

# Effects of an Experiential Training Group on Psychological Wellness and Professional Efficacy for Counsellors-in-Training

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## Abstract

Despite the recognized value of an experiential training group in major counselling program accrediting and governing institutions, there is a paucity of research investigating the effectiveness of such a training group for counsellors-in-training (CITs). The present study examined the effects of a wellness-themed training group conducted in Hong Kong on CITs' psychological wellness and group leader self-efficacy. The Five Factor Wellness Inventory (5F-Wel) and the Group Leader Self-Efficacy Instrument (GLSI) were administered to forty-three CITs of a Hong Kong master's degree program in counsellor education. A pretest-posttest design was employed to compare psychological wellness and group leader self-efficacy before and after a 12-hour experiential training group. Two research aims were addressed. The findings showed significant increases in group leader self-efficacy and psychological wellness among CIT participants. Further investigation showed that Coping Self, Creative Self and Life Satisfaction improved significantly following the experiential training group. The foci of promoting an awareness of personal resources and identifying personal-fit positive coping strategies in the current group intervention might contribute to the positive results. The present findings have important implications for counsellor educators who have an important role in preparing competent and resilient CITs. The mandatory participation of the CITs as group members in an authentic, feedback experiential training group is recommended in a professional counselling program.

**Keywords:** counsellor education, counsellor-in-training, experiential training group, group leader self-efficacy, wellness

## 1. Introduction

Recognition of the importance of an experiential training group in counsellor education is evidenced by the accredited standards adopted by major accrediting institutions. The professional training standards for the training of group workers of the Association for Specialists in Group Work (ASGW) states that "core training shall include a minimum of 10 clock hours (20 clock hours recommended) observation of and participation in a group experience as a group member and/or as a group leader" (Association for Specialist in Group Work [ASGW], 2000). Similarly, the accreditation requirement of the Council for Accreditation of Counselling and Related Educational Programs (CACREP) recommends "direct experiences in which students participate as group members in a small group activity, approved by the program, for a minimum of 10 clock hours over the course of one academic term" in one of the eight common core areas of "Group Counselling and Group Work" (Council for Accreditation of Counseling and Related Educational Programs [CACREP], 2015, p. 11). In addition, an experiential training group is widely considered an essential learning component for CITs to grow as counsellors and people. Multiple authors and researchers view group experience as a firsthand opportunity for CITs to better understand group concepts, group process phenomena and to develop group leadership skills (Corey & Corey, 2006; Yalom, 1995; Yalom & Leszcz, 2005; Young, Reysen, Eskridge, & Ohrt, 2013). An experiential training group could also be conducted to enhance CITs' personal growth, such as to help them have higher self-awareness, be more empathic, and attain a higher level of psychological wellness (Kiweewa, Gilbride, Luke, & Seward, 2013; Wolf, Thompson, Thompson, & Smith-Adcock, 2014). Therefore, the possible benefits of increasing professional abilities and personal qualities has led to much interest in implementing experiential training groups in counsellor education. A survey conducted by Merta, Wolfgang, and McNeil (1993) found that a large majority of counsellor educators used the experiential group in the CITs' group counselling training. It was reported that approximately

76% of the investigated 272 master's degree programs in counselling (Merta et al., 1993) and approximately 83% of the investigated 82 master's-level counselling programs across the United States (Shumaker, Ortiz, & Brenninkmeyer, 2011) implemented an experiential group.

Although it is widely agreed that an experiential group is an important element of CIT education, the literature on the evidence-based training group models remains insufficient. In a recent review paper, Zhu (2018) identified 15 empirical studies on an experiential training group for CITs in the last three decades. Among those studies, two are quantitative studies (Ohrt, Robinson, & Hagedorn, 2013; Young et al., 2013), two are studies using mixed methods (St.Pierre, 2014; Steen, Vasserman-Stokes, & Vannatta, 2014), one is a descriptive study (Anderson & Price, 2001), and ten are qualitative studies (e.g., Bohecker, Vereen, Wells, & Wathen, 2016; Ieva, Ohrt, Swank, & Young, 2009; Smith & Davis-Gage, 2008). In addition, while the findings of ten studies were directly relevant to counsellor professional and personal development, the other five studies presented the overall perceptions and/or reactions of the CITs (Zhu, 2018). Zhu (2018) concluded that more empirical studies, particularly quantitative ones, which investigate the effectiveness of an experiential training group on the professional and personal growth of CITs, are needed.

In addition, there is limited understanding of how an experiential training group is formatted and conducted in achieving specific educational goals, including the enhancement of the personal growth and professional competence of CITs. Current professional training and accreditation standards and/or recommendations are inadequate to address pedagogical questions (McCarthy, Falco, & Villalba, 2014; Zhu, 2018). Zhu (2018) commented that the absence of pedagogical guidance provides counsellor educators with much freedom to conduct experiential training groups. It is understandable that different counsellor educators design experiential training groups in different formats with different intended learning outcomes. Currently, without adequate empirical evidence, which core components of such groups are effective for counsellor training remains unclear. The present study set out to design and implement a wellness-oriented experiential training group embedded in a master's-level group work course and investigate the efficacy of this group in promoting CITs' psychological wellness and group leader self-efficacy.

