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COUNSELING CHILDREN WHO SPEAK A LANGUAGE
IN WHICH THE COUNSELOR IS NOT FLUENT:
PLAY THERAPY AND COUNSELOR PERCEIVED SELF-EFFICACY

A Dissertation

Submitted to the Graduate Faculty of the
University of New Orleans
in partial fulfillment of the
requirements for the degree of

Doctor of Philosophy
in
The Counselor Education Program

by

Roy A. Salgado, Jr.

B.S., Tulane University, 1995
M.Ed., University of New Orleans, 2000

May 2003

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DEDICATION

This dissertation is dedicated to my mother, Lina Tome Salgado, were it not for your love and support, I would not be making this lifelong dream a reality.

This endeavor has always been as much for you as it has been for me.

To my sister Maritza Salgado, who encouraged me to attend graduate school.

It is because of your guidance and counsel that I can proudly say that I am

Dr. Roy A. Salgado, Jr.

To my brother Alberto Salgado, who has taught me the art of not taking life too seriously. I have become a happier and healthier person because of it.

To my grandparents Alberto and Liana Tome, for always believing in me and knowing that I could accomplish anything.

Your love and support has been invaluable to me.

Were it not for each of you, I would not be where I am today.

I love you so very much.

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ABSTRACT

This study investigated 9 variables to determine their relationship to the frequency of use of “Play Therapy” or non-verbal counseling techniques by elementary school counselors as well as their relationship to counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent. The notion of placing an emphasis on “Play Therapy” or non-verbal counseling techniques with such a population has emerged as a possible therapeutic intervention when working with individuals from a cultural background which is different from that of the counselor.

Researchers in counseling have noted the importance of providing adequate services to diverse populations including those who do not speak a language in which the counselor is fluent. This study was based on the concept that an elementary school counselor’s effectiveness when counseling children who speak a language in which the counselor is not fluent is related to the counselor’s level of training in non-verbal counseling techniques, level of training in multicultural counseling, years of counseling experience, professional membership affiliations, fluency in other languages, gender, and grade level in which the counselor works.

Statistically significant relationships were found with several of the variables including level of training in play therapy, membership in the Association for Play Therapy and American School Counselor Association, and grade level in which the counselor works. Elementary school counselors and counselor educators can utilize the findings of this study to develop and implement programs that teach play therapy and

other non-verbal counseling techniques to elementary school counselors. These experiences may help provide better services to diverse populations including those who speak a language in which the counselor is not fluent.

CHAPTER ONE

INTRODUCTION

This chapter provides background information, key constructs and concepts, a conceptual framework and the overall purpose of this proposed study. Research questions, limitations, delimitations, and assumptions of the study are also outlined. The chapter ends with discussions of important terms and definitions that illuminate the scope of this investigation.

Background

This section addresses specific issues pertaining to elementary school counseling with children who speak a language in which the counselor is not a speaker. Subsections provide information that illuminate the importance of research in this area. Finally, details pertaining to how such research can inform the field of elementary school counseling and counselor education.

Elementary School Counseling

History of Elementary School Counseling. Elementary school counseling is a process of helping children by assisting them in making decisions and changing behavior. Elementary school counselors work with all students, school staff, families, and members of the community as integral parts of the educational program. Elementary school counseling as a recognized specialty evolved over many years, adapting to the educational, political, and economic trends of the time. School counseling in general initially focused on a narrow concept of selected services for a small population of problem students, but it is consistently evolving into a discipline which caters to the needs of a diverse population of students (Thompson, 2002).

School counseling has always been the discipline by which school systems have been expected to cope with the various social and economic revolutions of this country. With the facilitation of school counseling, national issues such as racial integration, immigrant assimilation, handicap mainstreaming, sexual education, drug prevention, crisis interventions, and family support have been addressed and incorporated into the lives of many school-aged children.

Although school counseling continues to evolve into a multifaceted profession, its focus has often been that of academic and career planning at the high school level at the expense of the needs of children at the elementary school level. At the high school level school counselors historically have guided students with respect to their grades and coursework, and advised them as to which courses to take and when. School counseling also has entailed guiding students to appropriate career paths or post-secondary education (Thompson, 2002).

Significant Areas of Elementary School Counseling. Elementary school counseling entails the counseling of students; consulting with parents, teachers, and other helping professionals regarding student needs; coordinating school and community services; managing classroom programs; conducting needs assessments and program evaluations; and participating in curriculum development. In elementary school counseling, the professional helps children understand themselves and others by enhancing social, emotional, and cognitive skills. The counselor helps prevent self-defeating problems from developing. Counselors also provides crisis intervention and crisis management for the children whom they serve, as well as the parents and faculty that are involved with the children. In addition to the aforementioned areas of elementary school counseling, the counselor individualizes programs and services, when applicable, based on the child's strengths and weaknesses (Thompson, 2002).

Children Whose Native Language Is Other Than English. There is an ever-increasing number of children within American elementary schools whose native language is other than English. These children represent various cultural, linguistic, socioeconomic, and religious backgrounds. They often have distinctive difficulties in schools and with their families. Because of their unique experiences in both developmental and cultural transition, these children present challenges for elementary school counselors. To effectively accomplish their work, elementary school counselors need to be aware of the particular characteristics and issues related to children who speak a language in which the counselor is not fluent and facilitate a more accommodating learning environment by working together with school personnel, parents, and community members (Tang, 1999).

Elementary school counselors play an important coordinating role in the endeavor to help children whose first language is not English. Elementary school counselors who work with these children have found success with this population by developing comprehensive ESL (English as a Second Language) programs. Successful comprehensive ESL programs include sufficient primary language materials, sheltered content classes to small language subgroups; teachers with high, more positive morale/belief; organizational structures that facilitate teaching effectiveness; provision of social, health, and psychological services for children; and close collaboration with social agencies, police, and diverse ethnic sub-communities (Tang, 1999).

Hispanic Children Whose Native Language Is Spanish

A major demographic shift is taking place in the United States. The recent wave of Hispanic migration to the United States is the largest in this nation's history, surpassing even the great influx of European immigrants to the U.S. at the turn of the twentieth century. Hispanics are predicted to become the largest minority group in the United States by the year 2010, and they continue to confront serious obstacles as they attempt to participate in the opportunities offered by the dominant culture (Frevert, Miranda, & Kern, 1998).

The Hispanic population in the U.S. is young; the average member of this group is 15 years of age. Since a significant portion of the Hispanic population consists of children and adolescents, it is essential that counseling services be tailored to the specific needs of this particular population. As counseling services in the schools account for a substantial segment of this particular demographic group, it would benefit elementary

school counselors to implement more comprehensive school counseling programs that cater to the needs of Hispanic children.

Key Constructs and Concepts

Elementary School Counseling

Elementary school counseling is the process by which a broad program of services is provided by professionally trained counselors who practice in elementary school settings. It is a specialty area of an extended helping profession that spans an array of services (Schmidt, 1999).

Non-verbal Counseling Techniques

Non-verbal counseling techniques are therapeutic interventions which do not require the use of spoken language between the elementary school counselor and the child. Some non-verbal counseling techniques commonly utilized by elementary school counselors include play, art, and other creative techniques. Non-verbal counseling techniques are often used by elementary school counselors to establish rapport with children whose language development is not fully ready for primarily verbal interaction, especially in the context of the therapeutic relationship. Non-verbal counseling techniques such as those utilized in play therapy serve as a means of communication between child and elementary school counselor. This means of communication between child and elementary school counselor appears to be necessary for effective counseling to take place (Schmidt, 1999).

Multicultural Counseling

Our increasingly culturally-pluralistic society has led to the conceptualization of multicultural theories and models within the counseling profession. Multicultural counseling considers personality dynamics and the cultural backgrounds of both counselor and client as they develop a way to interact in an ideally therapeutic manner. Multicultural counseling, therefore, takes into consideration the cultural background and individual experiences of diverse clients and how their psychosocial needs might be met through counseling. It provides a broad conceptual framework for counseling and its practice (Lee, 1997). As such, one of the elements of this investigation is to determine if there is a relationship between frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent and the difference in cultural background between counselor and child.

Language As A Cultural Barrier. When counseling a child who is of a different cultural background than oneself, the elementary school counselor must take into consideration potential cultural barriers that may inhibit the counseling relationship. For many elementary-aged children this cultural barrier often times is the language, which the child speaks or does not speak. One's culture is experienced and is perpetuated through one's language (or languages). A common language between two individuals acts as a unique bond that signifies membership in a specific ethnic group. School counselors who do not speak the same language as the children whom they counsel, should be aware that the lack of a common language between counselor and child may be a cultural barrier within the counseling relationship (Herring, 1997).

Elementary School Counselors

The elementary school counselor provides a comprehensive program of services with specific goals and objectives that complement the broader mission of the school. Elementary school counselors distinguish themselves from counselors in other professional settings who offer a limited range of services or narrowly focused services due to the specific populations they serve. Elementary school counselors serve three populations: students, parents, and teachers. The services that elementary school counselors provide for these three groups include individual and group counseling, consulting, testing and assessment, group instruction, and professional referrals (Schmidt, 1999). Elementary school counselors report that their role is to help students learn appropriate social skills, enhance their self-concept, and develop problem-solving skills (Morse & Russell, 1988).

School Counselors Self-Efficacy

Self-efficacy is defined as people's judgments of their capabilities to organize and execute the courses of action required to attain designated types of performances. It is theoretically a mediating factor of behavior. Assessing the self-efficacy of a specific group of professionals such as school counselors can be an important research link to examine questions of performance. As such, one of the aims of this investigation is to determine if there is a relationship between frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy.

Training Elementary School Counselors

It is both clinically and ethically imperative that elementary school counselors have adequate training and supervised experience in the field of elementary school counseling, multicultural counseling, and in the use of non-verbal counseling techniques such as play therapy. It is an ethical mandate of most professional codes that elementary school counselors practice within the boundaries of their competence. While the assessment of competence is ambiguous at best, it is nevertheless an obligation for those working with any special population to have adequate training and experience in the chosen field (Landreth, 2001).

In an attempt to provide competent counselors, universities and professional organizations may consider developing programs that better prepare counselors and make them more competent when working with diverse populations. The American School Counselor Association (ASCA) has adopted the position of encouraging school counselors to “take action to ensure that students of culturally diverse backgrounds have access to appropriate services and opportunities which promote the maximum development of the individual” (ASCA, 1993). The Association for Multicultural Counseling and Development (AMCD) approved a document stating the need and rationale for multicultural and cross-cultural counseling competencies and strongly encouraged the American Counseling Association (ACA) and the counseling profession to adopt the competencies in accreditation criteria. The multicultural competencies suggested by the AMCD were adopted by both the AMCD and the ACA in 1995 (Sue, Arrendondo, & McDavis, 1996).

Elementary school counselors train in specialized counseling techniques such as those offered in Play Therapy in order to be more effective and multiculturally competent elementary school counselors. The Association for Play Therapy (APT) has established a process for becoming a Registered Play Therapist (RPT) and a Registered Play Therapist-Supervisor (RPT-S). This credential serves as evidence that a play therapist or an individual has been trained in play therapy theories, techniques, and applications, as well as other non-verbal counseling techniques and has met the minimal training and supervised experience standards (Landreth, 2001). While it is difficult to find adequate training in non-verbal counseling techniques such as play therapy, elementary school counselors who aspire to work in an elementary school setting with diverse populations must be deliberate about seeking quality training and qualified supervision (Landreth, 2001).

Professional Identity

The identity assumed by a discipline such as elementary school counseling is often reflected in the title, role, and intention of the profession and should result from a unified determination by, of, and from the membership of the discipline. Many elementary school counselors struggle to develop a unique and meaningful professional identity (Myers, Sweeney, & White, 2002). The American School Counselor Association (ASCA) is a professional organization which helps its members develop a clearer professional identity. ASCA has a membership of over 13,000 members. ASCA's membership represents only a portion of the professional counselors who work in elementary, middle, and high schools across the United States (Schmidt, 1999). ASCA members have a unique and distinctive preparation, grounded in the behavioral sciences,

with training in counseling skills adapted to the school setting. School counselors assist in the growth and development of each individual and use their specialized skills to ensure that the rights of the counselee are properly protected within the structure of the school program (ASCA, 1996).

Other organizations such as the Association for Play Therapy (APT) also help their members develop a clearer professional identity. Like ASCA members, APT members also have a unique and distinctive preparation. Many of them have at one time or another attended workshops or seminars on the use of play therapy techniques. Still more have taken graduate courses, which specialize in play therapy techniques.

