

Development and Validation of the Counselor Activity Self-Efficacy Scales

Robert W. Lent, Clara E. Hill, and Mary Ann Hoffman
University of Maryland

The Counselor Activity Self-Efficacy Scales were developed to assess self-efficacy for performing helping skills, managing the counseling process, and handling challenging counseling situations. Factor analyses of data from 345 students in undergraduate and graduate counseling courses yielded 6 factors. Factor-derived scale scores produced adequate internal consistency and short-term test–retest reliability estimates. The scale scores were strongly related to scores on an existing measure of counseling self-efficacy, weakly related to social desirability, sensitive to change over the course of a 1-semester practicum, and able to differentiate among students with differing levels of counseling experience. The scale scores were also related to interests, occupational goals, outcome expectations, and affective experience related to the counselor role. Implications for future research and training applications are considered.

Counseling psychology and related helping professions have long been engaged in efforts to understand and promote the process of counselor development (Russell, Crimmings, & Lent, 1984). One particularly promising approach has involved the extension of Bandura's (1986, 1997) general social–cognitive theory to the study of counselor development. Research has been particularly aimed at the social–cognitive construct of self-efficacy or, more specifically, counselor self-efficacy, referring to counselors' beliefs about their ability to perform counseling-related behaviors or to negotiate particular clinical situations (Larson & Daniels, 1998). Such beliefs may be important at two levels. First, counselor self-efficacy is assumed to affect aspects of trainees' clinical functioning, such as the nature of their cognitive, affective, and behavioral responses while engaged in counseling (Larson, 1998). Second, apart from counseling performance per se, counselor self-efficacy may help to explain certain aspects of trainees' career development, such as their degree of interest in, and goals regarding, counseling as a central activity in their occupational lives (Heppner, O'Brien, Hinkelman, & Flores, 1996).

Study of counselor self-efficacy has blossomed into a thriving research domain, with investigators focusing on counselor trainees' perceived capabilities regarding both general (e.g., Larson et al., 1992) and specific (e.g., career counseling; O'Brien, Heppner, Flores, & Bikos, 1997) forms of counseling. In a major review of this literature, Larson and Daniels (1998) have concluded that existing measures of counselor self-efficacy correlate positively with indexes of counselor performance and developmental level, with more experienced counselors reporting higher counseling-related self-efficacy than do those with less experience. Larson and

Daniels have also noted that counselor self-efficacy has been shown to correlate positively with satisfaction, and negatively with anxiety, relative to the counseling role. In addition, they have indicated that beginning practicum experiences, particularly role-plays, modeling, and positive feedback, appear to promote self-efficacy, although less study has been devoted to experiences that impact counseling self-efficacy at later stages of training.

Despite such promising findings, it may be argued that there is a need for additional refinements in the measurement of counselor self-efficacy. Lent, Hackett, and Brown (1998) have cited several problems in defining and measuring counselor self-efficacy and related constructs. They have observed, for instance, that existing counselor self-efficacy scales often (a) presuppose a level of knowledge of counseling tasks that would exceed that of most neophyte trainees; (b) contain content and formats suggesting that they may be tapping constructs (e.g., values) other than self-efficacy; and (c) may not adequately sample self-efficacy relative to more advanced or complex counseling skills or role requirements (e.g., the ability to counsel a seriously depressed client). A related consideration is that existing counselor self-efficacy measures are generally not explicitly grounded in theories of counselor development or helping skills. As a result, it may be difficult to link these measures to theory-based training approaches (e.g., Hill & O'Brien, 1999). Other measurement-related refinement or expansion issues include the need to relate self-efficacy to measures of counselor affect other than anxiety and to develop measures of additional constructs from social–cognitive theory, such as counseling outcome expectations (Larson & Daniels, 1998).

The present study was designed to respond to several of the above measurement-related concerns and, in so doing, provide an expanded base for research on counselor self-efficacy in the contexts of both trainees' counseling experiences (e.g., how do such beliefs relate to counseling performances?) and career development (e.g., how do these beliefs relate to trainees' career interests and plans?). In particular, the first objective of this study was to develop a measure of self-efficacy relative to several broad domains of counselor activity, including perceived ability to (a) perform relatively structured helping skill components (e.g., reflection of feeling), as defined by Hill and O'Brien's (1999)

Robert W. Lent and Mary Ann Hoffman, Department of Counseling and Personnel Services, University of Maryland; Clara E. Hill, Department of Psychology, University of Maryland.

We thank Brad Brenner, Sapna Batra Chopra, Shirley Hess, Sarah Knox, Nick Ladany, and Jim Mahalik for their assistance with various parts of this study.

Correspondence concerning this article should be addressed to Robert W. Lent, Department of Counseling and Personnel Services, University of Maryland, College Park, Maryland 20742. E-mail: boblent@wam.umd.edu

helping skills model; (b) handle more integrative, although fairly routine, session management tasks (e.g., build a conceptual model of the client); and (c) cope with relatively advanced or challenging clinical situations (e.g., work effectively with a client who is clinically depressed). This conceptual division of counseling tasks and situations is consistent with a developmental perspective (cf. Goodyear & Guzzardo, 2000) on counselor functioning in which one might assume that beginning counselors are preoccupied with mastering basic helping skills and that over time counselors come to base their sense of role-related efficacy on aspects of counseling that require increasing levels of challenge and creativity, such as managing crisis situations or dealing with difficult client types or problems.

The second objective of this study was to examine the measure's factor structure along with its reliability and validity estimates. As part of the instrument construction and validation process, we explored evidence of the measure's (a) convergent validity relative to a more established measure of counseling self-efficacy and (b) discriminant validity in relation to social desirability. In addition, we examined evidence of the measure's criterion-related validity by assessing its relations with interest in therapy activities, outcome expectations regarding the counseling role, career goals, and affect experienced in counseling sessions. As a by-product of this criterion-related validity assessment, we were also able to test social-cognitive career theory hypotheses (Lent, Brown, & Hackett, 1994) that self-efficacy and outcome expectations predict interests and that interests mediate the relations of self-efficacy and outcome expectations to career choice goals. Finally, we examined the counseling self-efficacy instrument's potential sensitivity to growth as a function of training by assessing changes in self-efficacy over a semester of beginning-level practicum and by comparing the self-efficacy ratings of students with varying levels of counseling experience.

Method

Development of the Counselor Activity Self-Efficacy Scales

The design of the Counselor Activity Self-Efficacy Scales (CASES) was based on our conceptual synthesis of the Hill and O'Brien (1999) helping skills model and related research (Hill et al., 1999), reviews and critiques of the literature on counseling self-efficacy (e.g., Larson, 1998; Larson & Daniels, 1998; Lent et al., 1998), and our own clinical experiences as counselor trainers and supervisors. In particular, we conceptualized counseling self-efficacy as encompassing three broad subdomains of self-perceived capability to (a) perform basic helping skills, (b) manage session tasks, and (c) negotiate challenging counseling situations and presenting issues. Three graduate students in counseling psychology and three practicing, postdoctoral counseling psychologists were asked to review and rate the initial draft of the instrument. Several wording changes were made on the basis of their feedback, resulting in a pool of 59 items covering the three subdomains of counselor self-efficacy.

The first subdomain, Helping Skill Self-Efficacy, included the ability to perform each of 18 component helping-counseling skills. Such skills typify the prepracticum level of training. In Hill and O'Brien's (1999) training model, basic helping skills are divided into three stages, according to how and when they are typically used in counseling: (a) exploration stage skills, in which the focus is on developing a facilitative counseling relationship and eliciting necessary information from the client or helpee; (b) insight stage skills, in which the counselor helps the client to gain

understanding of his or her problems; and (c) action stage skills, which are aimed at promoting changes in client affect, thought, or behavior. We wrote Helping Skill Self-Efficacy items that were closely tied to Hill and O'Brien's (1999) behavioral descriptions of each primary skill. Nine items reflected ability to perform exploration stage skills, such as reflecting feelings or asking open questions. Five items were intended to tap insight stage skills (e.g., using immediacy statements, challenging client contradictions). Four items represented action stage tasks, such as providing direct guidance or using role-play methods. In the instructions for the Helping Skill Self-Efficacy items, we asked participants to "indicate how confident you are in your ability to use each of the following helping skills *effectively*, over the next week, in counseling most clients."