### *1.1 The Need for Promoting Wellness in Counsellor Education*

Counselling work is stressful. This is very likely due to the psychologically intense work with clients as well as the stressful working environments (Maslach, 2003; Skovholt, 2001). The American Counseling Association's [ACA] (2014) Code of Ethics states that it is counsellors' professional responsibility to engage in self-care activities to maintain and promote their own emotional, physical, mental, and spiritual well-being. Section C.2.g. of the Code of Ethics also clearly states that counsellors should monitor themselves for signs of impairment and refrain from offering or providing professional services when impaired (ACA, 2014). The CITs are potentially challenged by high stress when they prepare and conduct a counselling practicum. Skovholt (2001) believed that the high stress is partly due to the difficulty in mastering the uncertainty of the counselling process and the nature of working with clients undergoing painful and stressful experiences. As such, many counselling educators (e.g., Corey, 2007; Wolf, Thompson, & Smith-Adcock, 2012; Yalom, 1995) and counselling professional organizations (e.g., ACA, 2014; ASGW, 2000; CACREP, 2015) emphasized the importance of enhancing personal growth and psychological wellness of CITs during their training period. In the 2016 standards of the CACREP, "self-care strategies appropriate to the counsellor role" are suggested to be included in the curriculum of the counselling program (CACREP, 2015, p. 10). Similarly, the 2014 American Counseling Association's Code of Ethics advocates that "students and supervisees monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when such impairment is likely to harm a client or others" (Section F.5.b.). Clearly, both counsellors and CITs have an ethical responsibility to monitor their own psychological wellness. The need for promoting wellness in counsellor education to prepare resilient practitioners has a strong basis in professional responsibility. As asserted by Yalom (1995), groups can be powerful in promoting the personal development of CITs. The integration of wellness promotion into an experiential training group for CITs seems not only to provide the CITs with knowledge and experience of group process and skills but also respond to the profession's ethical concerns.

### *1.2 Essential Ethical Considerations in Conducting a Wellness-Oriented Experiential Training Group for CITs*

A wellness-oriented experiential training group, however, would involve potential ethical dilemmas. Dual relationships, mandatory participation, self-disclosure and informed consent are key ethical concerns that can emerge in the context of experiential training groups (Merta & Sisson, 1991; Shumaker et al., 2011). In the survey studies of Merta et al. (1993) and Shumaker et al. (2011), 39% of 272 master's-level counselling programs and 32% of 82 master's-level counselling programs across the United States were found to be instructor-led experiential

groups. Dual relationships would exist if the course instructors served as group leaders and CITs served as group members in the experiential training group. In fact, dual relationships are the most prominent ethical issue among counsellor educators (e.g., Merta et al., 1993; Shumaker et al., 2011) and professional counselling associations (e.g., ASGW, 2000). There is potential for unethical practices, such as invasion of privacy and abuses of power by the instructors who led the group (Corey, Corey, & Callanan, 2011). As such, the ASGW (2000) ethical guidelines emphasize that care must be taken to assure that the American Counseling Association's ethical standard for dual relationships is observed when an experiential training group is conducted. It is recommended that the provision of a training group by an individual with no evaluative, supervisory, or administrative role with the students would be necessary to avoid dual relationships challenges (Lloyd, 1990; Yalom & Leszcz, 2005). In 1993, Merta et al. (1993) identified five different types of group training approaches in their survey study: 1. No experiential group (Model 1); 2. No feedback experiential group (Model 2a); 3. Feedback experiential group (Model 2b); 4. Instructor-observed experiential group (Model 3a); and 5. Instructor-led experiential group (Model 3b). Among these models, Model 2b seems to be ideal for the counsellor educators to fulfill their professional responsibilities by training CITs with professional competence, while also avoiding adverse dual relationships in the experiential training group. However, Shumaker et al. (2011) found that only 25% of 82 master's-level counselling programs conducted feedback experiential groups in which nonaffiliated professionals with doctoral or master's degrees served as group leaders. It is possible that the financial implications of hiring nonaffiliated professionals explained why so few feedback experiential groups were conducted.

Safeguards are necessary to protect the CITs' rights in the participation of an experiential training group. The simple and most effective safeguard seems to be allowing voluntary participation in the group. However, this may lead to an inability to maximize the knowledge and skills of the CITs in group counselling (Corey et al., 2011). It was found that there may be a trend toward making experiential group training a mandatory component of CIT training (Shumaker et al., 2011). Shumaker et al. (2011) found that only 15% of their study's sample made the training group voluntary, while 39% of Merta et al.'s (1993) sample made the group voluntary. In fact, counsellor educators could include other types of safeguards, such as informed consent provision and a no-evaluation provision, when they implement the experiential training groups so as not to sacrifice the valuable learning experiences in which CITs could work on the self as a person and as a helping professional. It was reported that written informed consent had been employed in fifty-seven percent of Shumaker et al.'s (2011) studied programs. Most of these programs provided comprehensive written informed consent that included statements of purpose and goals, potential risks and benefits of participation, issues of confidentiality, expectations regarding student participation and attendance, and the resources available to students who experience discomfort or have an adverse reaction to the group experience (Shumaker et al., 2011).

Self-disclosure is another key ethical concern in the experiential training group. On the one hand, self-disclosure is encouraged, as the experiential groups aim at striving for some explicit or implicit change (Yalom & Leszcz, 2005). On the other hand, the risk of feeling forced to share personal information during the mandatory participation of experiential groups should be reduced. Smith and Davis-Gage (2008) investigated the perceptions of graduate students in experiential group training. They reported that all participants revealed self-disclosure as an important consideration of the group experience. The CITs may not have disclosed themselves fully, as they did not want to take interpersonal risks. They knew they were with their classmates in the experiential training group. However, they also understood that limited self-disclosure would in turn limit the depth of their learning experiences (Smith & Davis-Gage, 2008). A no-evaluation provision is thought to be another effective safeguard. If the CITs were given informed consent about the no-evaluation nature of their participation in the training groups, they could be better prepared to choose their level of self-disclosure. The level of self-disclosure CITs choose to engage in should be based on clear informed consent.