One of the objectives of this investigation is to determine if there is a relationship between frequency of use of non-verbal counseling techniques and counselor perceived self-efficacy when counseling with children who speak a language in which the counselor is not fluent and membership in The American School Counselor Association or the Association for Play Therapy, or both.

In addition, professional organization membership and the professional identity of an elementary school counselor often help to strengthen the quality of work that counselors do when implementing their skills and techniques. The continuing education that elementary school counselors receive through professional organizations such as ASCA and APT help to solidify their professional identity as elementary school counselors and help to clarify their role as professional elementary school counselors.

Purpose of the Study

Purpose

The purpose of this study is to examine the self-described counseling effectiveness of counselors who counsel children whose first language is different from the language spoken by the counselor. Further, an investigation of the counselor's perceived self-efficacy helped to determine if there is a relationship between self-efficacy and effectiveness.

This study looked closely at non-verbal techniques in counseling to support or refute the contention that non-verbal techniques are most effective with children whose first language is not English. As Play Therapy is the most recognized of the non-verbal counseling techniques, emphasis was placed on the significance of Play Therapy training to the self-efficacy of the counselor.

In order to fully explore the relationship of elementary school counselors' effectiveness and self-efficacy, this study considered counselor perceived self-efficacy in relationship to the amount of training in non-verbal counseling techniques and multicultural counseling. It also explored the relationship between effectiveness and self-efficacy and membership in the Association for Play Therapy and the American School Counselor Association. Other variables such as years of experience as a counselor, difference in cultural background between counselor and child, and fluency in more than one language were also explored for this investigation.

Importance of the Study

This study is important to the counseling profession, especially to the area of elementary school counseling, because of the paucity of research on multicultural issues

in elementary school counseling. This work adds to the accepted literature concerning multicultural elementary school counseling and the use of non-verbal techniques with children. There is an ever-growing need for elementary school counselors in the United States to provide counseling services to children who speak a language in which the counselor is not fluent. Unfortunately, there are not enough school counselors in the U.S. who speak more than one language, even minimally, to be able to provide counseling services to children who speak a language other than English. Meanwhile, there is an abundance of children who speak a language in which the counselor is not fluent and who do not have access to counseling services because of communication barriers. In an attempt to address this issue, professional counselors and counselor educators must give practical and empirical attention to the areas of school counseling and play therapy with children and adolescents. Accordingly, this research focused on school counseling and play therapy with regard to children who speak a language in which the counselor is not fluent.

Research Questions

This study attempted to answer the following research questions:

1. Is there a relationship between (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) membership in the Association for Play Therapy, (6) membership in the American School Counselor Association, (7) counselor's fluency with languages other than English, (8) gender of the counselor, (9) grade level in which the counselor works and

- frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent?
2. Is there a relationship between frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy?
 3. Is there a difference (1) in the frequency of use of non-verbal counseling techniques and (2) counselor perceived self-efficacy between multilingual counselors and English-only speaking counselors when counseling with children who speak a language in which the counselor is not fluent?
 4. Is there a difference in (1) the frequency of use non-verbal counseling techniques and (2) counselor perceived self-efficacy between English-only speaking counselors who have received training in non-verbal counseling techniques and English-only speaking counselors who have not received training in non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent?
 5. Is there a difference (1) in the frequency of use of non-verbal counseling techniques and (2) counselor perceived self-efficacy between English-only speaking counselors who have received training in multicultural counseling and English-only speaking counselors who have not received training in multicultural counseling when counseling with children who speak a language in which the counselor is not fluent?
 6. Is there a difference (1) in the frequency of use of non-verbal counseling techniques and (2) perceived counselor self-efficacy among counselors, based on the years of

- counseling experience that the counselor has when counseling with children who speak a language in which the counselor is not fluent?
7. Is there a difference in the (1) frequency of use of non-verbal counseling techniques and (2) perceived counselor self-efficacy among counselors, based on the counselor's gender when counseling with children who speak a language in which the counselor is not fluent?
 8. Is there a difference in the (1) frequency of use of non-verbal counseling techniques and (2) perceived counselor self-efficacy among counselors, based on the grade level of the children with which the counselor works when counseling with children who speak a language in which the counselor is not fluent?
 9. When counseling with children who speak a language in which the counselor is not fluent, (a) frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy is most likely to be predicted by (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) counselor's fluency with languages other than English, (6) gender of the counselor, or (7) grade level in which the counselor works.

Limitations and Delimitations

Pryczak and Bruce (1998) defined a limitation as a “weakness or handicap that potentially limits the validity of the results” (p. 57). A possible limitation of this investigation involves participant availability. There may not be enough elementary school counselors in the United States who have encountered the scenario of counseling

children who speak a language in which the counselor is not fluent. Likewise, the sampling procedures utilized in this investigation may not access a large enough sample of elementary school counselors in the United States who counsel children who speak a language in which the counselor is not fluent. In summary, the scope of this investigation may not take into consideration the fact that there may not be enough respondents to accurately reflect any significant results.

A delimitation has been defined by Pryczak and Bruce (1998) as “a boundary to which the study was deliberately confined” (p. 57). This study was delimited to elementary school counselors and their perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent. The sample for this investigation was delimited to elementary school counselors, because they are currently faced with new demands as the number of immigrants and refugees with limited English proficiency increases most in the elementary school population (Keyes, 1989).

Assumptions of the Study

The following assumptions are being made with regard to conducting this investigation:

1. Participants provided honest and accurate answers when completing survey instruments.
2. Participants who choose to reply to the survey were representative of all elementary school counselors in their respective states.

3. Survey instruments utilized in the study are reliable and valid, and accurately measure the elementary school counselors' perceived self-efficacy when counseling children whose native language is other than their own.
4. Survey instruments utilized in the study are reliable and valid, and accurately measure the amount of training received by elementary school counselors, membership in professional organizations such as the Association for Play Therapy, American School Counseling Association, or both, and cultural background.
5. Survey instruments utilized in the study are reliable and valid, and accurately measure the frequency of use of non-verbal techniques by elementary school counselors who counsel children whose native language is other than English.

Definition of Terms

Herein I have listed terms relevant to this research project. Terms are defined with specific meanings as they relate to this investigation. Therefore, definitions pertain to my professional experiences, existing literature, and the purpose of this investigation.

Acculturation

The extent to which an individual learns and expresses his or her own as well as the dominant cultures values, beliefs. That is, the ability that an individual has to successfully adapt the customs of the dominant culture while maintaining the integrity of the customs of his or her own culture (Helms & Cook, 1999).

American School Counselor Association

A professional organization whose members have a unique and distinctive preparation, grounded in the behavioral sciences, with training in counseling skills adapted to the school setting (ASCA, 1996).

Association for Play Therapy

A professional organization whose members have a unique interest in play therapy techniques and who may have received specialized training in play therapy, either in the form of a workshop or graduate course.

Elementary Aged Children

Children between the ages of four and fourteen.

Children who speak a language in which the counselor is not fluent

Those individuals who are being educated in the U.S. public or private elementary school systems and who speak a language other than that of the counselor; in most cases, English.

Counseling

Ongoing helping processes that are confidential in nature, assist people to focus on concerns, plan strategies to address specific issues, and evaluate their success in carrying out these plans (Schmidt, 1999).

Cultural background

Refers to the values, beliefs, language, rituals, traditions, and other behaviors that are passed from one generation to another within any social group (Helms & Cook, 1999).

Elementary School Counselor

A counselor who provides a comprehensive program of services for children between the ages of four and fourteen.

Experience

The length of time or amount of exposure that one has to a particular task or situation.

Fluency

The degree to which an individual, either the counselor or child is able to express himself or herself in a language.

Hispanic

An individual whose national origin can be traced to Spain or a Latin American country regardless of race or ethnicity.

Multicultural Counseling

The element in counseling by which not only the personality dynamics but also the cultural backgrounds of both counselor and client are taken into account in creating a therapeutic environment in which both the counselor and client can purposefully interact (Lee, 1997).

Non-verbal counseling techniques

Counseling techniques utilized by counselors which do not necessarily rely on or require the use of language in order for communication or meaningful expression to occur between the counselor and the child.

Play Therapy

A therapeutic intervention used by counselors which facilitates the development of expressive language, communication skills, emotional development, social skills, decision-making skills, and cognitive development in children through the utilization of toys and creative techniques (Landreth, 2001).

Self-Efficacy

Judgments made by individuals of their own capabilities to organize and execute the courses of action required to attain designated types of performances (Bodenhorn, 2001).

Traditional Counseling

Counseling techniques and theories, which are used by counselors who work in a specific setting.

Traditional Counseling in Elementary Schools

Counseling techniques that are influenced by the following theories: Adler's Individual Psychology, Child-Centered Theory, Rational Emotive-Behavioral Therapy, Transactional Analysis, Cognitive-Behavioral Theory, Developmental Theory, Choice Theory or Reality Therapy, Systems Theory, Ecosystemic Theory, or Psychodynamic Theory (Stone & Bradley, 1994).

CHAPTER TWO

REVIEW OF LITERATURE

This chapter presented a review of the literature that pertains to this study. Information specific to non-English speaking children, elementary aged children, and elementary school counseling were addressed. In particular, concepts specific to elementary school counselors, verbal and nonverbal techniques, multicultural counseling, counselor training, and ethical issues when counseling children who speak a language in which the counselor is not fluent were illuminated.

Non-English speaking residents in the United States

Currently, there is a major demographic shift taking place in the United States as the population has already and will continue to become more diversified than ever. It is projected that the rapid increase of the U.S. minority population will reach its peak by 2050 (U.S. Bureau of the Census, 1998). The current wave of Hispanic migration to the United States is the largest in this nations history, surpassing even the great influx of European immigrants to the U.S. at the turn of the twentieth century. If current immigration trends continue, the United States will no longer have a White majority by 2050 (Dillin, 1991). As such counselors need to be aware of this phenomenon and be

prepared to work with a diverse population in the future, as this population confronts serious obstacles while attempting to participate in the opportunities offered by the dominant culture (Frevert, Miranda, & Kern, 1998).

Non-English speaking children in the United States

Among the increased number of minority members, many are recent immigrants and their dependents. Children of immigrant families usually attend private and public schools. Immigrants experience many life changes in various ways, including use of a new language, frequent transition from a familiar environment to an unfamiliar environment; they are basically caught in two cultures (Berger, 1996; Glasgow & Gouse-Sheese, 1995). When children are already dealing with the stress produced by this acculturation process, basic developmental issues contribute greatly to the struggle that immigrant children experience at home and school.

The counseling profession and counselors, especially school counselors, need to be prepared to cope with societal changes in population and cultural influences. Schools will not be able to hire enough culturally diverse counselors to keep pace with the growth of diverse cultures in the school populations. Elementary school counselors will increasingly have to counsel students from cultures different from their own. The increased influx of immigrants to the United States has resulted in renewed attention to transitional problems and the role that elementary school counselors play in effectively facilitating this process (Cardenas, Taylor, & Adelman, 1993).

Elementary Aged Children

The general public, school administrators, counselor educators, and school counselors are becoming more aware that elementary aged children, that is children between the ages of four and fourteen are in need of counseling services. For the sake of this investigation, elementary school children were specifically limited to those individuals ranging from ages four to fourteen. This is because many elementary schools consist of at least grades K-5, while many others consist of grades K-8. Children in these grade levels typically range from ages four or five in kindergarden to fourteen in the eighth grade. Today's elementary aged children are challenged by an array of developmental and societal concerns that can affect their educational process. Child abuse, family dysfunction, society's fascination with violence, and other factors influence elementary aged children's lives every day (Schmidt, 1999).

School Counseling

School counseling is a service provided to many children at varying ages. While experts have consistently attested to the efficacious nature of implementing school counseling programs at elementary, middle, and high school levels, elementary schools are only beginning to receive the attention of school counselors. In fact, most high schools provide counseling services to their students, while only a fraction of elementary schools offer such services to their students (Schmidt, 1999).

Elementary School Counseling

The Professional Identity of Elementary School Counselors

The identity assumed by a discipline such as elementary school counselors is often reflected in the title, role, and intention of the profession and should result from a unified determination by, of, and for the membership of the discipline. Many elementary school counselors often struggle to develop a unique and meaningful professional identity (Myers, Sweeney, & White, 2002). The American School Counselor Association (ASCA) is a professional organization, which helps its members develop a clearer professional identity. ASCA has a membership of over 13,000. Members of ASCA represent a portion of the professional counselors who work in elementary, middle, and high schools across the United States (Schmidt, 1999). ASCA members have a unique and distinctive preparation, grounded in the behavioral sciences, with training in counseling skills adapted to the school setting. School counselors assist in the growth and development of children and use their specialized skills to ensure that the rights of children are properly protected within the structure of the school program (ASCA, 1996).