We designed the second broad subdomain, Session Management Self-Efficacy, to capture counselors' perceived ability to integrate the basic helping skills in managing a variety of specific, relatively common counseling session tasks. The primary conceptual distinction between this domain and the previous one involved the ability to generate responses to actual session scenarios, rather than only to perform individual helping skills, that is, to assemble the basic helping skills in responding to normative session requirements. This part consisted of 17 items, such as "help your client to talk about his or her concerns at a 'deep' level" and "respond with the best helping skill, depending on what your client needs at a given moment." In the instructions for this part, we asked students to "indicate how confident you are in your ability to do each of the following tasks *effectively*, over the next week, in counseling most clients."

With the third subdomain, Counseling Challenges Self-Efficacy, we presented participants with a number of counseling situations that most trainees, and many seasoned counselors, might find as highly challenging. In the instructions for this part, we asked students the following:

Indicate how confident you are in your ability to work *effectively*, over the next week, with each of the following client types, issues, or scenarios. (By "work effectively" we are referring to your ability to develop successful treatment plans, to come up with polished in-session responses, to maintain your poise during difficult interactions and, ultimately, to help the client to resolve his or her issues.)

Examples of the 24 items on this part included perceived ability to work effectively with a client who had experienced a traumatic life event, was clinically depressed, or was at an impasse in therapy. These items were designed to reflect aspects of coping efficacy (Bandura, 1997), that is, to cope with relatively difficult scenarios requiring the ability to generate complex problem-solving behaviors. We conceptualized this subdomain, therefore, as typifying higher level, or more advanced, counseling skills, whereas the first two subdomains involve more basic skills that are usually the focus of fundamental helping skill, prepracticum, or practicum courses. For all self-efficacy items, participants were asked to rate their confidence in their ability to perform specific tasks or to manage specific scenarios on a 10-point scale ranging from *no confidence* (0) to *complete confidence* (9).

Participants

Participants were 345 students (266 women, 76 men, 3 did not report their sex) enrolled either in a helping skills training class for advanced undergraduates ($n = 159$), master's level counseling practica ($n = 118$), or various levels of doctoral training, primarily in counseling psychology ($n = 68$). They were students at one of five universities: a state university ($n = 278$) and a private university ($n = 30$) in the mid-Atlantic region, a state university ($n = 11$) and a private university ($n = 10$) in the Northeast, and a private university ($n = 16$) in the Midwest. Students ranged in age from 20 to 57 years ($M = 26.32$, $SD = 7.46$). Sixty-six percent of the participants were European American, 17% were African American, 6% were Hispanic American, 9% were Asian American, and 3% reported a multiracial or other racial-ethnic status.

Because helping, communication, and counseling skills instruction occurs in many different types of programs and levels of training, we selected participants from a variety of counseling- or psychology-related graduate majors, including career counseling (2%), rehabilitation counseling (5%), school counseling (8%), college student personnel (8%), community counseling (9%), and school (3%) and counseling (19%) psychology. Forty-six percent of the participants were undergraduate psychology majors (97% of these were seniors). Participants reported having experienced an average of 1.86 semesters ($SD = 2.31$) of counseling supervision, though the majority had had either no (30%), one (32%), or two (12%) prior semesters of supervision. They also reported having had an average of 3.03 years ($SD = 4.02$; range = 0–25) of previous counseling-related experience (e.g., working as a volunteer peer counselor or telephone hotline helper). All participated voluntarily in data collection; students at one of the universities ($n = 30$) received extra course credit for their participation.

Instruments

Counseling Self-Estimate Inventory (COSE). The COSE, developed by Larson et al. (1992), was used to examine evidence of the convergent validity of the new CASES. The COSE taps counseling self-efficacy with respect to five skill domains: (a) use of microskills (12 items); (b) attending to counseling process (10 items); (c) dealing with difficult client behaviors (7 items); (d) behaving in a culturally competent manner (4 items); and (e) being aware of one's values (4 items). The original version of the COSE contained 53 items and was subsequently shortened to 37 items, including both positive and negative statements about personal capabilities as a counselor (e.g., "I am certain that my interpretation and confrontation responses will be concise and to the point"). Participants respond by indicating their level of agreement with each statement on a 6-point scale, ranging from *strongly disagree* (1) to *strongly agree* (6), on the basis of "your actual estimate of how you will perform as a counselor at the present time." Scale scores were calculated by summing item responses and dividing by the number of items on each scale. (Negatively worded items were reverse scored.) A total COSE score was also computed by summing the responses to all items and dividing by 37. Higher scores reflected greater counseling self-efficacy.

Larson et al. (1992) reported internal consistency (α) estimates for the five scales ranging from .62 (Awareness of Values) to .88 (Microskills); for the total COSE score, the alpha was .93. Test–retest correlations over a 3-week period ranged between .68 (Microskills) and .83 (Awareness of Values), and the correlation was .87 for the total COSE score. In terms of convergent and criterion-related validity, the COSE scale and total scores were found to correlate, moderately to substantially, with measures of problem-solving behavior, state and trait anxiety, satisfaction with practicum performance, outcome expectations in a mock interview, and observer-rated counseling performance. In addition, total COSE scores were found to be sensitive to change over the course of a semester of practicum, and bachelor's level trainees reported lower total COSE scores than did graduate-level trainees. In terms of discriminant validity, correlations of the COSE total and scale scores to personality type, academic aptitude, and social desirability were mostly small, though they did produce medium-to-large correlations with general self-concept. In the present study, we obtained the following alpha coefficients: COSE total = .92; Microskills = .84; Counseling Process = .87; Difficult Client Behaviors = .81; Cultural Competence = .74; Awareness of Values = .45.

Interest in therapy activities. We assessed participants' interest in therapy activities with the Therapy Activities scale of Leong and Zachar's (1991) Scientist–Practitioner Inventory (SPI) for Psychology. The SPI was designed to measure the career specialty interests of students in psychology and related fields. Each of its seven factors loads most highly on one of two second-order dimensions reflecting either scientist interests or practitioner interests. The Therapy Activities scale, one of the three practitioner scales, taps students' interest in performing a variety of activities associated with the therapist or counselor role, such as "conducting a psychotherapy

session with an individual client." Participants respond by indicating their interest in each activity on a 5-point scale, from *very low interest* (1) to *very high interest* (5).

Given that our sample consisted primarily of students in counseling-related programs, we slightly modified the instructions of this instrument by indicating that it contained "activities often performed by psychologists, counselors, and related mental health professionals," whereas the original version refers only to "activities often performed by psychologists." We also changed one item that referred to consulting with "other psychologists" to read "other professionals." Interest scale scores were formed by summing item responses and dividing by 13, the total number of Therapy Activity items. Higher scores reflected stronger interest in performing counseling or therapy activities.

Leong and Zachar (1991) reported that the Practitioner Scale, a composite of the three practice-related scales, was (a) relatively stable over a 6-month period, (b) correlated minimally with social desirability, and (c) positively related to Social occupational interests and negatively related to Investigative occupational interests. We used the Therapy Activities scale alone because its content was most relevant to the tasks performed in counseling or psychotherapy. This scale yielded an adequate internal consistency reliability estimate ($\alpha = .96$) in Leong and Zachar's (1991) study; the corresponding value in the present study was .89.

Counseling Role Outcome Expectations Scale. We measured outcome expectations with a 12-item scale designed for this study. Participants were provided with the basic stem, "Becoming a counselor or psychotherapist would allow me to . . .," followed by a list of positive outcomes that might result from this effort. Examples of the outcome statements were "have a feeling of accomplishment" and "do a job that my family and friends would approve of." Students responded by indicating the extent to which they agreed with each outcome statement on a 5-point scale, ranging from *strongly disagree* (1) to *strongly agree* (5). Item scores were summed and divided by 12, yielding total scores that could range from 1 to 5. Higher scores indicated stronger positive outcome beliefs relative to the counselor role.

This scale was designed to improve on previous measures of counseling outcome expectations that have yielded disappointing psychometric characteristics (cf. Larson & Daniels, 1998). The format for this instrument was patterned after outcome expectations measures that have been used successfully in the career development literature, producing adequate reliability estimates and theory-consistent relations with measures of self-efficacy, interest, and choice (e.g., Lopez, Lent, Brown, & Gore, 1997). In terms of content, we drew on values or reinforcers (e.g., altruism, social approval, self-approval, intellectual stimulation) that are generally associated with the counseling role. We conducted a factor analysis of the outcome expectations scale, using principal-axis procedures, and found good support for a single-factor structure. The alpha coefficient of the outcome expectations measure in the current sample was .90.