### *1.3 The Current Study*

The current study aimed to respond to the professional and ethical concerns of the counselling profession. It aimed to contribute to the literature on counsellor education by establishing an evidence-based good practice of experiential training group for promoting psychological wellness and professional efficacy in CITs. Necessary safeguards, such as nonaffiliated group leaders, informed consent provision and a no-evaluation provision, to protect the CITs' rights in the participation of the group, were carefully implemented in the present study. Specifically, the research questions are:

- To what extent does participants' self-efficacy for group leadership improve by participating in the experiential training group?
- To what extent does participants' wellness improve by participating in the experiential training group?

## 2. Materials and Methods

### 2.1 Participants

Participants of this study were 43 CITs who enrolled in a master's-level counselling program in a Hong Kong University. The program was accredited by the Hong Kong Professional Counselling Association (HKPCA). The 43 participants consisted of 37 females and 6 males, ranging from 22 to 52 years of age ( $M = 31.16$ ,  $SD = 9.23$ ). Of the 43 CITs, 41 participants' mother tongue was Cantonese, one was English and one was Mandarin. In addition, 34 of them were single and 9 were married. In the current sample, most of the participants did not have personal experiences as clients in the individual counselling (62.8%) and group counselling (79.1%) as well as personal experiences as counsellors in the individual counselling (81.4%) and group counselling (83.7%).

### 2.2 Procedure

After obtaining Human Research Ethics Committee (HREC) approval from the participating university (Ref. no. 2017-2018-0317), and with permission from the course instructors, a research assistant approached two classes of 52 master's-level students enrolled in a group work course in the aforementioned program for their voluntary participation in the study. Three CITs were absent from the first lesson of the course, with 49 CITs (94.2% of the students) agreeing to participate in the study. The CITs were given comprehensive written informed consents comprising the purposes of the study, potential risks and benefits associated with participation, attendance requirements, choice of level of participation and self-disclosure, confidentiality, a no-assessment provision, the roles of course lecturer, group leaders, and the group leaders' supervisor, and the voluntary nature of the participation. They were informed that participation in the experiential training group was a mandatory part of the group work course and that participation in the present research was optional and would not affect their grades in class. Students indicated their voluntary participation in the study by returning the signed consent form and the completed pretest questionnaire. The posttest was scheduled directly after the end of the experiential training group. After the group intervention, 43 CITs returned their completed posttest questionnaires.

### 2.3 Intervention

The current experiential training group is part of the didactic group work course of HKPCA's accredited master's degree program. The wellness-oriented group took place over four, 3-hour sessions scheduled during the 4th to 7th lessons of the course. Participation of the class of 52 master's-level CITs was mandatory. The attendance requirement of the four-session training group was the same as those of the other lessons in the course. In addition, no evaluation was conducted for their participation of the group in which the role of the CITs was group members only. The 52 CITs were assigned to seven small groups with six to eight members each. Every group was assigned one classroom or meeting room in which to conduct the group. Model 2b was used in this group training (Merta et al., 1993) to maximize the benefits of the experiential training and minimize the risk of a dual-role dilemma to occur. Four nonaffiliated counsellors with master's degrees served as group leaders of the CITs in these feedback experiential groups. Three group leaders were responsible for two groups each and one group leader took up one group. The course lecturer would not participate in the group, either as leader or observer, but did receive feedback about the CITs' attendance.

The 12-hour experiential training group was developed by the author and the four group leaders. Wellness was the orientation of the training group. The Self-Mandala of Virginia Satir was adopted as the group framework. Specifically, Satir's Wheel of Resources (Satir, 1982) was introduced in the group as the basis for promoting an awareness of personal resources in the CITs. Based on a self-understanding of one's own resources, it was hoped that the CITs could identify their personal-fit positive coping strategies. Under the theme of wellness, each session had a subtheme. The four subthemes were "Know Thyself: Life Space", "Know Thyself: Personal Resources", "Be Thy Own Counsellor" and "Identify Your Positive Coping Skills". The group plan is presented in Table 1.