Developmental Characteristics of Elementary School Counseling

Elementary schools in the United States provide an array of services to students beyond those of basic instruction. Among these services are counseling, consulting, academic advising, parent education, and other functions performed by professional school counselors. Elementary school counseling is one of several subspecialties that comprise the counseling profession. As a specialty, it consists of essential functions generally found in the counseling profession as well as services unique to elementary

school settings. In addition, elementary school counselors design programs and services that reflect the needs of divergent student populations that are specific to the developmental needs of elementary age children and their families (Schmidt, 1999).

Theoretical Orientations of Elementary School Counselors

Elementary school counselors often espouse to a number of theories when working with children, among the most common of these theories are: Adler's Individual Psychology, Behavioral, Client-Centered, Developmental, Rational Emotive Behavior Therapy (REBT), Choice and Reality Therapy, and Transactional Analysis. The aforementioned theories are widely used in elementary school settings because of the receptiveness of children to the techniques used from these theoretical orientations, the amount of time that elementary school counselors typically have with children, and the depth of the counselor's involvement with the children in their school (Stone & Bradley, 1994).

Adlerian techniques have been applied in elementary schools by Dreikurs and associates and Dinkmeyer and associates. As a result Adler's Individual Psychology has gained a measure of support in elementary schools by a number of elementary school counselors (Stone & Bradley, 1994).

The behaviorist movement achieved true popularity and notoriety with B.F. Skinner's (1966) work, which has been advanced by a number of individuals, including Wolpe (1958), Bandura (1963), Krumboltz (1974), Thoresen (1966), and Patterson (1962). Krumboltz, Thoresen and Patterson are among the more influential behaviorists in the school setting. Operant conditioning remains to be the behavioral technique that is

found most often in educational and therapeutic settings. This approach is frequently used with children who exhibit extreme behaviors that are disruptive to all in school settings, as well as inpatient institutions, for those children whose behavior is no longer appropriate for the school setting (Stone & Bradley, 1994).

Over the past three decades, the theoretical approach referred to as client-centered, nondirective, and person-centered counseling has been increasingly implemented in the elementary school systems. Many elementary school counselors are attracted to the client-centered approach because of the focus on the therapeutic relationship. Since this relationship is based on the counselors' expression of warmth and empathy, many elementary school counselors are fond of client-centered counseling as it represents the epitome of how elementary school counselors are expected to behave (Stone & Bradley, 1994).

Developmental theory purports the personality of the individual as unfolding through healthy interaction with the environment. Developmental counseling is proactive, stressing educative-preventative goals. This is in contrast to those theories that are reactive, focusing on the remediation of existing problems. Developmental techniques are anchored in developmental theory and based on the premise that specific behaviors are simply a part of life stages through which children will transition naturally if provided with a healthy environment and appropriate interpersonal interaction. Based on this theory, counseling helps children manage their lives within the various stages of development (Stone & Bradley, 1994).

Rational Emotive Behavior Therapy is a very popular counseling approach utilized in elementary schools because it supports the premise that people are self-

deterministic. Elementary school counselors serve a role in which they assist children in developing a more rational view of life. REBT employs active-directive, cognitive methods to address self-defeating behaviors. Elementary school counselors function much like a teacher, and children are viewed as students. It should be noted that the most noteworthy limitation of REBT is the reliance on language mastery. Younger children or children whose native language is other than English may have difficulty because of limited cognitive development or a limited vocabulary in the English language, respectively (Stone & Bradley, 1994).

Glasser's Choice theory/Reality therapy is widely used in the schools, because this theory is based on the concept that children view themselves as worthwhile and deserve to be encouraged to assume responsibility for their actions. Much like REBT, Glasser's Choice theory/Reality therapy includes a teaching component in which elementary school counselors serve as role models who focus on present behavior. Glasser's theory emphasizes that children learn to control their behavior within the world around them, rather than be controlled externally by the world. Counseling is an effort to help children manage their internal processes, thus becoming emotionally stronger and better at making appropriate choices about their behaviors (Stone & Bradley, 1994). Glasser's emphasis on the present, problem solving, and behavioral responsibility have broad appeal to elementary school counselors. Like REBT, reality therapy relies heavily on effective verbal communication and the necessity for children to understand cause and effect. With children in grades K-2, use of this approach is somewhat restricted because of language limitations and cognitive development (Stone & Bradley, 1994). Likewise,

this approach would not be applicable for children whose native language is other than English.

Transactional analysis appeals to many elementary school counselors because of the contractual component, which clearly structures who will do what, and when. Thus, contracts help children assume responsibility for their own progress (Stone & Bradley, 1994).

Although all of these theories appear to be very popular with many elementary school counselors throughout the United States, many do suggest that a major limitation to using these approaches with elementary age children is the emphasis that is placed on verbal communication. Elementary school aged children are at various stages of developing their ability to communicate and comprehend words and language. Children who have limited language skills or children whose native language is other than English would more than likely struggle with the application of more conventional approaches to counseling.

Techniques Utilized by Elementary School Counselors

Verbal counseling techniques. Elementary school counselors receive a great deal of training in specific counseling techniques. These techniques are often utilized by professional counselors regardless of the setting in which they work. Elementary school counselors in particular and school counselor educators commonly utilize specific counseling techniques, which have been identified as effective when utilized with children within an elementary school setting. Many of these techniques are verbal in nature and include, but are not limited to story-telling, early childhood recollections,

family constellation, birth order, behavioral consequences, extinction, satiation, contracting (verbal or written), incompatible alternatives, systematic desensitization, restructuring of children's self-talk, positive reinforcement, shaping, unconditional positive regard, goal formulation, structuring, modeling, role play, relaxation techniques, persuasive communication, questioning, conversation, guidance, psychoeducation, group work, and the use of media such as videos, music, or audiocassettes, CDs and DVDs (Schmidt, 1999).

Non-verbal counseling techniques – play therapy. In addition to the aforementioned counseling techniques, some elementary school counselors receive training in specialized counseling techniques, that are non-verbal in nature. These techniques are those utilized by professional counselors who often identify themselves as Registered Play Therapists (RPT). Those elementary school counselors and school counselor educators, who utilize these non-verbal counseling techniques, believe that these skills and interventions are particularly effective when utilized with children within an elementary school setting (Landreth, 2001). Many of these techniques include, but are not limited to the use of various creative materials and toys that represent diverse populations, everyday activity, and events and relationships to which children are exposed throughout their day to day lives (Christensen, 2001). Symbol exploration is also paramount to play therapy and is often accomplished by utilizing specific material and toys such as miniature figurines, sand and sand trays, dolls and dollhouses, baby bottles, puppets, photographs, inflatable punching bags, handcuffs, building toys, cars, trucks, kitchen utensils, pretend food, doctor's kits, construction supplies, musical instruments, sports/physical activity equipment, rope, masks, and play money. Structured and non-

structured games and puzzles are also incorporated throughout play therapy. Art supplies and other creative mediums of expression such as pictures, pencils, markers, crayons, craft projects, paint and paint brush, clay, pastels, and markers are also important in the application of various play therapy techniques (Christensen, 2001).

In addition to using inanimate objects when providing play therapy and other non-verbal approaches with children, play therapists also utilize basic attending skills to acquire information from children, to establish a therapeutic relationship, and to provide boundaries and interventions accordingly. Play therapists also attend to motor skill development, the types of and order with which children choose to use various materials, specific behavioral cues (including facial expressions and verbal utterances), long term behavioral patterns in various environments, and common recurring themes expressed by children over time (Landreth, 2001). Art therapies such as visual performances, movement, and music often fall under the umbrella of play therapy.

Play Therapy As A Therapeutic Intervention In Elementary Schools

Words in any language have specific rules of meaning, which often compromises the intent behind the message that is conveyed by the speaker to the listener. Individuals who speak two different languages and who attempt to communicate with one another may find their interaction rather awkward and cumbersome. Lack of a particular language or lack of individual words in a particular language in many instances may limit fluid communication between the speaker and the listener. This lack of a common language or lack of specific words within a shared language may make it difficult for a school counselor and client to communicate.

Play and art therapies are less limited by cultural and linguistic differences between the counselors and clients than are other forms of intervention. This is because all children play. It is for this reason that play therapy is a viable tool to use with children who speak a language other than English (Sandhu, 2001). It appears that the use of non-verbal techniques such as play and art therapies by elementary school counselors can help culturally different children overcome barriers to school success (Cochran, 1996); in particular, barriers pertaining to language differences (Sandhu). Numerous studies have supported the relationship of positive self-esteem with academic achievement, motivation, internal locus-of-control, orientation, persistence, and ability to handle stress. One such study addressed the barrier to education for native Hawaiian students in Western-oriented schools, the Omizos developed an art therapy and treatment program. In their program, students were counseled through self-exploring, self-expressive art activities in a small group. Findings indicated that the art therapy program raised the Hawaiian students' social peer-related and academics school-related self-esteem significantly (Cochran).

Although only a minimal amount of research has been done in the area of child-centered play therapy with children of different cultures, those studies which have been conducted show promising results for its effectiveness. Research done on the effects of child-centered group play sessions on the social-emotional growth of bilingual Puerto Rican preschool children found that child-centered group play facilitated the children's social, representational, and adaptive skills in group settings (Trostle, 1998). Other studies indicated that parents report positive results with their children after having been trained in child-centered play therapy techniques (Landreth, 2001).

The intent of child-centered play therapy with children who speak a language in which the counselor is not fluent is to allow children to feel acceptance and freedom to be whoever they are, thus providing the basis for a culturally sensitive relationship. In child-centered play therapy, the elementary school counselor tries to see the child's point of reference and understand the child's unique characteristics and circumstances without imposing beliefs or solutions on the child. It is exactly this accepting and respectful relationship that makes child-centered play therapy an ideal intervention for children who speak a language in which the counselor is not fluent or who are of a different culture than the elementary school counselor (Landreth, 2001).

Training elementary school counselors to be play therapists. It is both clinically and ethically imperative that elementary school counselors have adequate training and supervised experience in the field of elementary school counseling, multicultural counseling, and in the use of non-verbal counseling techniques such as play therapy. It is an ethical mandate of most professional codes that elementary school counselors practice within the boundaries of their competence (ASCA, 1996). Although the assessment of competence is ambiguous at best, it is nevertheless an obligation for those working with any special population to have adequate training and experience in their chosen field (Landreth, 2001).

The Association for Play Therapy (APT) has established a process for becoming a Registered Play Therapist (RPT) and a Registered Play Therapist-Supervisor (RPT-S). This credentialing serves as evidence that a play therapist or an individual who has been trained in non-verbal counseling techniques and has met the minimal training and

supervised experience requirements (Landreth, 2001). Although it is difficult to find adequate training in non-verbal counseling techniques such as play therapy, elementary school counselor trainees who aspire to work in elementary school settings must take responsibility for their own knowledge and training and must intentionally seek quality training and qualified supervision (Landreth).

Elementary School Counselors' Self-Efficacy

Self-efficacy is defined as people's judgments of their capabilities to organize and execute the courses of action required to attain designated types of performances. Theoretically, self-efficacy is a mediating factor of behavior. Strong levels of self-efficacy are positively correlated with persistence and goal setting, and negatively correlated with anxiety (Bodenhorn, 2001). Assessing self-efficacy can be an important research link to examine questions of performance, especially in the field of counseling. Counselors' perceived self-efficacy has been found to be higher among individuals who had received training in a specific area (Bodenhorn). At the very least, anecdotal data indicates that some training in the form of workshops or lectures has been helpful to elementary school counselors when executing their work (de Leon-Ysnaga, 2000).

There is currently no literature on elementary school counselors' perceived self-efficacy when working with children whose native language is other than English. However, there is extensive literature on counselors' perceived self-efficacy, in general. A dissertation investigation regarding counselor perceived self-efficacy was conducted at the University of New Orleans. This investigation looked at several variables to determine if they had any effect on counselors' perceived self-efficacy (Gray, 2001).

Prior research has also focused on personal and environmental predictors of counselors' perceived self-efficacy (Seymour, 2001). The study also took into account personal and environmental predictors of counselors' perceived self-efficacy. In particular, this study explored elementary school counselors' perceived self-efficacy when counseling children whose native language is other than English.