Positive and negative affect during counseling. The Positive and Negative Affect Schedule (PANAS; Watson, Clark, & Tellegen, 1988) was adapted to assess participants' experience of pleasant and unpleasant affect while engaged in counseling. The PANAS consists of 20 items, which are equally divided into positive affect (PA) and negative affect (NA) scales. Responses are made along a 5-point continuum that ranges from *very slightly or not at all* (1) to *extremely* (5). Scale scores are computed by summing the item responses for each affective dimension separately.

The PANAS is typically administered with different temporal instructional sets, for example, requesting participants to indicate how they generally feel, how they feel today, or how they have felt in the past few weeks. Watson et al. (1988) have reported that both the PA and NA scales produce adequate alpha coefficients (.84 to .90), regardless of the time instructions that are used. Test–retest correlations of both scales tend to increase as the rated time frame lengthens, from momentary to in-general feelings. The two scales tend to intercorrelate only slightly (e.g., $r = -.12$ to $-.23$, depending on the time instructions) and have been found to yield

adequate convergent validity relative to other measures of mood, distress, or anxiety (Watson et al., 1988). Watson et al. have concluded that the PANAS scales are sensitive to fluctuations in mood when used with short-term instructions (e.g., “today”), yet they are fairly stable when used with longer term instructions (e.g., “in general”).

We modified the directions of the PANAS to have students link their affect ratings to the counseling role rather than to a particular time dimension. Specifically, we asked participants to rate the extent to which they experience each feeling statement “in general, as a helper or counselor—that is, when you are involved in helping or counseling activities.” This is similar to the way in which measures of state or trait anxiety have been modified in other studies of counseling or counselor training (e.g., Williams, Judge, Hill, & Hoffman, 1997). We used a subset of items from the PANAS depicting five positive (e.g., enthusiastic) and five negative (e.g., nervous) feelings that in our experience as trainers are commonly experienced by counselors within the early stages of a counseling relationship. Alpha coefficients of .89 and .68 were obtained, respectively, for the modified NA and PA scales. We also found a small, negative correlation between the two scales ($r = -.23$), which was consistent with findings on the original PANAS (Watson et al., 1988).

Social desirability. We used Crowne and Marlowe’s (1960; 1964) Social Desirability Scale (SDS) as an index of the tendency to describe oneself in favorable terms. The SDS consists of 33 true-or-false statements (e.g., “I have never intensely disliked anyone”); item responses are summed to produce a total score, with higher scores reflecting a greater tendency toward socially desirable responding. Crowne and Marlowe (1964) reported both internal consistency and test–retest reliability at 1 month to be .88. High scorers tend to be more socially conforming, sensitive to the evaluative consequences of their behavior, and susceptible to persuasion. We found an alpha coefficient of .77 for the SDS in our sample.

Counseling career goals. Our background questionnaire contained two questions related to participants’ career goals. One question asked students to indicate “the percentage of your work time (once you graduate) that you think you will devote to the *practice* (i.e., actual performance) of counseling or psychotherapy.” Students circled the appropriate time percentage on a scale ranging in increments of 10%, from 0 to 100. A second question asked students to indicate the occupation, including specific subfield, that “you are most seriously considering at present.” Their responses were coded on a 3-point work role continuum that ranged from noncounseling (e.g., college administration; 1) to counseling related (e.g., professor of counseling psychology; 2) to primarily counseling (e.g., therapist; 3). Responses to the two items, which were substantially interrelated ($r = .72$), were transformed to z scores and averaged together, creating a composite index of the counseling relatedness of students’ career choice goals.

Procedure

After conceptualizing the CASES and developing an item pool (as described above), we recruited participants for a study of “students’ perceptions of their helping/counseling skills.” They completed the research measures, in counterbalanced order, either in group testing sessions near the end of a class ($n = 241$; 87% response rate) or via an anonymous mail survey ($n = 104$; 58% response rate). Where measures were completed in class, it was emphasized that instructors would not have access to students’ responses, that survey responses would not be linked to course grades in any way, and that nonparticipation would have no impact on students’ course standing. Those choosing not to participate were given the opportunity to perform an alternate activity. To ensure that participants had some relevant experience as a basis for responding to the self-efficacy items, measures were administered no sooner than the end of their first semester of helping skills training (undergraduates) or prepracticum supervision (graduate students).

All participants ($N = 345$) completed the CASES along with a brief background questionnaire requesting demographic, academic status, coun-

seling and supervision experience, and career goal information. These data were used to factor analyze the CASES items and to calculate internal consistency reliability estimates and scale intercorrelations. Because of the time required to complete the full battery, we had parts of the larger sample complete subsets of the remaining measures. Thus, 55 of the participants completed a social desirability scale, and 131 participants completed an established counseling self-efficacy scale and measures of outcome expectations, interests, and positive and negative affect experienced during counseling.

To examine the potential for change in CASES scores during practicum training, we had a subset of the sample ($n = 62$) take the scales both at the beginning (1st week) and end (15th week) of a semester-long master’s level practicum experience. It was the second semester of a two-semester prepracticum–practicum sequence focused on learning and practicing counseling skills via didactic and experiential (e.g., role-play) methods. As part of the sequence, students completed three counseling sessions in the first semester, and five in the second, receiving both group and individual supervision. No specific modifications were made in the course to affect students’ self-efficacy ratings, and course instructors were not apprised of the specific content or purpose of the measures during the study. Finally, we administered the CASES to a separate sample of participants ($n = 48$) to obtain test–retest reliability estimates over a 2-week interval.

Results

We first factor analyzed responses to the CASES items and then calculated reliabilities and intercorrelations among the resulting scales. We next examined the scales’ validity relative to the COSE, the SDS, and a variety of criterion variables. Finally, we assessed whether the CASES scales were sensitive to change over the course of a semester of practicum and whether they differentiated among students at different levels of helping or counseling experience.

Factor Analyses

Given the three-part conceptual scheme underlying construction of the CASES (Helping Skill Self-Efficacy, Session Management Self-Efficacy, and Counseling Challenges Self-Efficacy) as well as the possibility that research needs might call for their separate use in future investigations, each part of the counseling self-efficacy questionnaire was subjected to an exploratory factor analysis. Specifically, we used principal-axis factoring procedures and oblimin oblique rotation. Such methods have been recommended in situations where the factors are likely to be correlated (Fabrigar, Wegener, MacCallum, & Strahan, 1999; Gorsuch, 1997). We used eigenvalue, scree, percentage of variance, and interpretability criteria to determine the appropriate factor structure.

It is common practice to retain items that load most highly and beyond a certain criterion (often .40) on a given factor (see, e.g., Gorsuch, 1997). Although it is preferable for items to load highly on only one factor, cross-loadings often occur in the assessment of psychological constructs. We decided to retain items that yielded factor loadings above .50 and showed a difference of $>.10$ between the factor on which they loaded most highly and other factors. These criteria were designed to seek a reasonable balance between cross-loadings and detection of coherent factors. Once factor-derived scales were identified, we computed scale scores by summing over item responses and dividing by the number of items on a given scale. For each CASES scale, self-efficacy indexes ranged from 0 to 9, with higher scores indicating stronger confi-

dence in one's counseling capabilities. The resulting factors, item content, and factor loadings are displayed in Tables 1, 2, and 3.

Analysis of the Helping Skill Self-Efficacy items indicated support for a three-factor solution. We deleted two items that exceeded our cross-loading criterion and one that did not achieve a factor loading greater than .50 and then reran the analysis. The three-factor solution accounted for 60% of the total variance. The three factors were labeled (a) Insight Skills (six items), consisting of such capabilities as challenging client inconsistencies, offering interpretations, and using self-involving immediacy statements; (b) Exploration Skills (five items), including such basic communication competencies as attending, using restatements, and reflecting feelings; and (c) Action Skills (four items), including skills involved in providing relatively structured interventions, such as information giving, direct guidance, and homework assignments (see Table 1). These three factors conformed fairly well to Hill and O'Brien's (1999) three-stage helping skills model, although one item (providing self-disclosure for exploration) loaded more highly on the Insight Skills factor than on the Exploration Skills factor on which it would have been expected, theoretically, to load.

Examination of the content of this item suggested that its reference to revealing personal feelings may have enhanced its relation to the other items on the Insight Skills factor.

Analysis of the Session Management Self-Efficacy items suggested that a single-factor solution could adequately explain the structure of this subdomain of counseling self-efficacy. Each of the 17 items loaded highly on this factor, which reflected perceived capability to facilitate the process of counseling sessions. Because of the value in keeping each of the self-efficacy scales reasonably brief and roughly comparable in length, we decided to retain only the 10 highest loading items (all > .70) on this factor (see Table 2). Examples included "help your client to understand his or her thoughts, feelings, and actions" and "help your client to talk about his or her concerns at a deep level." The single-factor solution accounted for 66% of the total variance.