Table 1. Session Planning of a Wellness-Oriented Experiential Training Group

Session	Sub-Theme	Session Goal	Session Content	Strategies/Skills Used
1	Know Thyself: Life Space	<ul style="list-style-type: none"> <li>To increase the CITs' awareness of one's own life space;</li> <li>To facilitate the CITs in understanding their perceived life space.</li> </ul>	<ul style="list-style-type: none"> <li>Self-introduction of the group leader</li> <li>Ice breaker game: group members exchange their views on this adage about wisdom “心隨境轉是凡夫，境由心轉是聖賢” (“an ordinary mind bends to circumstances; a wise mind transforms circumstances”), in pairs. Next, the group leader invites them to share their views and introduces themselves to the entire group by rounds.</li> <li>Rule-setting and informed consent provision</li> <li>Group activity: group members draw their perceived life space here and now and then share them in the group.</li> <li>Ending activity: each group member sends a blessing to one of the group members</li> <li>Group members fill in feedback form</li> </ul>	<ul style="list-style-type: none"> <li>Forced-choice sentence</li> <li>Dyads and triads</li> <li>Rounds</li> </ul>
2	Know Thyself: Personal Resources	<ul style="list-style-type: none"> <li>To increase the CITs' awareness of personal resources</li> <li>To facilitate the CITs in striving for some positive changes</li> </ul>	<ul style="list-style-type: none"> <li>Warm-up exercise: group members share their here-and-now emotions</li> <li>Group activity one: the group leader briefly introduces the Self-Mandala of Virginia Satir. The Wheel of Resources is explained to the group members with examples. Then, the group members are provided with different means, such as clay, magazines, building blocks and small toys, to represent their perceived eight resources. For example, clay represents a “physical” resource and a toy car represents an “interactional” resource. Each member is provided with a table mat to sculpt their perceived Mandala. The members can present the relationship between each resource through the size, color, distance, and type of means. The group members share their Mandala with the group.</li> <li>Group activity two: the group leader facilitates the group members in resculpting one's Mandala by considering the following: 1. In what way do I want my resources to be connected with one another? 2. Which resources could be closer to one another? 3. Where do I want my sculpture to look more balanced and harmonious?</li> <li>Ending activity: group members briefly share their learning/experience from the sculpture activities.</li> <li>Group members fill in feedback form</li> </ul>	<ul style="list-style-type: none"> <li>Weather report</li> <li>Mini-lecture</li> <li>Experiential exercise</li> </ul>
3	Be Thy Own Counsellor	<ul style="list-style-type: none"> <li>To increase the CITs' awareness of personal resources</li> <li>To facilitate the CITs in utilizing personal resources to</li> </ul>	<ul style="list-style-type: none"> <li>Warm-up exercise: group members share their views on a short article, “Enjoy what you have”</li> <li>Group activity one: group members are asked to write each of their resources on large pieces of paper. The papers are evenly posted on the walls of the classroom. Members are encouraged to write their resources on their own papers.</li> <li>Group activity two: group members work in pairs. Every group member shares one emotionally disturbing experience with her/his partner. After 15 minutes, the group leader invites a pair of group members to conduct a role-playing exercise:</li> </ul>	<ul style="list-style-type: none"> <li>Common reading exercise</li> <li>Dyads and triads</li> <li>Experiential exercise/role play</li> </ul>

	<p>overcome emotionally disturbing situations.</p>	<ul style="list-style-type: none"> <li>• Ann (pseudonym) plays a client, Bowie (pseudonym) plays the counselor, while other group members are observers. In this role-playing exercise, Bowie (counselor) does not need to give feedback but must actively listen to Ann (client). Ann shares her emotionally disturbing experience with Bowie (please note that the emotionally disturbing experience shared here is actually Bowie's experience). During the role-playing, the paper listing Bowie's resources is shown to the observers.</li> <li>• After the role-playing, the group leader facilitates all members' reflections using the following process questions:</li> <li>• Bowie, regarding Ann's interpretation of your emotionally disturbing experience, do you have anything to add or change?</li> <li>• Bowie, is Ann's interpretation of your emotions accurate? If not, what exactly are your emotions?</li> <li>• All members, if Bowie were your client, is there anything you would like to speak to him about? (could guide members to utilize Bowie's resources)</li> <li>• Bowie, as a counselor in the role-playing activity, what feedback would you like to share with Ann (client in the role-playing activity)?</li> <li>• Other pairs could be invited to conduct role-playing if time permits.</li> <li>• Ending activity: group members complete and share this sentence: "I am glad I have .....".</li> <li>• Group members fill in feedback form</li> </ul>	
<p>4 Identify Your Positive Coping Skills</p>	<ul style="list-style-type: none"> <li>• To prepare the CITs psychologically with possible stressful counselling practicum situations</li> <li>• To identify the CITs' personal-fit positive coping skills</li> </ul>	<ul style="list-style-type: none"> <li>• Warm up exercise: group members choose an emoji to represent their here-and-now emotions</li> <li>• Group activity: group members take turns identifying her/his positive coping skills in seven stressful counselling practicum scenarios. Examples of the scenarios are as follows: (1) I was just informed by my site contact person that my client has decided not to continue her counselling with me. I just met her once. What went wrong? (2) It is Saturday morning and I find myself physically and mentally not in the mood to do anything. However, my schedule is filled with cases for the day. How am I going to cope with this?</li> <li>• Ending activity: group members choose an emoji to represent their here-and-now emotion.</li> <li>• Group termination: the group leader briefly summarizes the group processes: from rethinking one's life space and resources, to treasuring what we have and identifying one's positive coping skills. The group leader encourages members to utilize their resources to support themselves and their clients. Lastly, the group leader provides members with counselling services information.</li> <li>• Group members fill in feedback form</li> </ul>	<ul style="list-style-type: none"> <li>• Rounds</li> </ul>

#### 2.4 Group Leaders

Four female graduates of HKPCA's accredited counsellor education master's program were the group leaders in the current study. All of them had more than 300 hours of supervised counselling experience. They received supervision regarding their leadership experiences throughout the group work.

#### 2.5 Research Design and Instrumentation

This study employed a pretest–posttest design to investigate the effectiveness of a 4-session, 3-hour experiential training group. A questionnaire survey was administered to examine the impact of the group on professional self-efficacy as a group leader and psychological wellness as a helping professional in the CITs. The questionnaire consists of three parts: (1) a 36-item Group Leader Self-efficacy Instrument (GLSI); (2) a 91-item of Five Factor Wellness Inventory (FFWEL Adult Form); and (3) demographic data.

##### 2.5.1 Group Leader Self-Efficacy Instrument (GLSI; Page, Pietrzak, & Lewis, 2001)

The GLSI consists of 36 items expressing perceived self-efficacy of group leader skills. It is a one-factor self-report instrument. Items are formatted in a 6-point Likert-type scale, where 1 = strongly disagree and 6 = strongly agree. Examples of questions include “I am confident I can engage in appropriate self-disclosure”; “I am confident I can help members relate to other members of a different religion” and “I am confident I can help members process the meaning of experiences”. The Cronbach's alpha for this sample was .97 for the pretest and .96 for the posttest.

