe and discuss complex and different cases. On the other hand, they view one therapeutic process throughout the semester – they can observe and discuss a whole process from the beginning to the end. Thus they learn how a therapeutic relationship is created, how change may occur, how to deal with regression in the process and how to end this joint journey. Here again, both methods have their challenges and benefits. A compromise may be having at least two clients in each course, in order to provide the opportunity to observe treating two different cases.

4.2. The long run

What happens to the client at the end of the academic year? Often there is still a need for further counselling. There are various options to be considered. First, the client may go back to the agency that referred him or her to the course. Often clients are referred via social agencies in the community to the course and thus may choose to go back to that agency. Second, clients with financial resources may be referred to local private therapists. Finally, the clients may wish to continue to meet with the teacher. As concerns this last option, the teacher should meet with the client with no charge, to avoid any conflict of interest. The best alternative for the client should be chosen. In any event, it is the responsibility of the teacher to make sure that clients are not left in limbo at the end of the academic year.

4.3. Ethical considerations

Informed consent and confidentiality have previously been discussed. With respect to any other ethical issues that may arise, it is the client's needs that should remain of commanding importance and not those of the students. For example, the teacher may wish to demonstrate a specific intervention for observing students, but should avoid such a demonstration if it is not in the best interest of the client. It should be emphasised in no uncertain terms that despite the attainment of informed consent initially, the therapist–teacher must be constantly ready to end the therapy should he/she sense that clients may be becoming overwhelmed.

5. Conclusions

Live instructor demonstration in courses aimed at teaching students how to conduct counselling may be an important tool for promoting learning. It facilitates maximum integration of theory and practice. Students are given rich opportunity to discuss treatment theory in depth and also view, live, how such theories and related interventions and techniques, they are applied in real therapy situations. Students appear to highly value this method of learning and often 'fight' for a place in such courses. They tend to evaluate such courses as very helpful and also exciting.

The clients enjoy receiving counselling from experts at no cost, and often like the academic setting in which they feel empowered, contributing to teaching and research. Nonetheless, special considerations need to be attended to. Clients should be pre-screened to ensure they are suitable, confidentiality should be strictly protected, informed consent should remain of commanding importance throughout and teachers must ensure that arrangements for further counselling are made, if indicated. Client needs and preferences should be at the centre of the entire endeavour, even in instances when these might be in conflict with those of students. Future research could address these issues and evaluate how this method contributes to the training of future counsellors and therapists.

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