The Counseling Challenges Self-Efficacy items were found to conform to a two-factor structure. After deleting eight cross-loading items (i.e., < .10 difference between highest and next highest loadings), we reran the analysis, with the two-factor solution accounting for 67% of the total variance in the items (see

Table 1
Helping Skill Self-Efficacy Items and Factor Loadings

Item	Factor		
	1	2	3
1. Insight Skills			
Immediacy (disclose <i>immediate</i> feelings you have about the client, the therapeutic relationship, or yourself in relation to the client)	.77	.44	.63
Interpretations (make statements that go beyond what the client has overtly stated and that give the client a new way of seeing his or her behavior, thoughts, or feelings)	.74	.52	.52
Self-disclosures for insight (disclose <i>past</i> experiences in which you gained some personal insight)	.73	.33	.55
Challenges (point out discrepancies, contradictions, defenses, or irrational beliefs of which the client is unaware or that he or she is unwilling or unable to change)	.73	.44	.43
Self-disclosure for exploration (reveal personal information about your history, credentials, or feelings)	.65	.41	.45
Intentional silence (use silence to allow clients to get in touch with their thoughts or feelings)	.61	.46	.43
2. Exploration Skills			
Open questions (ask questions that help clients to clarify or explore their thoughts or feelings)	.52	.72	.45
Listening (capture and understand the messages that clients communicate)	.42	.68	.32
Reflection of feelings (repeat or rephrase the client's statements with an emphasis on his or her feelings)	.53	.64	.50
Restatements (repeat or rephrase what the client has said, in a way that is succinct, concrete, and clear)	.49	.61	.43
Attending (orient yourself physically toward the client)	.28	.59	.24
3. Action Skills			
Information giving (teach or provide the client with data, opinions, facts, resources, or answers to questions)	.53	.45	.78
Role-play and behavior rehearsal (assist the client to role-play or rehearse behaviors in session)	.57	.44	.74
Direct guidance (give the client suggestions, directives, or advice that imply actions for the client to take)	.49	.33	.74
Homework (develop and prescribe therapeutic assignments for clients to try out between sessions)	.50	.33	.73

Note. $N = 345$. Kaiser-Meyer-Olkin index = .91. The Insight Skills, Exploration Skills, and Action Skills factors accounted for 43%, 9%, and 8%, respectively, of the total variance. Factor loadings were obtained with the structure matrix of the oblique solution. Copyright 2001 by R. W. Lent, C. E. Hill, and M. A. Hoffman. Scale items reprinted from the Counselor Activity Self-Efficacy Scales with permission.

Table 2
Session Management Self-Efficacy Items and Factor Loadings

Item	Factor
Help your client to understand his or her thoughts, feelings, and actions.	.84
Know what to do or say next after your client talks.	.83
Help your client to talk about his or her concerns at a deep level.	.82
Build a clear conceptualization of your client and his or her counseling issues.	.80
Help your client to explore his or her thoughts, feelings, and actions.	.79
Respond with the best helping skill, depending on what your client needs at a given moment.	.78
Help your client to set realistic counseling goals.	.78
Keep sessions on track and focused.	.75
Remain aware of your intentions (i.e., the purposes of your interventions) during sessions.	.74
Help your client to decide what actions to take regarding his or her problems.	.73

Note. $N = 345$. Kaiser–Meyer–Olkin index = .95. A single-factor solution accounted for 66% of the variance. Copyright 2001 by R. W. Lent, C. E. Hill, and M. A. Hoffman. Scale items reprinted from the Counselor Activity Self-Efficacy Scales with permission.

Table 3). The first factor, containing 10 items, was labeled Relationship Conflict. Its items reflected interpersonal tensions or potential conflicts between the client and counselor, such as working with a client whom “you have negative reactions toward (e.g., boredom, annoyance)” or who “has core values or beliefs that conflict with your own (e.g., regarding religion, gender roles).” The second factor, composed of 6 items, was labeled Client Distress. The items on this factor reflected difficult presenting problems, such as working with a client who “is clinically depressed” or who “has experienced a recent traumatic life event.”

To further explore the latent structure of the CASES scales, we performed a second-order factor analysis of the scale scores, using principal-axis factoring and oblimin oblique rotation. The purpose of this analysis was to assess whether the scales reflected one or more larger underlying dimensions of counseling self-efficacy. We found support for a two-factor solution, which accounted for 78% of the total variance. The Helping Skill Self-Efficacy’s Exploration (.75), Insight (.80), and Action (.73) scales and the Session Management Self-Efficacy (.92) scale each loaded substantially on the first factor (66% of the total variance). Thus, this first factor appears to reflect self-efficacy regarding relatively generic counseling tasks and process skills. The Counseling Challenges Self-Efficacy’s Client Distress (.84) and Relationship Conflict (.86) scales loaded most highly on the second factor (12% of the total variance), reflecting self-efficacy for negotiating fairly difficult or complex counseling situations. The two higher order factors were substantially interrelated ($r = .76$). Given this relationship and the relations among the scales derived from the first-order factors (see Table 4), we calculated a CASES total scale score, composed of all 41 retained self-efficacy items (item responses were summed and divided by 41, yielding total scale scores that could range from 0 to 9).

Reliability Estimates and Scale Intercorrelations

Table 4 contains the intercorrelations, means, standard deviations, and internal consistency reliability values (alpha coeffi-

cients) for each CASES scale and for the total scale score. The internal reliability estimates for the individual scales ranged from .79 (Exploration Skills) to .94 (Session Management and Client Distress), providing support for their internal consistency. The CASES total scale produced an alpha coefficient of .97. Intercorrelations among the individual CASES scales were generally medium to large, ranging from .44 (Exploration Skills and Client Distress) to .72 (Client Distress and Relationship Conflict, Session Management and Exploration Skills, Session Management and Insight Skills). These results echo the factor analytic findings suggesting that the various scales represent overlapping, yet somewhat distinct, aspects of counseling self-efficacy. Not surprisingly, the CASES total scale was strongly related to each of its component scales ($r_s = .71$ to .88).

A separate sample of 48 participants (35 women, 13 men) was used to examine the 2-week test–retest reliability of the CASES scales as well as to replicate their internal consistency. The sample included 32 undergraduates enrolled in a helping skills training course and 16 doctoral students in counseling psychology, the majority of whom were in their second year of training or beyond. The internal consistency estimates in this sample were quite sim-

Table 3
Counseling Challenges Self-Efficacy Items and Factor Loadings

Item	Factor	
	1	2
1. Relationship Conflict		
... you have negative reactions toward (e.g., boredom, annoyance).	.86	–.58
... is at an impasse in therapy.	.84	–.64
... wants more from you than you are willing to give (e.g., in terms of frequency of contacts or problem-solving prescriptions).	.79	–.63
... is dealing with issues that you personally find difficult to handle.	.77	–.57
... demonstrates manipulative behaviors in session.	.76	–.65
... is not psychologically minded or introspective.	.73	–.62
... is sexually attracted to you.	.72	–.45
... you find sexually attractive.	.68	–.48
... differs from you in a major way or ways (e.g., race, ethnicity, gender, age, social class).	.66	–.47
... has core values or beliefs that conflict with your own (e.g., regarding religion, gender roles).	.64	–.53
2. Client Distress		
... has experienced a recent traumatic life event (e.g., physical or psychological injury or abuse).	.64	–.93
... has been sexually abused.	.62	–.87
... is clinically depressed.	.64	–.85
... is suicidal.	.59	–.85
... is extremely anxious.	.65	–.82
... shows signs of severely disturbed thinking.	.64	–.79

Note. $N = 345$. Kaiser–Meyer–Olkin index = .95. The Relationship Conflict and Client Distress factors accounted for 58% and 9%, respectively, of the total variance. Factor loadings were obtained with the structure matrix of the oblique solution. Copyright 2001 by R. W. Lent, C. E. Hill, and M. A. Hoffman. Scale items reprinted from the Counselor Activity Self-Efficacy Scales with permission.