##### 2.5.2 Five Factor Wellness Inventory (FFWEL Adult Form; Myers & Sweeney, 2014)

The FFWEL is an evidence-based tool used to assess the characteristics of wellness (Sweeney & Witmer, 1991; Witmer & Sweeney, 1992). It was developed from a wellness model of the Indivisible Self (IS-Wel; Myers & Sweeney, 2014) and developed through exploratory and confirmatory factor analysis from an older version of the test, the Wellness Evaluation of Lifestyle (WEL; Myers, Sweeney, & Witmer, 1996). The FFWEL includes 91 items measuring the higher order wellness factor, 5 second-order factors (Coping Self, Creative Self, Essential Self, Physical Self and Social Self), 17 third-order factors (e.g., Exercise, Friendship, Thinking, Self-Care, Self-Worth) as illustrated in the IS-Wel, and 18 experimental items, including two scales: the contextual variables and the Life Satisfaction Index. The FFWEL was scored using a 4-point Likert-type scale. Demographic items are also included. The current sample yielded the following internal consistency coefficients: Total Wellness (.92), Essential Self (.77), Social Self (.82), Creative Self (.83), Physical Self (.72), and Coping Self (.76) for the pretest, and Total Wellness (.95), Essential Self (.80), Social Self (.86), Creative Self (.91), Physical Self (.83), and Coping Self (.81) for the posttest.

##### 2.5.3 Demographic Questionnaire

Participants completed a questionnaire during which they reported their gender, age, marital status, employment status, mother tongue, previous individual and group counselling experience as a client and as a counsellor.

#### 2.6 Data Analysis

Data collection took place before the start of the 12-hour wellness-themed experiential group (pretest) and directly after completion of the 12-hour group (posttest). It took approximately 20 minutes to complete each of the questionnaires. All data was input into an SPSS 25 database to conduct repeated measures analysis. Descriptive statistics were computed for all instruments and paired sample t-tests were used to determine whether there were significant differences in group leadership self-efficacy and wellness of the CITs before and after completing the experiential training group.

#### 2.7 Implementation Fidelity

After each session, the four group leaders were requested to report whether they had implemented identified components of the group plan. In addition, all group materials, such as consent form, mini-lecture PowerPoint slide, color pen and feedback form, were provided by the researcher to enhance the fidelity of the intervention.

### 3. Results

#### 3.1 Effectiveness in CITs' Self-Efficacy of Group Leadership

A paired t-Test was conducted to assess whether there were pre- and posttest differences in the self-efficacy of the CITs as group leaders. The results indicated that there was a significant difference in the pretest score ( $M=154.7$ ,  $SD=21.64$ ) and posttest score ( $M=164.5$ ,  $SD=17.78$ ) of group leaders' self-efficacy;  $t(42)=-2.51$ ,  $p<.05$ . As shown in Table 2, pre-post group comparisons for the GLSI were significant and positive, meaning that the self-efficacy of the CITs as group leaders increased from pre- to posttesting.

Table 2. Descriptive Statistics and Paired *t*-Tests Results for the GLSE and the FFWI at Pre- and Post-testing

Variables	Pre-test ( <i>N</i> =43)		Post-test ( <i>N</i> =43)		<i>t</i>	<i>p</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
<b>Group Leader Self-Efficacy</b>	154.7	21.64	164.5	17.78	-2.51	<b>.016*</b>
<b>Total Wellness</b>	73.8	5.53	76.8	7.18	-2.36	<b>.023*</b>
<b>Creative Self</b>	73.7	6.65	77.6	9.09	-2.52	<b>.016*</b>
Control	72.1	8.31	77.5	10.69	-2.57	<b>.014*</b>
Emotions	77.9	9.58	77.9	12.38	.00	1.000
Positive Humor	70.6	14.34	73.1	15.16	-.80	.429
Thinking	77.1	7.26	77.7	9.66	-.33	.745
Work	70.4	7.75	81.1	10.09	-6.11	<b>.000**</b>
<b>Coping Self</b>	69.3	6.23	73.0	8.62	-2.63	<b>.012*</b>
Leisure	77.3	8.54	78.8	11.53	-.65	.518
Realistic Beliefs	54.0	10.83	54.5	10.79	-.26	.796
Self-worth	80.4	11.94	82.0	12.44	-.63	.530
Stress Management	65.1	7.37	78.5	12.37	-7.65	<b>.000**</b>
<b>Social Self</b>	84.2	10.57	84.0	11.54	0.06	.954
Friendship	83.6	9.65	83.4	11.07	0.06	.950
Love	84.7	12.74	84.6	14.52	0.05	.963
<b>Essential Self</b>	75.7	7.84	79.1	8.79	-1.96	.057
Cultural Identity	76.7	10.53	80.8	10.84	-1.87	.068
Gender Identity	78.9	10.65	82.0	11.67	-1.29	.204
Spirituality	68.7	17.80	68.6	21.36	0.03	.978
Self-care	80.5	7.86	88.1	7.06	-4.92	<b>.000**</b>
<b>Physical Self</b>	70.1	9.93	72.3	11.63	-.95	.350
Exercise	66.5	12.22	70.0	13.93	-1.26	.215
Nutrition	73.6	11.09	74.5	12.38	-.33	.741
<b>Life Satisfaction</b>	73.8	15.39	84.3	14.46	-3.46	<b>.001**</b>
<b>Contextual Variables</b>	74.8	6.67	76.8	8.24	-1.40	.168
Local Context	79.5	10.90	81.4	13.29	-.86	.397
Institutional Context	68.5	11.24	69.9	12.89	-.61	.543
Global Context	74.8	13.42	77.9	10.89	-1.22	.229
Chronometrical Context	75.2	11.20	76.9	11.29	-.80	.427

Note: \*  $p < .05$ , \*\*  $p < .01$ .