Theoretical Foundation

There is currently a substantial population of elementary school children who speak a language in which the counselor is not fluent, particularly in certain geographical areas, and there is a dearth of elementary school counselors who speak languages other than the language spoken by the dominant culture, English. Future projections indicate that most school-age children attending public schools will come from diverse cultural, ethnic and /or racial backgrounds. Many of these children will speak a language in which elementary school counselors will not be fluent (Kopala, Esquivel, & Baptiste, 1994). In fact, in many major cities such as New York, Washington, D.C., Chicago, Los Angeles, San Antonio, and Miami, children who speak a language other than the one spoken by the dominant culture make up a majority of the total public school population. Many of these children are recent immigrants whose native language is not English.

The increasing ethnic and racial diversity of U.S. school systems mandates that elementary school counselors possess appropriate levels of knowledge and skills to work with culturally diverse students (Constantine & Yeh, 2001). It seems critically important that elementary school counselors become more prepared to address the concerns of culturally and ethnically different students including those children who speak a language

in which the counselor is not fluent (Holcomb-McCoy, 2001). Therefore, elementary school counselors have the responsibility of helping schools build an inviting and supportive community for these children. This means that they must work with these children on an individual level. Elementary school counselors must monitor their counseling skills to be culturally sensitive and appropriate. They should acquire the knowledge of pertinent groups, develop positive attitudes toward children who speak a language with which they are not fluent, and strengthen their culturally appropriate counseling skills (Sandhu, 2001).

The school setting is the context in which most children who speak a language that is not spoken by the dominant culture would spend their day. School is the place where these children are expected to learn not only academic knowledge but social skills and career-related information. Thus, schools seem to be the most important environment for these children to have direct contact with the mainstream culture. Whether schools have an available support system to help these children adjust, given their transitional and developmental needs, directly affects their adjustment to their new environment. A lack of acceptance by teachers or peers would make immigrant children feel even more alienated than before (Kopala, Esquivel, & Baptiste, 1994).

Specific Issues/Struggles of Elementary Aged Children Who Speak A Language

In Which The Counselor Is Not Fluent

As the demographics of this nation change, the number of immigrants who are at risk for serious emotional distress will continue to rise. Elementary school counselors can no longer afford to ignore the emotional needs of children who speak a language in

which the counselor is not fluent. Elementary school counselors can take the lead by acting as advocates for these individuals, providing direct services, and by designing, implementing, and coordinating programmatic interventions that promote the mental health of children who speak different languages and come from different countries. (Kopala, Esquivel, & Baptiste, 1994). First and foremost, elementary school counselors need to educate themselves about issues that are specific to immigrant children who move to the United States and whose first language is other than English.

When children encounter a new country and culture, a new school system, and new teachers and students, it may be difficult for them to manage their feelings. Through classroom activities, small groups, or individual sessions, elementary school counselors can assess the needs of individuals and can assist these children in dealing with acculturative stress which results from migration and acculturation (Kopala, Esquivel, & Baptiste, 1994).

Children who speak a language in which the counselor is not fluent often find it difficult to manage their daily lives, because of their overall inability to communicate and understand the culture's dominant language. Such children are troubled by a number of different stressors including, but not limited to (a) communication difficulty between teachers and troubled, culturally different students; (b) difficulty learning cognitive materials and developing cognitive skills; (c) difficulty fitting in socially; (d) difficulty assimilating into the majority culture and other situational factors; and (e) low self esteem (Cochran, 1996). These children have difficulty with day to day activities and demands because of their inability to understand others and be understood. This difficulty with managing their daily lives often leads to personal, academic, and social mental health and

emotional problems that may require some form of intervention, which often involves the elementary school counselor. Elementary school counselors need to be prepared to face numerous barriers that exist when providing counseling services for children who speak a language which is not spoken by the dominant culture (a) culturally biased assessment procedures, (b) the language utilized within the counseling session, (c) a reliance on less traditional forms of counseling or a reliance on the family for support, (d) cultural and ethnic differences between the potential client and service providers (Esquivel & Keitel, 1990).

Ethical Issues When Counseling Children

Who Speak A Language In Which The Counselor Is Not Fluent

Ethical guidelines for elementary school counselors. The ethical guidelines followed by most elementary school counselors are the Ethical Standards for School Counselors adopted by the American School Counselor Association and the Ethical Standards of the American Counseling Association (ACA, 1995). The preamble to the American School Counselor Association (ASCA) states that ASCA is a professional organization whose members have a unique and distinctive preparation, grounded in the behavioral sciences, with training in counseling skills adapted to the school setting. The school counselor assists in the growth and development of each individual and uses his/her specialized skills to ensure that the rights of the counselee are properly protected within the structure of the school program (ASCA, 1998).

The ethical standards put forth by ASCA are divided according to the counselor's responsibilities with students, parents, and other professionals; the school community; the counseling profession; and oneself. By aligning these different responsibilities enumerated in the ASCA code with guidelines from the ethical standards of the American Counseling Association, school counselors develop a broader understanding of how their profession views the interface between ethical behavior and professional practice (Schmidt, 1999). With respect to the multicultural competence of elementary school counselors, the American School Counselor Association (ASCA) adopted a position statement encouraging school counselors to "take action to ensure that students of culturally diverse backgrounds have access to appropriate services and opportunities which promote the maximum development of the individual" (ASCA, 1993). Although the position statement does not directly address the multicultural competence of elementary school counselors, the statement indicates that elementary school counselors should have the "skills necessary to foster increased awareness and understanding of cultural diversity existing in the school community" (Holcomb-McCoy, 2001). There are several different ethical questions that come to mind when elementary school counselors are asked to counsel children who speak a language in which the counselor is not fluent. Are school counselors working outside the boundaries of their competency if they are not multiculturally aware? Are school counselors being unethical if they do not share a common language with the clients whom they serve? (ASCA, 1996).

Multicultural counseling competence refers to counselors' attitudes or beliefs, knowledge, and skills in working with individuals from different cultural (e.g., racial, ethnic, gender, social class, sexual orientation, and language) groups (Lee, 1997).

Elementary school counselors who do not have sufficient training in cross-cultural counseling may lack the requisite skills to work with culturally diverse clients including children whose native language is other than English (Constantine & Yeh, 2001).

Literature regarding multicultural counseling competence has focused on three main dimensions: (a) awareness of one's own personal worldviews and how one is the product of cultural conditioning, (b) knowledge of the worldviews of culturally different clients, and (c) skills necessary for work with culturally different clients (Holcom-McCoy, 2001).

It is presumed that counselors who acquire competence in these areas will possess the characteristics and understand the strategies necessary to effectively counsel culturally different clients including those who speak a language in which the counselor is not fluent (Holcomb-McCoy, 2001).

Assuming that elementary school counselors have adequately acquired the first two dimensions of multiculturally competent counseling, it does not necessarily mean that they are prepared to counsel children who speak a language with which they are not fluent. Elementary school counselors who are not able to verbally communicate with children who speak a different language may not have the skills to effectively provide counseling for such children. Therefore, elementary school counselors who work with children who speak a different language, may be providing services that extend beyond their scope of practice. Consequently, elementary school counselors must be cognizant of the influence of languages and culture when counseling; providing educational and vocational assessments; evaluating academic progress; consulting with teachers, parents, and families; and conceptualizing cases (Constantine & Yeh, 2001).

Just as ASCA has adopted a position statement regarding multicultural competence of school counselors, the American Counseling Association (ACA) also addresses this issue in their Code of Ethics and Standards of Practice. In fact, the preamble to the ACA Code of Ethics and Standards of Practice states, "The American Counseling Association is an educational, scientific and professional organization whose members are dedicated to the enhancement of human development throughout the life span. Association members recognize diversity in our society and embrace a cross-cultural approach in support of the worth, dignity, potential, and uniqueness of each individual" (ACA, 1995).

ACA has established several standards of practice to which all counselors must adhere in order for their work to be considered ethical. Counselors who fail to meet these standards may be violating ethical standards and working outside the bounds of their competency. The ACA Code of Ethics and Standards of Practice states that counselors will actively attempt to understand the diverse cultural backgrounds of the clients with whom they work. This includes, but is not limited to, learning how the counselor's own cultural/ ethnic/ racial identity impacts his/her values and beliefs about the counseling process (ACA, 1995). It also states that counselors are aware of the intimacy and responsibilities inherent in the counseling relationship, maintain respect for clients, and avoid actions that seek to meet their personal needs at the expense of clients. That counselors are aware of their own values, attitudes, beliefs, and behaviors and how these apply in a diverse society, and avoid imposing their values on clients (ACA, 1995).

It would stand to reason that an elementary school counselor who is working with a child who speaks a language in which the counselor is not fluent may be working

outside the ethical standards and practices of the ACA code of ethics and standards of practice. Such counselors could potentially impose their own language on the child, thus satisfying personal needs at the expense of the child's needs. While there is nothing inherently sinister about elementary school counselors who attempt to communicate with children in the language of the dominant culture, it is at best ineffective and does not meet the needs of the client as required by the ACA code of ethics and standards of practice.

An alternative solution to school counselors imposing their native language on their clients may be to have a translator when working with a child who speaks a language in which the counselor is not fluent. However, confidentiality may be compromised if this were to become common practice. The ACA Code of Ethics and Standards of Practice states that counselors are to respect their clients' right to privacy and avoid illegal and unwarranted disclosures of confidential information. ACA also contends that when counseling is initiated and throughout the counseling process as necessary, counselors inform clients of the limitations of confidentiality and identify foreseeable situations in which confidentiality must be breached (ACA, 1995). It would stand to reason that involving a translator in the counseling process may compromise counselor-client confidentiality, but may be a logical alternative, given the situation.

In this case, children who speak a language in which the counselor is not fluent would have to be informed of the possible risk of their confidentiality being compromised and as a result may not fully disclose or withhold vital information in counseling because more than one individual is now privy to that information. It could also be argued that the use of a translator when counseling within a school system may be

unacceptable without the parent's or guardian's consent. The ACA Code of Ethics and Standards of Practice state that when counseling clients who are minors or individuals who are unable to give voluntary, informed consent, parents or guardians may be included in the counseling process as appropriate. Counselors are expected to act in the best interests of clients and take measures to safeguard confidentiality (ACA, 1995). Elementary school counselors must consult with other professionals who deal with similar situations when they find themselves in an ethical dilemma that might hinder the counseling relationship and ultimately the counseling process.

Multiculturalism and Elementary School Counseling

As the percentage of ethnic minority students in schools continues to increase, school counselors and counselors-in-training must broaden their cultural knowledge and develop new strategies that are responsive to the complex challenges that these students face (Herring, 1997). This increasingly culturally pluralistic society has led to the conceptualization of multicultural theories and models within the counseling profession. Multicultural counseling considers not only the personality dynamics but also the cultural backgrounds of both counselor and client in creating a therapeutic environment in which these two individuals can purposefully interact. Multicultural counseling, therefore, takes into consideration the cultural background and individual experiences of diverse clients and how their psychosocial needs might be met through counseling. Multiculturalism provides a broad conceptual framework for counseling and its practice (Lee, 1997). It is recommended that when counseling children from diverse backgrounds the counselor make every effort to understand the client's belief system as well as symptoms, determine

the degree of acculturation and experiences, and learn more about the roles of economics and institutional racism, linguistic differences, or other discriminatory factors on the client's beliefs and behaviors (Arredondo, 1996).

According to Lee's (1997) definition of multicultural counseling, elementary school counselors must take into consideration the cultural background and individual experiences of diverse clients, including children who speak a language in which the counselor is not fluent. Language is a major component of one's culture. The words that exist in a particular language help to define the culture in which it exists. It also helps to define the individuals in the culture that uses the language.

Elementary school counselors may find themselves working with children whose native language is other than their own language which is often English. The student's language is often not English. These elementary school counselors and children who do not speak English may find their interaction rather awkward and cumbersome as the lack of a particular language or lack of individual words in a particular language may limit fluid communication between the speaker and the listener. This may make it difficult for elementary school counselors and their child clients to communicate. As such, school counseling services that incorporate non-verbal communication or accommodate for language barriers between the school counselor and the client seem necessary and more therapeutic for children whose native language is other than English. Play therapy and other creative therapies may be the key to providing effective counseling services for immigrant children who attend private or public elementary schools and whose first language is other than that of the school counselor.

Training Elementary School Counselors to Work With Children Who Speak A Language in Which the Counselor is Not Fluent

One answer to the dilemma of not being able to effectively counsel children who speak a language in which the counselor is not fluent is to train elementary school counselors to use counseling techniques that are multiculturally sensitive. Elementary school counselors must have access to training that includes specific counseling theories and non-verbal techniques that account for developmental needs and special issues faced by culturally diverse children and families. Consequently, elementary school counselors are in need of training in non-verbal and play therapy techniques. These approaches have proven to be effective modes of counseling with elementary age children who speak a language in which the counselor is not fluent. This is because verbal communication is not necessary for complete communication to occur between the counselor and client.