Table 4
Correlations, Means, and Internal Consistency Estimates for the Counselor Activity Self-Efficacy Scales (CASES)

Scale	1	2	3	4	5	6	7	M	SD	α
1. Exploration Skills	—							7.27	0.95	.79
2. Insight Skills	.60	—						6.02	1.40	.85
3. Action Skills	.52	.62	—					6.13	1.46	.83
4. Session Management	.72	.72	.67	—				6.39	1.20	.94
5. Client Distress	.44	.54	.51	.60	—			5.01	1.97	.94
6. Relationship Conflict	.48	.59	.51	.64	.72	—		5.70	1.45	.92
7. CASES, total score	.71	.81	.74	.88	.83	.86	—	6.05	1.16	.97

Note. N = 345. All correlations are significant (p < .001). CASES = Counselor Activity Self-Efficacy Scales.

ilar to those obtained in the original sample (Exploration Skills = .81; Insight Skills = .85; Action Skills = .78; Session Management = .93; Client Distress = .91; Relationship Conflict = .94; CASES total = .96). Test-retest correlations indicated that the scale scores were reasonably stable over a 2-week interval (Exploration Skills = .71; Insight Skills = .75; Action Skills = .59; Session Management = .76; Client Distress = .75; Relationship Conflict = .66; CASES total = .75), although stability coefficients tended to be higher in the doctoral students (range = .80 [Action Skills] to .91 [Exploration Skills]) than in the undergraduates (range = .46 [Action Skills] to .72 [Session Management]).

Convergent and Discriminant Validity

Table 5 contains correlations of the CASES scales to the COSE and Social Desirability variables. Examining the CASES-COSE correlations, we observed large correlations between pairs of scales that were intended to capture similar content (e.g., for COSE Process and CASES Session Management, r = .67; for COSE Difficult Client Behaviors and CASES Client Distress, r = .61). The CASES' total scale score also correlated highly with the COSE's total score (r = .76). The COSE's Cultural Competence and Awareness of Values scales produced only small-to-moderate correlations with most of the CASES scales (these two COSE

scales were also not highly related to other COSE scales in our sample). Correlations involving the COSE Awareness of Values scale were probably attenuated by the low reliability estimate that we had obtained for this scale. Correlations of the CASES scales to Social Desirability were generally small and nonsignificant (the range was -.02 to .22), suggesting that the CASES scales were not substantially affected by self-presentation biases. Collectively, these findings provided initial evidence supporting the convergent and discriminant validity of the CASES scales.

Criterion-Related Validity

Correlations of the CASES scales to the measures of counseling-related outcome expectations, interests, choice, and affectivity are also shown in Table 5. Correlations of the CASES scales to outcome expectations were generally small, with the largest correlation involving Session Management (r = .24). Thus, self-efficacy beliefs with respect to managing the counseling session process were associated (but not strongly) with more favorable counseling outcome expectations. The CASES scales correlated moderately with interest in therapy activities (range = .35 to .47). Correlations of the CASES scales to the counseling-relatedness of participants' intended career choices were mostly small to moderate (range = .11 to .31). Finally, most of the

Table 5
Correlations of the Counselor-Activity Self-Efficacy Scales (CASES) to the Criterion Variables

CASES scale	COSE scale						Social Desir.	Out. Exp.	Interest	Choice	Neg. Affect	Pos. Affect
	Micro	Process	Diffic	Cultur	Values	Total						
1. Explor. Skills	.51**	.54**	.47**	.12	.30*	.58**	.15	.21*	.35**	.11	-.42**	.30*
2. Insight Skills	.59**	.55**	.50**	.24*	.18*	.63**	.15	.19*	.44**	.25*	-.34**	.29**
3. Action Skills	.49**	.45**	.52**	.27*	.09	.55**	.15	.15	.40**	.31**	-.20*	.26*
4. Session Mgmt.	.64**	.67**	.55**	.23*	.35**	.72**	.22	.24*	.41**	.16	-.39**	.39**
5. Client Distress	.53**	.52**	.61**	.19*	.22*	.62**	-.08	.04	.35**	.17	-.30**	.27**
6. Rel. Conflict	.56**	.53**	.60**	.25*	.31**	.65**	-.02	.14	.41**	.29*	-.28*	.33**
7. CASES total	.66**	.65**	.66**	.26*	.31**	.76**	.10	.18*	.47**	.26*	-.38**	.37**

Note. COSE = Counseling Self-Estimate Inventory: Micro = Microskills; Diffic = Difficult Client Behaviors; Cultur = Cultural Competence; Values = Awareness of Values; Total = total scale score; Social Desir. = Social Desirability Scale; Out. Exp. = Counseling Role Outcome Expectations Scale; Interest = interest in therapy activities (Therapy Activities scale); Choice = counseling relatedness of career goals; Neg. Affect = Negative Affect scale from the Positive and Negative Affect Schedule (PANAS); Pos. Affect = Positive Affect scale from the PANAS; Explor. Skills = Exploration Skills; Session Mgmt. = Session Management; Rel. Conflict = Relationship Conflict; CASES total = CASES, total scale score. n = 131 for the COSE variables; n = 55 for Social Desirability; n = 129 for Outcome Expectations, Choice, Negative Affect, and Positive Affect.

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

CASES scales were moderately related to the experience of negative affect and positive affect during counseling (ranges were $-.20$ to $-.42$, and $.26$ to $.39$, respectively).

Interest model. Social-cognitive career theory (SCCT) predicts that self-efficacy and outcome expectations should, individually and collectively, be predictive of occupational interests. Correlations, shown in Table 5, confirmed the bivariate relations of the self-efficacy scales to interests. The outcome expectations variable was also found to be strongly related to interests ($r = .56$). To explore the joint relationships of counseling self-efficacy and outcome expectations to therapy interests, we performed a hierarchical regression strategy to predict interests, entering CASES total scores and outcome expectations at successive steps of the equation. Results, presented in Table 6, are consistent with SCCT's hypothesis regarding the joint predictive utility of self-efficacy and outcome expectations. Self-efficacy explained 24% of the variance, and outcome expectations accounted for an additional 23% of the variation in interests. Together, the two predictors explained 47% of the variance. We also performed a supplementary analysis to examine how well the component CASES scales predict interests. Findings indicated that only the Insight Skills and Relationship Conflict scales produced significant beta weights (.31 and .23, respectively), explaining 24% of the variation in interests (as did CASES total scores).

Choice model. SCCT's model of career choice posits that people will aspire to enter fields that are consistent with their interests, self-efficacy, and outcome expectations. The effect of self-efficacy and outcome expectations on choice intentions is seen as being largely mediated by interests. The CASES scales were found to produce small-to-medium correlations with career aspirations, as indexed by the counseling relatedness of students' occupational goals (see Table 5). Outcome expectations ($r = .39$) and interests ($r = .51$) produced medium-to-large correlations with occupational goals.

To assess the direct versus mediated effects of self-efficacy and outcome expectations on occupational goals, we predicted goals using a hierarchical regression strategy in which the following predictors were entered into the equation in two successive blocks: (a) interests and (b) counseling outcome expectations and CASES total scores. Interests explained a substantial amount (26%) of the choice variation, whereas the block of self-efficacy and outcome expectations explained only an additional 2% of the variance (see

Table 6). Interests alone produced a significant beta weight in this analysis ($\beta = .41$). This pattern of findings suggested that interests fully mediated the effects of self-efficacy and outcome expectations on the choice variable (i.e., self-efficacy and outcome expectations were related to choice indirectly, via their relations to interests).

As in the earlier prediction of interests, we also performed a supplementary analysis to examine the predictive contributions of the component CASES scales. After entering interests at the first step of the equation, the set of CASES variables and outcome expectations were entered at the second step. In this case, self-efficacy and outcome expectations did explain additional significant variance (9%) beyond interests. Interests, Action Skills, Relationship Conflict, and Outcome Expectations each produced significant beta weights in this equation (β s, respectively, were $.35$, $.26$, $.25$, and $.21$). The set of predictors explained 36% of the variance in choice. Thus, this equation accounted for more variance than did the one involving the CASES total score. In addition, in this equation, two of the CASES scales, along with Outcome Expectations, were linked to choice both directly and indirectly, through interests.

Change in CASES Scores During Practicum

Means, standard deviations, and paired sample t tests of the CASES scores at the beginning (1st week) and end (15th week) of the second semester of a master's level practicum are presented in Table 7. Significant gains ($p < .001$) were found on each scale, indicating that participants reported greater confidence across the various dimensions of counseling self-efficacy over the course of the semester. Gains, as indexed by Cohen's d , ranged from $.70$ to $.95$ standard deviations.

CASES Scores and Counselor Experience Level

As a further way to explore sensitivity of the CASES to differences as a function of counselor development level, we compared the self-efficacy scores of students for whom we had complete data regarding prior helping or counseling experience ($n = 239$). To approximate counselor developmental level, we divided students into three groups on the basis of the number of years of helping-counseling experience they reported having: (a) less than a year ($n = 65$), (b) 1–3 years ($n = 97$), and greater than 3 years ($n = 77$). A multivariate analysis of variance revealed significant differences among these groups over the set of self-efficacy variables, $F(12, 462) = 4.34$, Wilks's lambda = $.81$, $p < .001$.