### 3.2 Effectiveness in CITs' Psychological Wellness

Further paired *t*-tests were conducted to assess whether there were pre- and posttest differences in psychological wellness. As shown in Table 2, there was a significant main difference in the pretest score ( $M=73.8$ ,  $SD=5.53$ ) and posttest score ( $M=76.8$ ,  $SD=7.18$ ) of Total Wellness;  $t(42) = -2.36$ ,  $p < .05$ . This indicated that the psychological wellness of the CITs increased from pre- to posttesting. In addition, two out of five pre-post group comparisons for



the second-order wellness factors and one scale were significant. It was found that changes in the Coping Self were significant at  $t(42) = -2.63, p < .05$ , and in the Creative Self were significant at  $t(42) = -2.52, p < .05$ . In addition, changes in the Life Satisfaction Index were significant at  $t(42) = -3.46, p < .01$ . However, no changes were observed for three second-order wellness factors (Essential Self, Physical Self, and Social Self) and one scale (contextual variables). Paired t-tests were also conducted to assess whether there were pre- and posttest differences in the 17 third-order wellness factors. The results indicated that four of them were significant at  $t(42) = -2.57, p < .05$  (Control),  $t(42) = -6.11, p < .01$  (Work),  $t(42) = -7.65, p < .01$  (Stress Management) and  $t(42) = -4.92, p < .01$  (Self-Care). The pre-post comparison results of the FFWEL are shown in Table 2.

#### 4. Discussion

This study aimed to determine if a 12-hour wellness-themed experiential training group could enhance professional efficacy and psychological wellness in CITs. Two research aims were addressed. Overall, this study found that both group leader self-efficacy and psychological wellness among CIT participants increased significantly.

##### 4.1 *The Enhancement of Professional Efficacy*

With regard to the first research aim, comparison of the pretest and posttest scores of CITs showed that their self-efficacy for group leadership improved upon their participation in the experiential training group. This finding is consistent with the findings of previous studies (e.g., Ohrt et al., 2013). As identified by Ohrt, Ener, Porter, and Young (2014), "observation of group leadership" was reported to have positive training influences on the CITs. Group experience is commonly viewed as a firsthand learning opportunity to develop group leadership skills (Corey & Corey, 2006; Yalom, 1995; Yalom & Leszcz, 2005; Young et al., 2013). It is very likely that the observation opportunity of having CITs learn how group leaders perform in action contributed to the enhanced self-efficacy of group leadership in the current study.

The curriculum of the didactic group work course might further explain the significant enhancement in group leadership self-efficacy. As previously noted, the four, 3-hour wellness-oriented group was scheduled during the 4th to 7th lessons of the course. Before participating in the group, the CITs learned about the purpose of group, therapeutic factors, group proposal, session plan, group activity, skills and evaluation of group work through didactic instruction in the first three lessons. The present study intentionally provided a learning opportunity for the CITs to integrate what was learned in the three lectures and what was observed in the four group sessions. Specifically, the group was intentionally provided with complete group process experiences and varied group strategies and skills utility. The current "4 sessions x 3 hours" design allowed the CITs to observe what was to be done and how during the first session (e.g., rules-setting and informed consent provision) and in the last session (e.g., group termination). By attending the four sessions, the CITs could become familiar with the entire session process, starting with the warm up exercise, followed by a main activity or two activities, and ending with a closure activity and feedback-form completion.

The current design also allowed the CITs enough time to be exposed to various group activities, strategies and skills. For example, in terms of ice-breaker games and warm up exercises, four exercises were introduced in the training group: a forced-choice sentence, weather report, common reading exercise and emoji report. The design of the themed activities in each session is another example. Various activities, including drawing, listening to a mini-lecture, sculpturing, and role-playing, were provided as themed activities in this experiential training group. Given this tailor-made group design and planning, the current experiential training group is effective in enhancing the self-efficacy of CITs' group leadership.

##### 4.2 *The Enhancement of Psychological Wellness*

Regarding the second research aim, a significant change was found in the CITs' Total Wellness after their participation in the experiential training group. This finding is the same as the result of Wolf et al.'s (2014) study but is different from that of Young et al.'s (2013) study. It is not possible to arrive at any conclusion by comparing similar studies because of the major lack of empirical evidence about the effectiveness of these experiential training groups in enhancing wellness in CITs. Nevertheless, there are at least three factors contributing to the positive results in the present study. First, there is the time space provision. As noted previously, four consecutive entire sessions were scheduled to conduct the current experiential group. The CITs were to make no preparatory work or do any follow up work for the group. During each three-hour session, they were given the choice to participate actively or passively. Second is the physical space provision. An independent venue for each group provided the CITs with a spacious and confidential environment. Lastly, there is a psychological space provision. The necessary safeguards, including the non-affiliated group leaders, informed consent provision and

no-evaluation provision, protected the CITs' rights in participating in the group. It is likely that the provisions of time space, physical space and psychological space taken together constructed a safe, low-judgmental and low-pressure environment for each CIT to focus on self-wellness.

Further investigation showed that only a few wellness factors, specifically Coping Self, Creative Self and Life Satisfaction, improved significantly following the experiential training group. The findings here could reflect the dominance of promoting an awareness of personal resources and identifying personal-fit positive coping strategies in the current group intervention. This assumption could explain the lack of change in Creative Self, Social Self, Physical Self and Contextual Variables. As noted previously, the present group set out to enhance the wellness of the CITs. The group was planned to focus on the enhancement of the CITs' awareness of their life space and personal resources in a positive direction in the first two sessions, within a 12-hour timeframe. In the last two sessions, the focus was on facilitating the CITs to utilize personal resources to cope with stressful issues in the future, especially in the upcoming counselling practicum. The results of the present study suggest that the experiential training group is effective in enhancing the wellness of the CITs as a whole and, specifically, in enhancing Thinking, Realistic Beliefs, Self-worth and Stress Management.