It might be advisable that counselor education programs implement new courses in play therapy for elementary school counselors. The ACA codes of ethics and standards of practice state that “counselors recognize the need for continuing education to maintain a reasonable level of awareness of current scientific and professional information in their fields of activity.” Furthermore, ACA recommends that counselors, counselor educators and supervisors take steps to maintain competence in the skills they use, remain open to new procedures, and keep current with the diverse and/ or special populations with whom they work (ACA, 1995).

Statistical reports have indicated that by 2050 our society will become more diverse and is likely to be composed predominately by people of color who speak a language other than English (Holcomb-McCoy, 2001). Therefore, it would behoove elementary school counselors to act now and to consider new procedures (the acquisition of specialized training in non-verbal counseling techniques such as play therapy), and keep current with the diverse and/or special populations with whom they work.

As the ACA codes of ethics and standards of practice state that counselors must practice in specialty areas new to them only after appropriate education, training, and supervised experience. While developing skills in new specialty areas (such as the acquisition of specialized training in play therapy and other creative techniques), counselors take steps to ensure the competence of their work and to protect others from possible harm. ACA codes also encourage counselors to continually monitor their effectiveness as professionals and take steps to improve when necessary. Additional training in play therapy techniques has become a means through which elementary school counselors and other clinicians who work with children and families can improve their skills. Counselors are to take reasonable steps to consult with other counselors or related professionals when they have questions regarding their ethical obligations or professional practice (ACA, 1995). Case consultation and supervision with Registered Play Therapists and Registered Play Therapist- Supervisors would clearly serve as an avenue for case consultation and advising.

In accordance with the ACA Code of Ethics and Standards of Practice which indicates that counselors accept employment only for positions for which they are qualified by education, training, supervised experience, state and national professional

credentials, and appropriate professional experience, more and more specialized areas within counseling continue to emerge. Likewise, more and more school administrators are beginning to hire school counselors who are highly qualified, trained, and competent as counselors at a specific grade level (elementary, middle, and high) (ACA, 1995). As such, supervisors of elementary schools will increasingly give preference to hiring elementary school counselors who have specialized training in non-verbal techniques and play therapy. After all, the duty of counselors and counseling supervisors is to provide therapeutic services to clients. By demanding that elementary school counselors be trained adequately to work effectively with a diverse population of students who pose a multitude of developmental and multicultural needs, supervisors and administrators are ensuring that children receive the assistance they need and deserve. In turn, children who speak a language in which the counselor is not fluent would receive counseling services that are more conducive to their needs.

CHAPTER THREE

METHODOLOGY

This chapter includes a detailed discussion of the purpose of this investigation, research questions and hypotheses, data collection and analysis methods, and a rationale for the use of such methods in the study. Dynamics related to research participants and sampling procedures, instrumentation, validity and reliability, and implications of the findings of this investigation are also presented.

Purpose of the Study

To date, researchers have failed to explore elementary school counselors' perceptions of self-efficacy when counseling children who speak a language in which the counselor is not fluent. While a review of existing literature revealed research on the perceived efficacy of classroom teachers who work with children whose native language is other than English, researchers have neglected to explore the process of counseling with elementary age children who do not speak the same language as their counselors. As more school counselors are faced with clients for whom English is a second language, it becomes evident that school counselors be skilled and knowledgeable about specific techniques that do not rely on traditional "talk therapy." Therefore, this investigation

examined the amount of training that elementary school counselors received, along with their involvement in professional associations (Association for Play Therapy/American School Counselor Association), cultural background, and counselor perceived self-efficacy. The purpose of this study was to examine how specific variables relate to the perceived self-efficacy of elementary school counselors when counseling children who speak a language in which the counselor is not fluent.

Research Questions and Hypotheses

Research questions and hypotheses for this study include the following:

Research Question #1: Is there a relationship between (a) amount/level of training in non-verbal counseling techniques, (b) amount/level of training in multicultural counseling, (c) linguistic differences between counselor and child, (d) years of counseling experience, (e) membership in the Association for Play Therapy, (f) membership in the American School Counselor Association, (g) counselor's fluency with languages other than English, (h) gender of the counselor, (i) grade level in which the counselor works and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #1.1: There is a significant relationship between the amount/level of training in non-verbal counseling techniques and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypothesis #1.2: There is a significant relationship between the amount/level of training in multicultural counseling and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypothesis #1.3: There is a significant relationship between linguistic differences and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypothesis #1.4: There is a significant relationship between years of counseling experience and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypotheses #1.5: There is a significant relationship between membership in the Association for Play Therapy and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypothesis #1.6: There is a significant relationship between membership in the American School Counselor Association and frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent.

Hypothesis #1.7: There is a significant relationship between the counselor's fluency with languages other than English and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypotheses #1.8: There is a significant relationship between gender of the counselor and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Hypotheses #1.9: There is a significant relationship between the grade level in which the counselor works and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent.

Research Question #2: Is there a relationship between frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy?

Hypotheses #2.1: There is a significant relationship between frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy.

Research Question #3: Is there a difference in (a) the frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy between multilingual counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #3.1: There is a significant difference in the frequency of use of non-verbal counseling techniques between multilingual counselors and English only speaking

counselors when counseling with children who speak a language in which the counselor is not fluent.

Hypotheses #3.2: There is a significant difference in counselor perceived self-efficacy between multilingual counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent.

Research Question #4: Is there a difference in (a) the frequency of use non-verbal counseling techniques and (b) counselor perceived self-efficacy between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not received training in non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #4.1: There is a significant difference in the frequency of use of non-verbal counseling techniques between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not received training in non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent.

Hypotheses #4.2: There is a significant difference in counselor perceived self-efficacy between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not

received training in counseling techniques when counseling children who speak a language in which the counselor is not fluent.

Research Question #5: Is there a difference (1) in the frequency of use of non-verbal counseling techniques and (2) counselor perceived self-efficacy between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #5.1: There is a significant difference in the frequency of use of non-verbal counseling techniques between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling when counseling children who speak a language in which the counselor is not fluent.

Hypotheses #5.2: There is a significant difference in counselor perceived self-efficacy between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling when counseling children who speak a language in which the counselor is not fluent.

Research Question #6: Is there a difference (a) in the frequency of use of non-verbal counseling techniques and (b) perceived counselor self-efficacy among counselors, based on the years of counseling experience that the counselor has

when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #6.1: There is a significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the years of counseling experience that the counselor has when counseling children who speak a language in which the counselor is not fluent.

Hypotheses #6.2: There is a significant difference in counselor perceived self-efficacy among counselors, based on the years of counseling experience that the counselor has when counseling children who speak a language in which the counselor is not fluent.

Research Question #7: Is there a difference in the (a) frequency of use of non-verbal counseling techniques and (b) perceived counselor self-efficacy among counselors, based on the counselor's gender when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #7.1: There is a significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the counselor's gender when counseling children who speak a language in which the counselor is not fluent.

Hypotheses #7.2: There is a significant difference in counselor perceived self-efficacy among counselors, based on the counselor's gender when counseling children who speak a language in which the counselor is not fluent.

Research Question #8: Is there a difference in the (a) frequency of use of non-verbal counseling techniques and (b) perceived counselor self-efficacy among counselors, based on the grade level of the children with which the counselor works when counseling with children who speak a language in which the counselor is not fluent?

Hypotheses #8.1: There is a significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the grade level of the children with which the counselor works when counseling children who speak a language in which the counselor is not fluent.

Hypotheses #8.2: There is a significant difference in counselor perceived self-efficacy among counselors, based on the grade level of the children with which the counselor works when counseling children who speak a language in which the counselor is not fluent.

Research Question #9: When counseling with children who speak a language in which the counselor is not fluent, (a) frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy is most likely to be predicted by (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) counselor's fluency with languages other than English, (6) gender of the counselor, or (7) grade level in which the counselor works?

Hypotheses #9.1: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the amount/level of training in non-verbal counseling techniques.

Hypotheses #9.2: When counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the amount/level of training in non-verbal counseling techniques.

Hypotheses #9.3: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the amount/level of training in multicultural counseling.

Hypotheses #9.4: When counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the amount/level of training in multicultural counseling.

Hypotheses #9.5: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by linguistic differences between counselor and child.

Hypotheses #9.6: When counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by linguistic differences between counselor and child.

Hypotheses #9.7: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by years of counseling experience.

Hypotheses #9.8: When counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by years of counseling experience.

Hypotheses #9.9: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the counselor's fluency with languages other than English.

Hypotheses #9.10: When counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the counselor's fluency with languages other than English.

Hypotheses #9.11: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the gender of the counselor.

Hypotheses #9.12: When counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the gender of the counselor.

Hypotheses #9.13: When counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the grade level in which the counselor works.

Hypotheses #9.14: When counseling with children who speak a language in which the counselor is not fluent, the grade level in which the counselor works helps to predict the degree of counselor perceived self-efficacy.

Participants

Participants for this study included members of the Association for Play Therapy (APT) and members of the American School Counselor Association (ASCA), who were currently counseling children within the United States. The states of Arizona, California, Colorado, Florida, Illinois, Louisiana, Nevada, New Mexico, New York, and Texas were targeted for this investigation. These states were chosen because they have a high demographic concentration of children whose native language is other than English (U.S. Census, 2000). Therefore, in these states there was a greater likelihood that I would acquire participants who had counseled children who speak a language with which they were not familiar.

As Hinkle, Wiersma, and Jurs (1998) have noted, the question of an appropriate sample size in well-planned investigations is crucial. They outlined four factors which must be considered to determine the appropriate sample size: (a) level of significance, (b) power of the test, (c) effect size, and (d) number of groups in the sample. The following discussion pertains to each of these factors.

The level of significance, or alpha (α), was set at the .05 level a priori, based on the possibility of making a Type I error. Hinkle, Wiersma, and Jurs (1998) stated that setting alpha at the .05 level is standard convention for behavioral science research. The power of a test is based on the probability of rejecting the null hypothesis when it is false. Thus, power is a major concern because it represents "the degree to which we can detect the treatment differences we expect and the chances that others will be able to duplicate our findings when they attempt to repeat our experiments" (Keppel, 1991, p.68). Using the mathematical formula $1 - \beta$, where a desired 4 to 1 ratio exists between α and β

(Hinkle, Wiersma, & Jurs, 1998), the desired power for this investigation was .80 ($1 - 4(.05) = .80$).

The effect size, or the degree to which a phenomenon is present, pertains to the estimated effect size of a given population (Cohen, 1988). Based on the bulk of previous research indirectly relating the independent variables and the dependent variable in this study, a large effect size of .75 was selected. Hinkle, Wiersma, and Jurs (1998) estimated that the minimum sample size for a treatment effect, with alpha set at .05 and power of .80, should be an effect size of .75. Professional school counselors who are members of the Association for Play Therapy (APT) or the American School Counselor Association (ASCA) were used for this investigation. In this investigation, 300 names were selected from each group, making a total of 600 potential research participants. Therefore, the survey instrument was sent to a random sample of 300 APT members and 300 ASCA members. The instrument was proportionately distributed throughout the states of Arizona, California, Colorado, Florida, Illinois, Louisiana, Nevada, New Mexico, New York, and Texas.

Variables

Independent Variables

Independent variables associated with this study included: (a) amount/level of training in non-verbal counseling techniques, (b) amount/level of training in multicultural counseling, (c) linguistic differences between counselor and child, (d) years of counseling experience, (e) membership in the Association for Play Therapy, (f) membership in the American School Counselor Association, (g) counselor's fluency with languages other

than English, (h) gender of the counselor and (i) grade level in which the counselor works.

Dependent Variables

The dependent variables for this investigation pertained to school counselors' frequency of use of non-verbal counseling techniques when counseling children who speak a language with which the counselor was not familiar and counselor perceived self-efficacy.

Instrumentation

Demographic Data

Demographic information considered in this study was collected with a questionnaire that was completed at the beginning of the survey. Information specific to the age, gender, ethnic/ racial background, years of counseling experience, membership affiliation, training experiences specific to play therapy techniques and multicultural counseling, work setting, and geographic location was collected for each participant. This information was utilized throughout data analysis in order to address research questions that pertained to participant characteristics.