Table 8 contains the CASES means and standard deviations of each experience group, along with univariate F tests and Scheffé post hoc comparisons of mean differences. Significant differences ($p < .05$) were apparent on each CASES scale as a function of counselor experience level. In particular, the most experienced group and those at intermediate levels of experience reported significantly higher self-efficacy ratings than did those with the least experience across all scales. The most experienced group also expressed significantly higher self-efficacy than the intermediate group on all but the Action Skills and Relationship Conflict scales. Thus, counseling self-efficacy tended to increase with added levels of relevant experience.

Table 6
Summary of Hierarchical Regression Analyses Predicting Interest and Choice Criteria

Dependent variable	Step	R	ΔR^2	ΔF	β
Interests					
CASES total	1	.49	.24	43.77**	.39**
Outcome Expectations	2	.69	.23	60.05**	.49**
Choice					
Interests	1	.51	.26	45.48**	.41**
CASES total	2	.53	.02	1.41	.04
Outcome Expectations					.15

Note. $n = 129$. CASES total = Counselor Activity Self-Efficacy Scales, total score.

** $p < .001$.

Table 7
Self-Efficacy Scores at the Beginning and End of a Second-Semester Practicum Class

Scale	1st week		15th week		<i>t</i> (61)	<i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
Explor. Skills	6.89	0.94	7.53	0.89	5.37**	.70
Insight Skills	5.36	1.31	6.42	1.16	7.06**	.86
Action Skills	5.58	1.35	6.62	1.24	6.31**	.80
Session Mgmt.	5.94	1.29	6.93	1.06	6.53**	.84
Client Distress	4.16	1.98	5.65	1.77	6.93**	.79
Rel. Conflict	5.16	1.53	6.27	1.31	5.79**	.78
CASES total	5.49	1.19	6.55	1.03	8.11**	.95

Note. *n* = 62. Explor. Skills = Exploration Skills; Session Mgmt. = Session Management; Rel. Conflict = Relationship Conflict; CASES total = Counselor Activity Self-Efficacy Scales, total score.

** *p* < .001.

Discussion

These findings suggest that the CASES scales are internally reliable and that they assess clinically relevant aspects of counseling self-efficacy. They are also relatively stable over a 2-week test-retest period, particularly in more advanced trainees who have had a larger fund of counseling experience on which to base their self-efficacy percepts. Conceptually, the Exploration, Insight, Action, and Session Management scales assess task self-efficacy, or perceived capability to perform particular counseling tasks under normative or relatively uncomplicated conditions. The Client Distress and Relationship Conflict scales, by contrast, seem to reflect coping efficacy, or perceived skill at coping with, and generating novel responses for, more difficult counseling situations (Bandura, 1997; Lent, Brown, & Hackett, 2000; Lent et al., 1998). Ultimately, both types of self-efficacy seem necessary for satisfactory counselor development, and it seems likely that coping efficacy builds on more basic task self-efficacy beliefs.

Basic counseling task self-efficacy may be conceptualized as encompassing the perceived ability to use helping skills, both individually (e.g., Exploration, Insight, and Action skills) and

integratively (Session Management), to help direct the counseling process. By referring to these as *basic* aspects of counselor self-efficacy, we do not mean to imply that they reflect skill dimensions that are necessarily simple or easy to perform. Indeed, some of them, such as skills used to promote client insight (e.g., immediacy statements), continue to challenge even more advanced counselors at times. However, they are basic in the sense that they represent fundamental ingredients of the counselor's role, for instance, helping clients to explore and better understand their plight and to take concrete steps to improve their well-being.

An important feature of the Exploration, Insight, Action, and Session Management scales is that they focus on the context-free use of particular skills; that is, their items do not provide specific information about the client, his or her presenting concerns, or in-session behavior. Participants respond by indicating how effectively they believe they could use these skills with most clients over the next week. Such a context-free assessment may be useful in working with beginning-level counselors, who have had little prior exposure to the full range of client types and counseling scenarios. Counselors at this level may have used the basic helping skills in course exercises and role-plays or have seen them performed by others, but may not have had the opportunity as yet to use them under maximally challenging conditions.

The Client Distress and Relationship Conflict scales, by contrast, ask participants to contextualize their self-efficacy ratings by presenting specific client types, issues, or scenarios against which to weigh their capabilities. These scales also provide relatively higher level counseling challenges, such as working with clients who are in considerable pain or present difficult dynamics for the counselor. Note that these scales yielded the lowest means on the CASES questionnaire, suggesting that participants had somewhat less confidence in their abilities to negotiate client distress and relationship conflict than to perform more routine counseling activities. Within a developmentally sequenced model of counselor training, more experienced trainees, such as those in advanced practica or intern placements, may be more likely to have encountered such challenging situations. Thus, these two scales may be useful in assessing relevant dimensions of counseling self-efficacy in relatively more advanced trainees.

Table 8
Self-Efficacy as a Function of Counseling Experience Level

Scale	<1 year		1–3 years		>3 years		<i>F</i> (2, 236)	η^2
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>		
Explor. Skills	6.84 _a	1.08	7.25 _b	0.93	7.63 _c	0.82	12.30**	.09
Insight Skills	5.21 _a	1.63	5.98 _b	1.40	6.56 _c	1.23	16.01**	.12
Action Skills	5.47 _a	1.66	6.22 _b	1.43	6.71 _b	1.31	12.84**	.10
Session Mgmt.	5.77 _a	1.34	6.33 _b	1.19	6.89 _c	1.03	15.86**	.12
Client Distress	4.01 _a	2.09	5.06 _b	1.91	6.04 _c	1.66	20.58**	.15
Rel. Conflict	5.06 _a	1.65	5.75 _b	1.44	6.15 _b	1.28	10.02**	.08
CASES total	5.36 _a	1.26	6.05 _b	1.13	6.61 _c	1.02	21.40**	.15

Note. For the less than 1 year group, *n* = 65; for the 1–3 years group, *n* = 97; for the more than 3 years group, *n* = 77. Means with different subscripts in the same row differ significantly from one another (*p* < .05, Scheffé post hoc comparisons); those sharing the same subscript are not significantly different. Explor. Skills = Exploration Skills; Session Mgmt. = Session Management; Rel. Conflict = Relationship Conflict; CASES total = Counselor Activity Self-Efficacy Scales, total score.

** *p* < .001.

Conceptual and content differences between the various scales notwithstanding, correlations between pairs of individual CASES scales were in the moderate-to-large range, and we found evidence of two strongly related second-order factors, suggesting overlap in counselors' perceived capability to perform different counseling activities. Thus, those who are more confident at handling challenging scenarios also are likely to express confidence at managing the fundamental tasks of counseling, whereas those who lack confidence in their basic skills are also likely to be unsure of themselves in more challenging counseling contexts.

The CASES scales produced relatively large correlations with conceptually similar scales on the COSE (Larson et al., 1992), suggesting that the two instruments are tapping into common or overlapping latent dimensions although they contain items that are worded differently and that mostly reflect different specific behaviors. The CASES scales also generally yielded fairly small correlations with the SDS. Collectively, these findings provide preliminary support for the CASES scales' convergent validity relative to the COSE scales and discriminant validity in relation to the SDS. In terms of criterion-related validity, we observed that some of the CASES scales were significantly related to positive outcome expectations regarding the counselor role, although these correlations were relatively small. CASES scores served as good predictors of students' interest in therapy activities, particularly in tandem with outcome expectations. Interest in therapy activities was, in turn, a good predictor of students' plans to pursue counseling-related career options. In keeping with SCCT's choice model (Lent et al., 1994), interest mediated the relation of both self-efficacy and outcome expectations to career choice goals. (The nature of the mediation effect depended on whether the CASES' total or component scales were used as predictors.) The CASES scales also demonstrated mostly moderate correlations with negative and positive affect experienced while enacting the counselor role. Thus, with increasing self-efficacy, students were likely to feel less stressed and more comfortable in counseling situations.

We found good support for the sensitivity of the CASES scales to change over the course of a second-semester practicum class. The scales also detected differences in counseling self-efficacy among those at different levels of counseling experience. In particular, more advanced and intermediate-level trainees reported significantly higher self-efficacy across the scales than did those with the least amount of experience. The advanced group also reported higher self-efficacy than the intermediate group on most of the scales. Note that these findings on self-efficacy differences as a function of counseling experience were cross-sectional in nature and thus may tell an incomplete story about how counseling self-efficacy develops and changes over time. Moreover, causal inferences about the impact of training on counselor self-efficacy would be premature from this uncontrolled study.