#### *4.3 Implications for Counsellor Educators*

The present findings have at least two implications for counsellor educators. First, the Model 2b feedback experiential training group is recommended to counsellor educators. This recommendation is echoed by Lloyd (1990)'s and Yalom and Leszcz (2005)'s argument that CIT group leaders should be individuals who have no assessment role regarding the CITs. The course instructor's involvement is limited to having feedback on CIT's attendance, to minimize the risk of a dual-role dilemma. As reviewed by Zhu (2018), the Model 2b feedback seemed to be adopted by a few more programs. The fact is that the instructor-led experiential group (Model 3b) has still been the most frequently conducted group type in counsellor training programs in the last 20 years (Merta et al., 1993; Shumaker et al., 2011). It is true that there are numerous logistical and financial obstacles to conducting a Model 2b feedback group (McCarthy et al., 2014). However, the advantages far outweigh the disadvantages. In the current study, four master's graduates were involved in the group project as group leaders of the CITs. The provision to train them should also be valued, as they will be counsellor educators in the future.

Second, the mandatory, authentic nature of the current developed experiential training group is recommended for counsellor educators who, as gatekeepers, have an important role in preparing competent and resilient CITs. As such, the mandatory participation of the CITs as group members in an authentic group should be arranged in a professional counselling program. In the current study, nonaffiliated group leaders, informed consent provision and a no-evaluation provision were provided for the participating CITs as necessary safeguards against potential ethical issues. Undoubtedly, no matter what safeguards have been introduced, not all ethical dilemmas could be perfectly resolved. In the same vein, the nervous reactions of the CITs could not be totally eliminated. In the study of St.Pierre (2014), some participants recognized the value of being nervous and excited, and opposed to using role-playing or "pseudo-personality". In addition, those ethical issues and authentic emotional reactions could be fully utilized as learning materials for the CITs during the debriefing session conducted by the counsellor educators.

#### *4.4 Limitations of the Study*

Some limitations of the current study should be mentioned. One point of concern is the small sample size. The findings were based on 43 CITs, which possibly undermined the significance of the study's effectiveness. As such, a larger sampling is needed to replicate these results in future studies. In this paper, the details of the group are presented, and therefore replication of the present study is feasible. Second, even though the current study is quantitative to directly measure the intended learning outcomes, the FFWEL could be supplemented by further measures. While the FFWEL is an inventory to measure various aspects of wellness (social self, essential self, physical self, creative self and coping self), specific inventories for measuring specific learning outcomes, such as coping strategies and skills, could be added in future studies. Examples include the State-Trait Anxiety Inventory for Adults<sup>TM</sup> (STAI-AD) and Coping Inventory for Stressful Situations (CISS). Lastly, the current study only investigated the effectiveness of the experiential training group in which CITs were group members. Currently, there is no consensus on the most beneficial training experience regarding participation as (1) a group member only, (2) a group leader only, and (3) both a group member and leader. As reflected in the standards of the CACREP and AGSW, the participation of the CITs as group leaders and both roles in experiential training groups seems to be valuable. Future studies should add some sessions where CITs could participate as group leaders.

## 5. Conclusion

The current study took the first steps toward making a wellness-oriented experiential training group an evidence-based good practice and making a group manual and specific safeguards available to counsellor educators. The focus of the current study and subsequent findings highlights the importance of integrating wellness content into counsellor training programs. The current findings suggest that the four, three-hour experiential training groups could be a promising education intervention to enhance CITs' professional self-efficacy and psychological wellness. The positive findings of this study are particularly encouraging because CIT wellness is critically important to the counselling profession. The publication of the group plan could assist in standardizing the technique for replication in research and in practice.

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## Competing Interests Statement

The authors declare that there are no competing or potential conflicts of interest.

## References

- American Counseling Association. (2014). *ACA code of ethics*. Alexandria, VA: ACA.
- Anderson, R. D., & Price, G. E. (2001). Experiential groups in counselor education: Student attitudes and instructor participation. *Counselor Education and Supervision, 41*(2), 111-119. <https://doi.org/10.1002/j.1556-6978.2001.tb01275.x>
- Association for Specialist in Group Work. (2000). *Professional standards for the training of group workers*. Alexandria, VA: ASGW.
- Bohecker, L., Vereen, L. G., Wells, P. C., & Wathen, C. C. (2016). A mindfulness experiential small group to help students tolerate ambiguity. *Counselor Education and Supervision, 55*(1), 16-30. <https://doi.org/10.1002/ceas.12030>
- Corey, G. (2007). *Theory and practice of group counseling*. Pacific Grove, CA: Brooks/Cole.
- Corey, G., Corey, M. S., & Callanan, P. (2011). *Issues and ethics in the helping professions*. Pacific Grove, CA: Brooks/Cole.
- Corey, M. S., & Corey, G. (2006). *Groups: Process and practice*. Pacific Grove, CA: Brooks/Cole.
- Council for Accreditation of Counseling and Related Educational Programs. (2015). 2016 CACREP standards. Retrieved from <http://www.cacrep.org/fbr-programs/201G-cacrepstandards.html>
- Ieva, K. P., Ohrt, J. H., Swank, J. M., & Young, T. (2009). The impact of experiential groups on master students' counselor and personal development: A qualitative investigation. *The Journal for Specialists in Group Work, 34*, 351-368. <https://doi.org/10.1080/01933920903219078>
- Kiweewa, J., Gilbride, D., Luke, M., & Seward, D. (2013). Endorsement of growth factors in experiential training groups. *The Journal for Specialists in Group Work, 38*(1), 68-93. <https://doi.org/10.1080/01933922.2012.745914>
- Lloyd, A. P. (1990). Dual relationships in group activities: A counselor education accreditation dilemma. *The Journal for Specialists in Group Work, 15*(2), 83-87. <https://doi.org/10.1080/01933929008411916>
- Maslach, C. (2003). *Burnout: The cost of caring*. Cambridge, MA: Malor Books.
- McCarthy, C. J., Falco, L. D., & Villalba, J. (2014). Ethical and professional issues in experiential growth groups: Moving forward. *The Journal for Specialists in Group Work, 39*(3), 186-193. <https://doi.org/10.1080/01933922.2014.924722>
- Merta, R. J., & Sisson, J. A. (1991). The experiential group: An ethical and professional dilemma. *The Journal for Specialists in Group Work, 16*(4), 236-245. <https://doi.org/10.1080/01933929108416158>
- Merta, R. J., Wolfgang, L., & McNeil, K. (1993). Five models for using the experiential group in the preparation of group counselors. *The Journal for Specialists in Group Work, 18*(4), 200-207. <https://doi.org/10.1080/01933929308413755>