Description of The Salgado School Counseling Techniques Inventory (SSCTI)

The Salgado School Counseling Techniques Inventory (SSCTI) was created to determine school counselors' frequency of use of non-verbal techniques when counseling children within the public school systems of the United States. It consists of 31 Likert

items, which represent non-verbal counseling techniques commonly used by school counselors.

Description of the Counselor Self-Efficacy Scale (CSES)

The Counselor Self-Efficacy Scale (CSES) (Melchert, Hays, Wiljanen, & Kolocek, 1996) is an instrument that was created to evaluate the perceived self-efficacy of counselors and counseling psychologists. It consists of 20 Likert items, which were designed to evaluate clinicians' confidence in their abilities. Consent to utilize the CSES was attained from Melchert on December 17, 2002 (appendix E).

For the purposes of this investigation, the aforementioned instruments were chosen because of their relevance to this topic. The items from the demographic questionnaire were used to gather demographic information from research participants. The items from the SSCTI were used to gather information regarding elementary school counselors' frequency of use of non-verbal counseling techniques. The items from the CSES were used to gather information regarding counselors' perceptions of self-efficacy. Validity, reliability, and scoring information regarding the instruments is addressed in the following subsections.

Validity and Reliability Data for the Combined use of the SSCTI and the CSES

There is no conclusive face validity for the SSCTI or the combined use of the SSCTI and the CSES at this point. The instruments, however, do appear to measure what they purport to measure. There is currently no conclusive evidence of the reliability of the SSCTI or the combined use for the SSCTI and the CSES. There is however, face

validity and reliability for the Counselor Self-Efficacy Scale (CSES) (Melchert, Hays, Wiljanen, & Kolocek, 1996). Three pilot studies, were utilized to ascertain some level of verification that the instruments were clear. The data obtained from the administration of the SSCTI and the CSES were analyzed for construct validity and reliability. Changes to the instrument deemed appropriate on the basis of these analyses were made.

Pilot Studies

Three pilot studies were conducted in preparation for this investigation. Both pilot studies included 23 participants who were enrolled in an Advanced Play Therapy course at the University of New Orleans. All participants were asked to volunteer and were administered the demographics survey, the SSCTI, and the CSES. This initial pilot study was administered for the purposes of receiving feedback on the demographics survey and the SSCTI's ease of use and clarity. These participants, along with this investigation's chair and methodologist, provided feedback on the demographics survey and the SSCTI instrument. Consequently, the demographics survey and the SSCTI were modified.

In the second pilot study, participants from the aforementioned graduate course were administered the modified demographics survey, the modified SSCTI, and the original CSES. The focus of this pilot study was use and clarity. Additionally, participants' responses were assessed for relevant trends. No identifiable trends were determined, but it was thought that this was due to the small sample size and homogeneity of respondents. In general, the lack of findings in these two preliminary pilot studies may also be attributed to the region of the city and state in which the pilot

studies were administered. In a dialogue that ensued after the administration of each pilot study, several participants reported not having any significant contact with children who spoke a language in which they were not fluent. It is thought that if this pilot study were to have been administered in another region of the country such as in the states of Arizona, California, Colorado, Florida, Illinois, Louisiana, Nevada, New Mexico, New York, or Texas, that perhaps some identifiable trends would have resulted.

A third pilot study was administered to counseling students, counselors, and counselor educators who were involved in school counseling and attended one of two other counseling graduate programs at other universities located in the southern region of the United States. These participants were given modified versions of the demographics, SSCTI, and the CSES surveys to complete. Responses were assessed in order to illuminate potential problems that might have surfaced during this investigation. Statistical analysis was performed on this data despite the small number of participants. This was done in order to ascertain if any notable trends could be determined with regard to this investigation prior to the actual study having been implemented.

Data Collection

Survey Research

This investigation was conducted by utilizing survey research methods. A sample of counselors who were either members of the Association for Play Therapy or members of the American School Counselor Association were administered the demographics survey, the SSCTI, and the CSES. This was done to gather data and make inferences regarding characteristics, attitudes, or behaviors of elementary school counselors when

counseling children who speak a language in which the counselor is not fluent (Babbie, 1990). Survey research was chosen for this investigation because of its rapid turnaround time and the opportunity for respondents to complete the survey at their leisure (Babbie, 1990; Creswell, 1994; Tashakkori & Teddlie, 1998).

Prior to data collection, a letter (appendix A) had been submitted to the University of New Orleans (UNO) Human Subject Review Board requesting permission to conduct the proposed study. The board was provided with copies of a cover letter (appendix B), and the combined instrument-survey material (appendices D and F). Permission was granted to conduct the investigation on December 17, 2002. Upon approval of the dissertation committee, I contacted the Association for Play Therapy as well as the American School Counseling Association to gain access to mailing lists of members located in the states that had been pre-selected. Using a random table, 300 names were selected from each mailing list, for a total of 600 surveys. Of the 600 surveys, 205 were returned, but only 185 usable surveys were successfully completed and returned for power requirements to be satisfied and for the generalizability of results.

Survey packets contained a cover letter (appendix B), which outlined the proposed investigation and requested participation. Each packet also contained the combined instrument survey (the demographics survey, the SSCTI and the CSES) and a self-addressed stamped envelope to assist participants in returning completed surveys. This process was utilized to ensure the anonymity of research participants and to help maintain participants' confidentiality. One week after the initial mailing, a follow-up postcard was sent to remind participants about surveys and request that they complete and return surveys as soon as possible, if they had not already done so.

Participation in this study was voluntary and anonymous. As each survey was received in the mail, items were numerically coded to ensure accuracy and provide future reference in data analysis.

Data Analysis

Data analysis procedures for this study included reporting demographic information and descriptive statistics, correlation and ANOVA procedures for each hypothesis, and a multiple regression analysis using the stepwise solution. All statistical procedures for this study were performed with the SPSS 11.0 statistical package.

The conceptual model presented in Chapter 2 shows the hypothesized relationship among the variables tested. A Pearson-Product Moment correlation procedure was utilized to calculate each of the variables in research question number one: (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) membership in the Association for Play Therapy, (6) membership in the American School Counselor Association, (7) counselor's fluency with languages other than English, (8) gender of the counselor, and (9) grade level in which the counselor works; to determine the relationship between each of the independent variables and the two dependent variables (frequency of use of non-verbal counseling techniques and counselor perceived self-efficacy) when counseling children who speak a language in which the counselor is not fluent.

A Pearson Product Moment correlation was also used to calculate participants' frequency of use of non-verbal counseling techniques when counseling with children who

speak a language in which the counselor is not fluent and counselor perceived self-efficacy.

An analysis of variance (ANOVA) was conducted to analyze group differences for each of the hypotheses in research questions three through eight. ANOVAs were computed to compare means between scores attained on the SSCTI and the CSES.

A multiple regression analyses was used to answer research question nine and to predict the effect that (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) counselor's fluency with languages other than English, (6) gender of the counselor, and (7) grade level in which the counselor works had on the frequency of use of non-verbal counseling techniques. It was also used to determine which of the aforementioned variables was the best predictor for frequency of use of non-verbal counseling techniques.

A second multiple regression analysis was conducted with data from research question nine to predict the effect that (a) amount/level of training in non-verbal counseling techniques, (b) amount/level of training in multicultural counseling, (c) linguistic differences between counselor and child, (d) years of counseling experience, (e) counselor's fluency with languages other than English, (f) gender of the counselor, and (g) grade level in which the counselor works had on counselor perceived self-efficacy. Likewise, this test was used to determine which of the aforementioned variables was the best predictor for counselor perceived self-efficacy.

CHAPTER FOUR

RESULTS

Introduction

The purpose of this study was twofold: (a) to determine if there was a relationship between an elementary school counselor's frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent and counselor training, experience, and other characteristics and (b) to determine if there was a relationship between an elementary school counselor's perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent and counselor training, experience, and other characteristics. This chapter includes results of the analysis of data collected in this investigation. A section that describes research participants is followed by a detailed discussion of research questions, hypotheses that pertain to each question, and statistical results from the analysis of research hypotheses.

Description of the Sample

Participants for this investigation were elementary school counselors. In order to access counselors who work primarily in the elementary school setting, 600 people were

chosen from a list of members of the American School Counselor Association (ASCA) and the Association for Play Therapy (APT). Survey packets containing the researcher-constructed Salgado School Counseling Techniques Inventory (SSCTI) and the Counselor Self-Efficacy Scale (CSES), along with a researcher-constructed personal background and demographics questionnaire, were mailed to 600 potential participants who currently practice in Arizona, California, Colorado, Florida, Illinois, Louisiana, Nevada, New Mexico, New York and Texas. Participants were specifically chosen from these states due to information obtained from the 2000 U.S. Census, which indicated that diverse populations were more likely to reside in these ten states.

Of the 600 survey packets that were mailed to elementary school counselors, 300 were mailed to members of ASCA and 300 to members of APT. A total of 205 surveys were returned. Due to incomplete demographic information or failure to complete the survey instruments, 20 surveys were deemed unusable. They were therefore removed from data analysis procedures. Of the 205 surveys returned, 185 were considered to be usable, thus making the overall response rate approximately 31%. This is considered to be typical for this type of survey research (Gay & Airasian, 2000). Data from the useable surveys were entered into SPSS 11.0. The frequency of usable surveys by professional affiliations is included in Table 1.

Table 1Frequency Distribution of Usable Surveys by Association

Association	Frequency	Percent
ASCA		
ASCA member	105	56.8%
Not an ASCA member	80	43.2%
APT		
APT member	92	49.7%
Not an APT member	93	50.3%
Total	185	100.0%

N = 185

Of the usable surveys that were returned, a little over half of the participants (approximately 57%) indicated that they were ASCA members, while almost half (49.7%) indicated that they were APT members.

Demographic Characteristics

Research participants were asked to respond to questions designed to solicit demographic information related to gender, age, ethnicity, and other personal characteristics. Participants were also asked a question that pertained to their language fluency. Table 2 illustrates results that pertain to the demographic makeup of those who participated in this investigation.

Table 2Frequency Distribution of Demographic Characteristics

Characteristic	Frequency	Percent
Sex		
Female	163	88.1
Male	22	11.9
Age		
22-34	43	23.2
35-64	138	74.6
65 +	4	2.2
Ethnicity		
African-American	5	2.7
Arab-American	2	1.1
Asian-American	4	2.2
Caucasian	147	79.5
Hispanic	17	9.2
Native American	1	0.5
Pacific Islander	0	0.0
Biracial/ Multiracial	2	1.1
Other	7	3.8
Fluency in Non-English Language		
Yes	52	27.6
No	133	72.4

N = 185

Females comprised the majority of all participants (approximately 88%). Participants between ages 35-64 made up the largest portion of the sample (almost 75%), and those between ages 22-34 made up another 23% of the overall population of participants who took part in this study. As indicated in Table 2, participants of Caucasian descent comprised the majority of the sample (approximately 79%), while 21% of the participants identified themselves with other ethnic groups. Of 185 participants, nearly one third (28%) stated that they speak another language in addition to English.

Professional Characteristics

Participants were asked to respond to questions about their professional characteristics in terms of education and employment. For example, participants were asked to indicate the: (a) highest degree received, (b) number of years of counseling experience, (c) degree of training in multicultural counseling and play therapy, (d) professional membership affiliation, (e) school setting in which the counselor works, (f) languages spoken by the counselors and (g) degree to which the counselor relied on verbal counseling techniques. Participants were also asked to indicate how often they were faced with counseling a client who spoke a language in which they were not fluent. Results of professional characteristics are described in Table 3.

Table 3

Frequency Distribution of Professional Characteristics

Characteristic	Frequency	Percent
Education		
Doctoral	3	1.6
Masters	154	83.2
Bachelors	28	15.1
Employment		
Pre-K – 2 nd	48	25.9
3 rd – 5 th	101	54.6
6 th – 8 th	36	19.5
Experience		
0-2 years	10	7.6
3-7 years	68	36.8
8-12 years	40	21.6
13 + years	67	34.0
Training		
Play Therapy	133	71.9
Multicultural Counseling	134	72.4

N = 185

The majority of participants in this investigation (approximately 83%) reported having a Masters degree, while approximately 15% had received a Doctoral degree. Over half of the participants (around 55%) work with children in grades 3-5, while another 26% work with children in grades Pre-K – 2. Participants had approximately 10 years of counseling experience. A rather large proportion of participants (approximately 72%) had undergone specialized training in both play therapy and multicultural counseling.