Implications and Future Directions

Our findings and theoretical observations offer several directions for future research and practice related to counselor self-efficacy. First, it would be useful to study the natural progression of growth in counseling self-efficacy longitudinally, tracking students from entry into a graduate program through internship and beyond. A related direction would be to study factors that specifically promote gains in counselor self-efficacy along with growth

in actual skill, particularly in more advanced trainees (Larson & Daniels, 1998). Our findings suggest that CASES scores increased as trainees gained added counseling experience during their second semester of master's level training, but they do not reveal what specific training elements may be responsible for such change.

Another issue meriting empirical attention is the extent to which counseling self-efficacy percepts are client specific versus relatively global in nature. Lent et al. (1998) have speculated that counseling self-efficacy is likely to vary according to the specific clients whom a trainee is seeing, and that, at least over the short run, certain clients have the potential to diminish or bolster the counselor's confidence more than do others (e.g., a client who frequently does not show up versus one who is always on time and expresses much praise for the counselor's interventions). This would suggest that self-efficacy ratings in relation to specific clients are likely to be more variable than are appraisals of one's overall (or non-context-specific) self-efficacy as a counselor. It may also be that compared with global ratings of counseling self-efficacy, client-specific ratings are better predictors of one's comfort level and behavior with a given client. Research on such issues may extend current understanding of counseling self-efficacy and how it functions at a session level.

It would also be valuable to study counseling self-efficacy in relation to objective measures of skill adequacy (i.e., as assessed by the supervisor or other observers using reliable skill-rating systems) as well as to counselor performance within the context of actual counseling sessions. We found counseling self-efficacy to be predictive of important outcomes for the counselor, such as role-related interest, choice, and affective experience. However, it would be at least equally important to explore the implications of counseling self-efficacy for the counselor's behavior in counseling as well as for the ensuing change process. For example, is high or low counseling self-efficacy apparent to the client? If so, what cues signal this confidence level? Might the counselor's self-efficacy affect the client's faith in the counselor (i.e., client ratings of the counselor's efficacy) and, for example, influence his or her willingness to persist in counseling or to follow through with prescribed homework assignments?

Future revisions of the CASES or other counseling self-efficacy measures also might explore the utility of tapping additional facets of counselor behavior (e.g., ability to manage one's own affective or countertransference reactions in-session) or client challenge (e.g., dealing with client anger directed toward the counselor). Such additions may broaden understanding of how counselors perceive and respond to particular client issues, internal tensions, and relationship dynamics in counseling. Additions of this sort also may extend the clinical-training applicability of research on counseling self-efficacy.

Before extending the CASES to future research and practical applications, it would be valuable to assess the reliability and validity of the CASES in new samples of students who are at various stages of training. With this caveat in mind, we will consider a few tentative implications of our findings for training and supervision. First, in keeping with the rational construction of the Helping Skills items, the tripartite division of the Exploration, Insight, and Action self-efficacy factors conformed fairly well to Hill and O'Brien's (1999) three-stage model of helping skills. This model thus appears to provide a theoretically coherent and empirically supported structure for breaking the skills into three sequen-

tial sets at the initial stage of training. Second, session management self-efficacy might be fostered by explicitly encouraging students to practice basic helping skills within the context of role-playing predictable counseling tasks, such as getting sessions focused and setting goals. Third, the Client Distress and Relationship Conflict scales might aid in developing training goals for more advanced counselor trainees by identifying particular client issues or scenarios for which they lack confidence.

Limitations

Several cautions seem in order relative to efforts to generalize, apply, or extend these findings. First, the present findings are most clearly generalizable to advanced undergraduates and graduate students in counseling-related programs; relevance to less or more experienced counselors (e.g., postdoctoral clinicians) or those in other helping professions is unclear at this time. Second, efforts to generalize these findings should be cognizant of the sex and racial-ethnic composition of our (mostly female, European American) sample. Future research might examine the degree to which CASES-criterion relationships are stable across trainee individual-differences dimensions. Third, because counselors do not ultimately control their clients' behavior, counselor self-efficacy may not by itself be expected to have a strong or direct bearing on client outcomes (Lent et al., 1998). Relatedly, O'Brien et al. (1997) have noted several conditions that could affect the nature of counselor self-efficacy/client outcome relations, and some findings with beginning career counselors suggest that the strength and direction of these relations may vary, depending on the aspect of counseling self-efficacy and the outcome criterion being assessed (Heppner, Multon, Gysbers, Ellis, & Zook, 1998). Nevertheless, it could be useful to explore the ways in which the counselor's and client's views of self-efficacy and other-efficacy interrelate and with what implications for the counseling relationship (cf. Frank & Frank, 1991; Lent & Lopez, 2002).

Fourth, although self-efficacy partly determines how well people organize and deploy their skills (Bandura, 1986), self-efficacy is not seen as a substitute for actual or objectively assessed skill. People sometimes misread or misreport their capabilities, especially under certain conditions, for example, where they lack sufficient knowledge of task demands (Bandura, 1997). O'Brien et al. (1997) have noted the potential for beginning counselors to underestimate the complexity of the counseling process and, consequently, to overrate their skills. Bandura (1986) has discussed the implications of self-efficacy estimates that either greatly exceed or undershoot one's actual skills. Unrealistically high self-efficacy beliefs, for instance, may encourage people to take on activities for which they are ill prepared, producing negative results for themselves or others. This analysis suggests that it may be necessary, on occasion, for supervisors to challenge trainees' overly optimistic self-efficacy appraisals so as to orient them to skills that need further perfecting. For example, a trainee may view himself or herself as very efficacious at dealing with highly distressed clients, but the supervisor may judge the counselor's self-rating as overly positive and, perhaps, naive. In such instances, dealing with this discrepancy in perceptions may ruffle feathers in the short run but offers the possibility of greater skill growth (and better service to clients) over the long haul.

The above caveats notwithstanding, the CASES may offer several advantageous features. In particular, the basic helping skills items contain behavioral descriptions of each skill component, which were intended to facilitate their use with relatively inexperienced novice counselors and even peer helpers. The CASES' list of basic skills is reasonably comprehensive and is derived from a coherent theoretical base (Hill & O'Brien, 1999). The CASES also enable assessment of general session management self-efficacy and two dimensions of self-efficacy regarding relatively challenging counseling situations. In addition, the present findings support the CASES' utility in predicting career-relevant criteria (e.g., therapy-related interests), building a useful bridge to the career development literature. Finally, the CASES' item formatting and scaling resemble those typically used in other applications of self-efficacy theory, and efforts were made to focus the item content on perceived behavioral and cognitive capabilities (whereas some other counseling self-efficacy measures appear to include an admixture of content domains, such as self-perceived knowledge, attitudes, values, or worry). These features may increase the likelihood that the CASES are tapping self-efficacy as opposed to alternative constructs. However, the latent structure and differential predictive utility of the various counseling self-efficacy measures are issues that deserve future empirical scrutiny.

In sum, the present study offers support for the factor structure and validity of the CASES scales. Pending replication and extension of these findings, the CASES scales may be used separately or together to examine a variety of theoretically and practically important issues of relevance to counselor development (e.g., acquisition of basic helping skills in prepractica; negotiation of difficult clinical scenarios at later stages of training). Although important advances have been made in the study of counseling self-efficacy (Larson & Daniels, 1998), there is much room for additional inquiry, particularly in the areas of self-efficacy growth, promotion, and clinical consequences.

References

- Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs, NJ: Prentice-Hall.
- Bandura, A. (1997). *Self-efficacy: The exercise of control*. New York: Freeman.
- Crowne, D. P., & Marlowe, D. (1960). A new scale of social desirability independent of psychopathology. *Journal of Consulting Psychology, 24*, 349-354.
- Crowne, D. P., & Marlowe, D. (1964). *The approval motive*. New York: Wiley.
- Fabrigar, L. R., Wegener, D. T., MacCallum, R. C., & Strahan, E. J. (1999). Evaluating the use of exploratory factor analysis in psychological research. *Psychological Methods, 4*, 272-299.
- Frank, J. D., & Frank, J. B. (1991). *Persuasion and healing: A comparative study of psychotherapy* (3rd ed.). Baltimore: Johns Hopkins University Press.
- Goodyear, R. K., & Guzzardo, C. R. (2000). Psychotherapy supervision and training. In S. D. Brown & R. W. Lent (Eds.), *Handbook of counseling psychology* (3rd ed., pp. 83-108). New York: Wiley.
- Gorsuch, R. L. (1997). Exploratory factor analysis: Its role in item analysis. *Journal of Personality Assessment, 68*, 532-560.
- Heppner, M. J., Multon, K. D., Gysbers, N. C., Ellis, C. A., & Zook, C. E. (1998). The relationship of trainee self-efficacy to the process and outcome of career counseling. *Journal of Counseling Psychology, 45*, 393-402.