- Myers, J. E., & Sweeney, T. J. (2014). Five factor wellness inventory: Adult, teenage, and elementary school versions. Retrieved from <https://www.mindgarden.com/99-five-factor-wellness-inventory#horizontalTab5>
- Myers, J. E., Sweeney, T. J., & Witmer, J. M. (1996). *The wellness evaluation of lifestyle*. Palo Alto, CA: MindGarden.
- Ohrt, J. H., Ener, E., Porter, J., & Young, T. L. (2014). Group leader reflections on their training and experience: Implications for group counselor educators and supervisors. *The Journal for Specialists in Group Work, 39*(2), 95-124. <https://doi.org/10.1080/01933922.2014.883004>
- Ohrt, J. H., Robinson, E. H. M., & Hagedorn, W. B. (2013). Group leader development: Effects of personal growth and psychoeducational groups. *The Journal for Specialists in Group Work, 38*(1), 30-51. <https://doi.org/10.1080/01933922.2012.732982>
- Page, B. J., Pietrzak, D. R., & Lewis, T. F. (2001). Development of the group leader self-efficacy instrument. *The Journal for Specialists in Group Work, 26*(2), 168-184. <https://doi.org/10.1080/01933920108415736>
- Satir, V. (1986). A partial portrait of a family therapist in process. In C. Fishman & B. Rosman (Eds.), *Evolving models for family change* (pp. 278-293). New York: Guilford Press.
- Shumaker, D., Ortiz, C., & Brenninkmeyer, L. (2011). Revisiting experiential group training in counselor education: A survey of master's-level programs. *The Journal for Specialists in Group Work, 36*(2), 111-128. <https://doi.org/10.1080/01933922.2011.562742>
- Skovholt, T. M. (2001). *The resilient practitioner: Burnout prevention and self-care strategies for counselors, therapists, teachers, and health professionals*. Needham Heights, MA: Allyn & Bacon.
- Smith, C. K., & Davis-Gage, D. (2008). Experiential group training: Perceptions of graduate students in counselor education programs. *Groupwork, 18*(3), 88-106. <https://doi.org/10.1921/81142>
- St.Pierre, B. K. (2014). Student attitudes and instructor participation in experiential groups. *The Journal for Specialists in Group Work, 39*(3), 194-211. <https://doi.org/10.1080/01933922.2014.919048>
- Steen, S., Vasserman-Stokes, E., & Vannatta, R. (2014). Group cohesion in experiential growth groups. *The Journal for Specialists in Group Work, 39*(3), 236-256. <https://doi.org/10.1080/01933922.2014.924343>
- Sweeney, T. J., & Witmer, J. M. (1991). Beyond social interest: Striving toward optimum health and wellness. *Individual Psychology: Journal of Adlerian Theory, Research & Practice, 47*, 527-540.
- Witmer, J. M., & Sweeney, T. J. (1992). A holistic model for wellness and prevention over the life span. *Journal of Counseling & Development, 71*(2), 140-148. <https://doi.org/10.1002/j.1556-6676.1992.tb02189.x>
- Wolf, C. P., Thompson, I. A., & Smith-Adcock, S. (2012). Wellness in counselor preparation: Promoting individual well-being. *Journal of Individual Psychology, 68*(2), 164-181.
- Wolf, C. P., Thompson, I. A., Thompson, E. S., & Smith-Adcock, S. (2014). Refresh your mind, rejuvenate your body, renew your spirit: A pilot wellness program for counselor education. *The Journal of Individual Psychology, 70*(1), 57-75. <https://doi.org/10.1353/jip.2014.0001>
- Yalom, I. (1995). *The theory and practice of group psychotherapy*. New York, NY: Basic Books.
- Yalom, I. D., & Leszcz, M. (2005). *The theory and practice of group psychotherapy*. New York, NY: Basic Books.
- Young, T. L., Reysen, R., Eskridge, T., & Ohrt, J. H. (2013). Personal growth groups: Measuring outcome and evaluating impact. *The Journal for Specialists in Group Work, 38*(1), 52-67. <https://doi.org/10.1080/01933922.2012.745915>
- Zhu, P. (2018). Experiential growth group in counselor education: A review of its pedagogy, research, and ethical dilemmas. *The Journal for Specialists in Group Work, 43*(2), 144-165. <https://doi.org/10.1080/01933922.2018.1451581>

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