When participants were asked about how frequently they counseled children who speak a language in which they are not fluent, the majority of responses indicated that they had at least minimal exposure to counseling children who speak a language in which they are not fluent (approximately 38% indicated “rarely”, while 27% responded “sometimes” and 14% said “frequently”). These percentages are not surprising in that they correspond to the literature and the 2000 U.S. Census which indicated that children who speak a language other than English are increasingly attending schools within the United States.

Summary of Participant Pool

In an attempt to present a global picture of participants in this investigation the following summary is provided. Participants’ ranged in age from 25-74 years old; on the average they were approximately 47. Most participants held a Masters degree in Counseling. Participants had generally held their degrees for approximately 11 years, while the range was 1-46 years. Likewise, participants generally had approximately 10 years of counseling experience, and over half worked with children in grades 3 –5. A large portion of participants (around 72%) had training in play therapy and multicultural techniques.

Frequency Distribution of Non-Verbal Counseling Techniques

As part of the survey packet, participants completed the Salgado School Counseling Techniques Inventory (SSCTI). The SSCTI consists of 31 Likert scale items ranging from a “1” (Never) to a “5” (Always). A score of “1” reflects a failure to utilize non-verbal counseling techniques (play therapy) when counseling children who speak a language in which the counselor is not fluent, and a score of “5” reflects the always utilizing non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent. Descriptive statistics for SSCTI scores as they relate to all relevant background characteristics and demographics are presented in Table 4.

Table 4Descriptive Statistics for SSCTI

(1 = Never, 2 = Rarely, 3 = Sometimes, 4 = Often, 5 = Always)

Non-Verbal Technique	N	Mean	Standard Deviation
1 Use of art/ drawings*	185	3.5027	.98425
2 Use materials that represent diversity*	185	3.3243	1.29493
3 Use dolls and dollhouses	185	2.9784	1.41789
4 Use puzzles	185	2.3946	1.14729
5 Use non-structured games*	185	3.1676	1.06782
6 Use of sand tray	185	2.5135	1.51839
7 Use structured games*	185	3.1081	1.02108
8 Use symbol exploration	185	2.4432	1.18792
9 Use objects used in everyday activities	185	2.7027	1.33646
10 Use puppets*	185	3.1838	1.25055
11 Use photographs and pictures	185	2.8162	1.77199
12 Set non-verbal limits	185	2.9838	1.28738
13 Use pencils, markers, and crayons*	185	3.7946	1.05859
14 Use collages	185	2.3568	1.02802
15 Use an inflatable punching bag	185	2.0054	1.34122
16 Use building toys	185	2.9459	1.28423
17 Use crafts projects	185	2.8811	1.16885
18 Use paints and brushes	185	2.6216	1.28010
19 Use clay with and without water	185	2.7514	1.26955
20 Use toys (ie. cars, kitchen utensils)*	185	3.0703	1.42586
21 Use construction supplies	185	2.8108	1.34403
22 Use musical instruments	185	2.0000	1.19782
23 Use sports/ physical activity equipment	185	2.2811	1.11654
24 Use rope	185	1.7243	1.11057
25 Use masks and hats	185	2.2595	1.35443
26 Use play money	185	2.4595	2.73657
27 Observation of motor skill development *	185	3.7514	1.25231
28 Observation of materials used by child*	185	4.1622	1.13045
29 Observation of facial expressions*	185	4.6432	.84845
30 Observation of specific behaviors*	185	4.5514	.83328
31 Exploration of themes*	185	4.4649	.91492
Total SSCTI	185	2.9888	.74304

N = 185

Note. An asterisk (*) denotes $M > 3.0$, that is the mean score for a particular non-verbal counseling technique had been utilized at least sometimes in the practice of the average participant.

The mean SSCTI score ($M = 2.99$) with a standard deviation of ($SD = .74$), indicates that elementary school counselors sometimes utilize non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent. The findings indicate that only 12 of the 31 items in the SSCTI had a mean score of 3.0 or higher. This is significant in that most of the non-verbal counseling techniques represented in the SSCTI were rarely or never utilized when counseling children who speak a language in which the counselor is not fluent. Of the 12 techniques utilized, 5 of them (observation of motor skill development, observation of materials used by child, observation of facial expressions, observation of specific behaviors, and exploration of themes), are general counseling techniques, which are not exclusive to play therapy.

This suggests, that while approximately 72% of the participants stated that they had received training in non-verbal counseling techniques, many of the commonly accepted techniques included in the SSCTI were excluded from the participants' repertoire of tools utilized when counseling children who speak a language in which the counselor is not fluent.

Frequency Distribution of Counselor Perceived Self-Efficacy

As part of the survey packet, participants completed the Counselor Self-Efficacy Scale which consists of 20 Likert scale items ranging from a "1" (Strongly Disagree) to a "5" (Strongly Agree). A score of "1" reflects a low level of perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent, and a score of "5" reflects a high level of perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent. Descriptive statistics for CSES

scores as they relate to all relevant background characteristics and demographics are presented in Table 5.

Table 5

Descriptive Statistics for CSES

1 = Strongly Disagree, 2 = Moderately Disagree, 3 = Neutral/Uncertain,
4 = Moderately Agree, 5 = Strongly Agree

Characteristics	N	Mean	Standard Deviation
1 Knowledge of personality development	185	4.4108	.76517
2 Knowledge of ethical issues	185	4.5351	.70719
3 Knowledge of behavioral changes	185	4.0595	1.05898
4 Able to perform psychological assessment	185	4.0595	1.05898
5 Able to recognize psychiatric symptoms	185	4.1081	.90241
6 Adequate knowledge of crisis intervention	185	4.2973	1.03904
7 Develop effective therapeutic relationships	185	4.6973	.67987
8 Effectively facilitate client self-exploration	185	4.4432	.72101
9 Accurately identify client affect	185	4.4541	1.04221
10 Able to determine relevant data	185	4.4595	.84037
11 Able to identify one's own issues	185	4.5405	.92062
12 Able to conceptualize client cases	185	4.2919	.91556
13 Facilitate goal development with client	185	4.2811	.87036
14 Able to apply behavior change skills	185	4.2162	.94797
15 Able to keep personal issues in check	185	4.6108	.74447
16 Familiar w/ pros and cons of group work	185	4.5351	.69946
17 Adequate knowledge of group work	185	4.2703	.96258
18 Recognize dynamics of group members	185	4.1676	.85911
19 Familiar w/ ethics in group work	185	4.4703	.96145
20 Effective as a group leader/ facilitator	185	4.3892	.84692
Total CSES	185	4.3395	.43928

N = 185

The mean CSES score ($M = 4.34$) with a standard deviation ($SD = .44$), indicates that elementary school counselors moderately agree that they are effective when counseling children who speak a language in which they are not fluent. This is both promising and significant: promising in that elementary school counselors perceive themselves to be effective in the services that they provide their clients and significant in that, while they perceive themselves to be effective, the minimal frequency of use of

certain non-verbal counseling techniques indicates that participants are limited in the type of services that they are providing when counseling children who speak a language in which they are not fluent.

Inferential Analyses

Nine research questions were generated to address the purpose of this investigation. This section includes a list of each research question, one or more hypotheses that pertain to each question, data analysis procedures utilized to test each hypothesis, and the outcomes of such procedures.

Research Question 1

The first research question was: “Is there a relationship between (a) amount/level of training in non-verbal counseling techniques, (b) amount/level of training in multicultural counseling, (c) linguistic differences between counselor and child, (d) years of counseling experience, (e) membership in the Association for Play Therapy, (f) membership in the American School Counselor Association, (g) counselor’s fluency with languages other than English, (h) gender of the counselor, (i) grade level in which the counselor works and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent?” Accordingly, nine hypotheses were associated with this initial research question. A Pearson Product correlation was used to test each of these hypotheses. The following discussion includes a statement of each hypothesis, the results of the Person Product correlation for each hypothesis, and a discussion of the significance of each finding. Table 6 will be presented at the end of this section to illustrate findings.

Hypothesis 1.1

Research Question 1 was examined by Hypothesis 1.1, which stated that there was a significant relationship between the amount/level of training in non-verbal counseling techniques and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.1 was accepted. A negative correlation was found ($r = -.422$, $p = .000$) between the participants' non-verbal counseling techniques training scores and the participants' SSCTI scores. Therefore, training in non-verbal counseling is inversely related to frequency of use of non-verbal counseling techniques. Hypothesis 1.1 is accepted, which indicates that participants who had received more play therapy training implemented the non-verbal techniques less when counseling children who speak a language in which the counselor is not fluent.

Hypothesis 1.2

Research Question 1 was examined by Hypothesis 1.2, which stated that there would be a significant relationship between the amount/level of training in multicultural counseling and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.2 was rejected. However, a weak positive correlation was found ($r = .062$, $p = .402$) between the participants' multicultural counseling training scores and the participants' SSCTI scores. While the correlation was not significant, a trend was found indicating that participants who had received multicultural counseling training were likely to implement what they had learned when counseling children who speak a language in which the counselor is not fluent.

Hypothesis 1.3

Research Question 1 was examined by Hypothesis 1.3, which stated that there would be a significant relationship between the linguistic differences and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.3 was rejected. A weak negative correlation was found ($r = -.009$, $p = .902$) between the participants' linguistic differences and the participants' SSCTI scores. Therefore, linguistic differences between counselor and client are inversely related to frequency of use of non-verbal counseling techniques. That is when counselors and clients speak a different language, counselors are less inclined to use non-verbal techniques.

Hypothesis 1.4

Research Question 1 was examined by Hypothesis 1.4, which stated that there would be a significant relationship between the years of counseling experience and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.4 was rejected. However, a weak positive correlation was found ($r = .099$, $p = .180$), which indicates that there is a trend with regard to years of counseling experience and frequency of use of non-verbal counseling techniques. As years of counseling experience increased, the frequency of use of non-verbal counseling techniques also increased when counseling with children who speak a language in which the counselor was not fluent.

Hypothesis 1.5

Research Question 1 was examined by Hypothesis 1.5, which stated that there would be a significant relationship between membership in the Association for Play Therapy and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.5 was accepted. A significant negative correlation was found ($r = -.503$, $p = .000$) between the participants' APT membership scores and their SSCTI scores. Therefore, APT membership is inversely related to frequency of use of non-verbal counseling techniques. This indicates that participants who were members of APT implemented non-verbal counseling techniques less frequently when counseling children who speak a language in which the counselor is not fluent.

Hypothesis 1.6

Research Question 1 was examined by Hypothesis 1.6, which stated that there would be a significant relationship between membership in the American School Counselor Association and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.6 was accepted. A significant positive correlation was found ($r = .337$, $p = .000$) between the participants' ASCA membership scores and their SSCTI scores. Therefore, ASCA membership is related to frequency of use of non-verbal counseling techniques. This indicates that participants who are members of ASCA frequently use non-verbal counseling techniques when counseling with children who speak a language in which they are not fluent.

Hypothesis 1.7

Research Question 1 was examined by Hypothesis 1.7, which stated that there would be a significant relationship between the counselor's fluency with languages other than English and the frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.7 was rejected. Yet, analysis indicated that there was a weak negative correlation ($r = -.005$, $p = .941$) between the participants' fluency with languages other than English scores and their SSCTI scores. Therefore, counselors' fluency with languages other than English is not related to frequency of use of non-verbal counseling techniques.

Hypothesis 1.8

Research Question 1 was examined by Hypothesis 1.8, which stated that there would be a significant relationship between the gender of the counselor and frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.8 was rejected. While the correlation was not significant, a weak positive correlation was found ($r = .079$, $p = .286$), which indicates a trend with regard to gender, as it relates to frequency of use of non-verbal counseling techniques. As the gender score for females increases, then the frequency of use of non-verbal counseling techniques (SSCTI score) also increases.

Hypothesis 1.9

Research Question 1 was examined by Hypothesis 1.9, which stated that there would be a significant relationship between the grade level in which the counselor works and frequency of use of non-verbal counseling techniques when counseling with children

who speak a language in which the counselor is not fluent. Based on data analysis, Hypothesis 1.9 was accepted. A significant negative correlation was found ($r = -.465$, $p = .000$) between the grade level in which participants primarily work and their SSCTI scores. Therefore, the grade level in which participants primarily work is inversely related to frequency of use of non-verbal counseling techniques. This means that the lower the grade level in which the counselor works, the higher the frequency of use of non-verbal counseling techniques.