Heppner, M. J., O'Brien, K. M., Hinkelman, J. M., & Flores, L. Y. (1996). Training counseling psychologists in career development: Are we our own worst enemies? *The Counseling Psychologist, 24*, 105-125.

Hill, C. E., & O'Brien, K. M. (1999). *Helping skills: Facilitating exploration, insight, and action*. Washington, DC: American Psychological Association.

Hill, C. E., O'Brien, K. M., Kolchakian, M. R., Quimby, J. L., Kellems, I. S., Zack, J. S., & Herbenick, D. L. (1999). *Training undergraduate students to become helpers: An investigation of changes in performing helping skills, self-efficacy about helping, and anxiety about helping*. Unpublished manuscript, University of Maryland, College Park.

Larson, L. M. (1998). The social cognitive model of counselor training. *The Counseling Psychologist, 26*, 219-273.

Larson, L. M., & Daniels, J. A. (1998). Review of the counseling self-efficacy literature. *The Counseling Psychologist, 26*, 179-218.

Larson, L. M., Suzuki, L. A., Gillespie, K. N., Potenza, M. T., Bechtel, M. A., & Toulouse, A. (1992). Development and validation of the Counseling Self-Estimate Inventory. *Journal of Counseling Psychology, 39*, 105-120.

Lent, R. W., Brown, S. D., & Hackett, G. (1994). Toward a unifying social cognitive theory of career and academic interest, choice, and performance [Monograph]. *Journal of Vocational Behavior, 45*, 79-122.

Lent, R. W., Brown, S. D., & Hackett, G. (2000). Contextual supports and barriers to career choice: A social cognitive analysis. *Journal of Counseling Psychology, 47*, 36-49.

Lent, R. W., Hackett, G., & Brown, S. D. (1998). Extending social cognitive theory to counselor training: Problems and prospects. *The Counseling Psychologist, 26*, 295-306.

Lent, R. W., & Lopez, F. G. (2002). Cognitive ties that bind: A tripartite

view of efficacy beliefs in growth-promoting relationships. *Journal of Social and Clinical Psychology, 21*, 256-286.

Leong, F. T. L., & Zachar, P. (1991). Development and validation of the Scientist-Practitioner Inventory for Psychology. *Journal of Counseling Psychology, 38*, 331-341.

Lopez, F. G., Lent, R. W., Brown, S. D., & Gore, P. A. (1997). Role of social-cognitive expectations in high school students' mathematics-related interest and performance. *Journal of Counseling Psychology, 44*, 44-52.

O'Brien, K. M., Heppner, M. J., Flores, L. Y., & Bikos, L. H. (1997). The Career Counseling Self-Efficacy Scale: Instrument development and training applications. *Journal of Counseling Psychology, 44*, 20-31.

Russell, R. K., Crimmings, A. M., & Lent, R. W. (1984). Counselor training and supervision: Theory and research. In S. D. Brown & R. W. Lent (Eds.), *Handbook of counseling psychology* (pp. 625-681). New York: Wiley.

Watson, D., Clark, L. A., & Tellegen, A. (1988). Development and validation of brief measures of positive and negative affect: The PANAS scales. *Journal of Personality and Social Psychology, 54*, 1063-1070.

Williams, E. N., Judge, A. B., Hill, C. E., & Hoffman, M. A. (1997). Experiences of novice therapists in prepracticum: Trainees', clients', and supervisors' perceptions of therapists' personal reactions and management strategies. *Journal of Counseling Psychology, 44*, 390-399.

Received October 9, 2001
 Revision received June 10, 2002
 Accepted June 11, 2002 ■

United States Postal Service
Statement of Ownership, Management, and Circulation

1. Publication Title: *Journal of Counseling Psychology*

2. Publication Number: 1791-2898

3. Filing Date: October 2002

4. Issue Frequency: Quarterly

5. Issue Date for Circulation Data Below: July 2002

6. Annual Subscription Price: \$39

7. Complete Mailing Address of Known Office of Publication (Street, city, county, state, and ZIP+4): 750 First Street, N.E., Washington, D.C. 20002-4242

8. Complete Mailing Address of Headquarters or General Business Office of Publisher (not printer): 750 First Street, N.E., Washington, D.C. 20002-4242

9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank):
 Publisher: American Psychological Association, 750 First Street, N.E., Washington, D.C. 20002-4242
 Editor: Jill A. Hanson, PhD, Department of Psychology, University of Minnesota, 75 East River Road, Minneapolis, MN 55455-0344
 Managing Editor: Susan Knapp, American Psychological Association, 750 First Street, N.E., Washington, D.C. 20002-4242

10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the names and addresses of all individual owners. If owned by a partnership or other unincorporated firm, give its name and address as well as that of each individual owner. If the publication is published by a nonprofit organization, give its name and address):
 American Psychological Association, 750 First Street, N.E., Washington, D.C. 20002-4242

11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box: [X] None

12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one):
 Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)

13. Publication Title: *Journal of Counseling Psychology*

14. Issue Date for Circulation Data Below: July 2002

15. Extent and Nature of Circulation

15a. Extent and Nature of Circulation		15b. Average No. Copies Each Issue During Preceding 12 Months	15c. Copies of Single Issue Published Nearest to Filing Date
1. Total Number of Copies (Net press run)		10,626	9,672
2. Paid and/or Requested Circulation (Sum of 2a, 2b, 2c, 2d, 2e, and 2f)			
a. Paid and/or Requested Circulation			
(1) Paid in Advance			
(2) Paid Through Carriers and Other Non-USPS Paid Distribution	7,738	7,395	
(3) Paid Through the USPS			
(4) Other Classes Mailed Through the USPS			
(5) Total Paid and/or Requested Circulation (Sum of 2a, 2b, 2c, 2d, 2e, 2f, 2g, 2h, 2i, 2j, 2k, 2l, 2m, 2n, 2o, 2p, 2q, 2r, 2s, 2t, 2u, 2v, 2w, 2x, 2y, 2z)	8,353	8,010	
3. Free Distribution Outside the Mail (Carriers or other means)			
(1) Outside-County as stated on Form 3541			
(2) In-County as stated on Form 3541	122	139	
(3) Other Classes Mailed Through the USPS			
(4) Free Distribution Outside the Mail (Carriers or other means)			
(5) Total Free Distribution (Sum of 3a, 3b, and 3c)	122	139	
4. Total Distribution (Sum of 15b and 15c)	8,475	8,149	
5. Copies not Distributed	2,151	1,523	
6. Total (Sum of 15d and 15e)	10,626	9,672	
7. Present Paid and/or Requested Circulation (Sum of 15b and 15c)	98.6	98.3	

16. Publication of Statement of Ownership: [X] Publication required; will be printed in the January 2003 issue of this publication. [] Publication not required.

17. Signature and Title of Editor, Publisher, Business Manager, or Owner: *Ruth M. Glaser, Editor*

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).

Instructions to Publishers:
 1. Complete and file one copy of this form with your postmaster annually on or before October 1. Keep a copy of the completed form for your records.
 2. In cases where the stockholder or security holder is a trustee, include in items 10 and 11 the name of the person or corporation for whom the trustee is acting. Also include the names and addresses of individuals who are stockholders who own or hold 1 percent or more of the total amount of bonds, mortgages, or other securities of the publishing corporation. In item 11, if none, check this box. Use blank sheets if more space is required.
 3. Be sure to furnish all circulation information called for in item 15. Free circulation must be shown in items 15c, 15e, and 15f.
 4. Item 15b. Copies not distributed, must include (1) if requested, copies originally stated on Form 3541, and returned to the publisher; (2) estimated returns from news agents, and (3) copies for office use, leftovers, spoiled, and all other copies not distributed.
 5. If the publication had Periodicals authorization as a general or regular publication, this Statement of Ownership, Management, and Circulation must be published. It must be printed in any issue in October or, if the publication is not published during October, this form is printed after October.
 6. In item 16, indicate the date of the issue in which this Statement of Ownership will be published.
 7. Failure to file or publish a statement of ownership may result in suspension of Periodicals authorization.