Table 6

Participants' Scores on (SSCTI)

Pearson Correlation and Level of Significance	SSCTI Totals
Non-verbal Counseling Technique Training	$r = -.422$, $p = .000$ *
Multicultural Counseling Training	$r = .062$, $p = .402$
Linguistic Differences Between Counselor and Child	$r = -.009$, $p = .902$
Years of counseling experience	$r = .099$, $p = .180$
APT membership	$r = -.503$, $p = .000$ *
ASCA membership	$r = .337$, $p = .000$ *
Counselors' Fluency with Languages Other than English	$r = -.005$, $p = .941$
Gender of the Counselor	$r = .079$, $p = .286$
Grade level with which the Counselor Primarily Works	$r = -.465$, $p = .000$ *

N=185

Note. An asterisk (*) denotes $p > .05$.

Several variables yielded statistically significant relationships with frequency of use of non-verbal counseling techniques. Amount/level of non-verbal counseling

techniques training, APT membership, and grade level with which the counselor primarily works inversely correlated with frequency of use of non-verbal counseling techniques or the SSCTI. ASCA membership positively correlated with frequency of use of non-verbal counseling techniques or the SSCTI. Amount/level of multicultural counseling training, linguistic differences between counselor and child, counselors' fluency with languages other than English, and gender of the counselor yielded weak correlations with frequency of use of non-verbal counseling techniques or the SSCTI.

Research Question 2

The second research question was: "Is there a relationship between frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy?"

Hypothesis 2.1

Research question 2 was examined by Hypothesis 2.1, which stated that there would be a significant relationship between the frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy. A Pearson Product correlation was used to test this hypothesis. A significant positive correlation was found ($r = .188$, $p = .010$) between the participants' SSCTI scores and the participants CSES scores. Hypothesis 2.1 was accepted, indicating that there is a significant relationship between participants' SSCTI scores and participants' CSES scores. That is, participants who had a high frequency of use of non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent perceived themselves as effective. These results are presented in Table 7.

Table 7Correlation of Participants' Scores on (SSCTI) and Counselor Perceived Self-Efficacy

Pearson Correlation and Level of Significance	CSES Totals
SSCTI	r = .188, p = .010 *

N=185

Note. An asterisk (*) denotes $p > .05$.Research Question 3

The third research question was: “Is there a difference in (a) the frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy between multilingual counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent?” There were two hypotheses for the third research question that pertained to multilingual and English only speaking elementary school counselors’ (a) frequency of use of non-verbal counseling techniques and (b) perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent. Appropriate statistical procedures were utilized to test these hypotheses.

Hypothesis 3.1

Research Question 3 was examined by Hypothesis 3.1, which stated that there would be a significant difference in the frequency of use of non-verbal counseling techniques between multilingual counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent. An analysis of variance (ANOVA) was conducted to test this hypothesis. The results of the ANOVA presented in Table 8 indicate that there is no statistically significant difference in the frequency of use of non-verbal counseling techniques between multilingual

counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent ($F = .288, p = .750$). Therefore, hypothesis 3.1 was not supported. In other words, both English only speaking counselors and multilingual counselors had similar scores with regard to frequency of use of non-verbal counseling techniques.

Table 8

ANOVA Summary Table for English Only Speaking Counselors Use of Techniques

Source	SS	df	MS	F	Prob.
Between	.321	2	.160	.288	.750
Within	101.267	182	.556		
Total	101.588	184			

$p > .05$

Hypothesis 3.2

Research Question 3 was examined by Hypothesis 3.2, which stated that there would be a significant difference in counselor perceived self-efficacy between multilingual counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent. An analysis of variance (ANOVA) was conducted to test this hypothesis. The results of the ANOVA indicate that there is no statistically significant difference in the counselor perceived self-efficacy between multilingual counselors and English only speaking counselors when counseling with children who speak a language in which the counselor is not fluent ($F = .482, p = .619$). Hypothesis 3.2 was rejected because English only speaking counselors and multilingual counselors had similar scores with regard to perceived self-efficacy. The results are presented in Table 9.

Table 9ANOVA Summary Table Regarding English Only Speaking Counselor Self-Efficacy

Source	SS	df	MS	F	Prob.
Between	.187	2	.093	.482	.619
Within	35.320	182	.194		
Total	35.507	184			

p > .05

Research Question 4

Research question four asked: “Is there a difference in (a) the frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not received training in non-verbal counseling techniques when counseling with children who speak a language in which the counselor is not fluent?” Two hypotheses are associated with Research Question 4. An analysis of variance (ANOVA) was conducted to test both of these hypotheses. Results are discussed in the section that follows.

Hypothesis 4.1

Research Question 4 was examined by Hypothesis 4.1, which stated there is a significant difference in the frequency of use of non-verbal counseling techniques between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not received training in non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference between English only speaking counselors who have received training in non-verbal counseling techniques and English only

speaking counselors who have not received training in non-verbal techniques and frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent ($F = 1.060$, $p = .404$). In other words, hypothesis 4.1 was not supported because both English only speaking counselors who had received training and those who had not received training in non-verbal counseling techniques had similar scores with regard to frequency of use of non-verbal counseling techniques. The results are presented in Table 10.

Table 10

ANOVA Summary Table: Use of and Training in Non-verbal Counseling Techniques

Source	SS	df	MS	F	Prob.
Between	12.390	63	.197	1.060	.404
Within	12.983	70	.185		
Total	25.373	133			

$p > .05$

Hypothesis 4.2

Research Question 4 was examined by Hypothesis 4.2, which stated there is a significant difference in counselor perceived self-efficacy between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not received training in non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference between English only speaking counselors who have received training in non-verbal counseling techniques and English only speaking counselors who have not received training in non-verbal techniques and counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent ($F = 1.323$,

$p = .145$). In other words, both English only speaking counselors who had received training and those who had not received training in non-verbal counseling techniques had similar scores with regard to counselor perceived self-efficacy. An analysis of variance (ANOVA) was conducted to test this hypothesis. The results are presented in Table 11.

Table 11

ANOVA Summary Table: Perceived Self-Efficacy & Training in Non-Verbal Techniques

Source	SS	df	MS	F	Prob.
Between	7.927	34	.233	1.323	.145
Within	17.446	99	.176		
Total	25.373	133			

$p > .05$

Research Question 5

The fifth research question was: “Is there a difference (a) in the frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling when counseling with children who speak a language in which the counselor is not fluent. Two hypotheses are associated with Research Question 5. An analysis of variance (ANOVA) was conducted with each hypothesis. The following section includes a summary of results.

Hypothesis 5.1

Research Question 5 was examined by Hypothesis 5.1, which stated that there is a significant difference in the frequency of use of non-verbal counseling techniques between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in

multicultural counseling when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling and frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent ($F = 1.439, p = .085$). Therefore, hypothesis 5.1 was not supported; English only speaking counselors who had received training and those who had not received training in multicultural counseling had similar scores with regard to frequency of use of non-verbal counseling techniques. These results are presented in Table 12.

Table 12

ANOVA Summary Table: Use of Techniques and Training in Multicultural Counseling

Source	SS	df	MS	F	Prob.
Between	9.281	34	.273	1.439	.085
Within	18.779	99	.190		
Total	28.060	133			

$p > .05$

Hypothesis 5.2

Research Question 5 was examined by Hypothesis 5.2, which stated that there is a significant difference in counselor perceived self-efficacy between English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference between

English only speaking counselors who have received training in multicultural counseling and English only speaking counselors who have not received training in multicultural counseling and counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent ($F = 1.287, p = .152$). In other words, Hypothesis 5.2 was rejected because English only speaking counselors who had received training and those who had not received training in multicultural counseling had similar scores with regard to counselor perceived self-efficacy. Table 13 illustrates these findings.

Table 13

ANOVA Summary Table: Perceived Self-Efficacy & Training in Multicultural Counseling

Source	SS	df	MS	F	Prob.
Between	15.060	63	.239	1.287	.152
Within	13.000	70	.186		
Total	28.060	133			

$p > .05$

Research Question 6

The sixth research question was: “Is there a difference (a) in the frequency of use of non-verbal counseling techniques and (b) perceived counselor self-efficacy among counselors, based on the years of counseling experience that the counselor has when counseling with children who speak a language in which the counselor is not fluent?”

Two hypotheses are associated with Research Question 6. An analysis of variance (ANOVA) was conducted with each hypothesis. The following section includes a summary of results.

Hypothesis 6.1

Research Question 6 was examined by Hypothesis 6.1, which stated that there is a significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the years of counseling experience that the counselor has when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the years of counseling experience that the counselor has when counseling children who speak a language in which the counselor is not fluent ($F = .749, p = .833$). Consequently, hypothesis 6.1 was not supported; English only speaking counselors who had received training and those who had not received training in multicultural counseling had similar scores with regard to frequency of use of non-verbal counseling techniques. The results are presented in Table 14.

Table 14

ANOVA Summary Table: Use of Techniques and Years of Counseling Experience

Source	SS	df	MS	F	Prob.
Between	14.295	33	.433	.749	.833
Within	87.293	151	.578		
Total	101.588	184			

$p > .05$

Hypothesis 6.2

Research Question 6 was examined by Hypothesis 6.2, which stated that there is a significant difference in counselor perceived self-efficacy among counselors, based on the years of counseling experience that the counselor has when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA

indicate that there is no statistically significant difference in counselor perceived self-efficacy among counselors, based on the years of counseling experience that the counselor has when counseling children who speak a language in which the counselor is not fluent ($F = 1.325$, $p = .131$). Hypothesis 6.2 is rejected; all counselors had similar scores with regard to counselor perceived self-efficacy. Results are presented in Table 15.

Table 15

ANOVA Summary Table: Perceived Self-Efficacy and Years of Counseling Experience

Source	SS	df	MS	F	Prob.
Between	7.975	33	.242	1.325	.131
Within	27.532	151	.182		
Total	35.507	184			

$p > .05$

Research Question 7

The seventh research question was: “Is there a difference (a) in the frequency of use of non-verbal counseling techniques and (b) perceived counselor self-efficacy among counselors, based on the counselor’s gender when counseling with children who speak a language in which the counselor is not fluent?” Accordingly, two hypotheses are associated with Research Question 7. An analysis of variance (ANOVA) was conducted to test these hypotheses.

Hypothesis 7.1

Research Question 7 was examined by Hypothesis 7.1, which stated that there is a significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the counselor’s gender when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference in the frequency of use of non-verbal

counseling techniques among counselors, based on the counselor's gender when counseling children who speak a language in which the counselor is not fluent ($F = 1.143$, $p = .286$). In other words, both male and female counselors had similar scores with regard to frequency of use of non-verbal counseling techniques. Hypothesis 7.1 was therefore rejected. The results are presented in Table 16.

Table 16

ANOVA Summary Table: Use of Non-Verbal Counseling Techniques and Gender

Source	SS	df	MS	F	Prob.
Between	.631	1	.631	1.143	.286
Within	100.957	183	.552		
Total	101.588	184			

$p > .05$

Hypothesis 7.2

Research Question seven was examined by Hypothesis 7.2, which stated that there is a significant difference in counselor perceived self-efficacy, based on the counselor's gender when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate that there is no statistically significant difference in counselor perceived self-efficacy, based on the counselor's gender when counseling children who speak a language in which the counselor is not fluent ($F = .163$, $p = .687$). This means that counselors had similar scores with regard to counselor perceived self-efficacy regardless of gender and that hypothesis 7.2 was rejected. The results are presented in Table 17.

Table 17ANOVA Summary Table: Counselor Perceived Self-Efficacy and Gender

Source	SS	df	MS	F	Prob.
Between	.032	1	.032	.163	.687
Within	35.475	183	.194		
Total	36.507	184			

p > .05

Research Question 8

The eight research question was: “Is there a difference (a) in the frequency of use of non-verbal counseling techniques and (b) perceived self-efficacy among counselors, based on the grade level of the children with which the counselor works when counseling with children who speak a language in which the counselor is not fluent?” Therefore, two hypotheses are associated with Research Question 8. An analysis of variance (ANOVA) was conducted to test these hypotheses.

Hypothesis 8.1

Research Question 8 was examined by Hypothesis 8.1, which stated that there is a significant difference in the frequency of use of non-verbal counseling techniques among counselors based on the grade level of the children with which the counselor works when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA indicate a statistically significant difference in the frequency of use of non-verbal counseling techniques among counselors, based on the grade level of the children with which the counselor works when counseling children who speak a language in which the counselor is not fluent. ($F = 30.594$, $p = .000$). In other words, hypothesis 8.1 was supported because there is a difference among elementary school counselors’ frequency of use of non-verbal counseling techniques and the grade level of

the children with which the counselor works. Table 18 is presented to illuminate this result.

Table 18

ANOVA Summary Table: Use of Techniques and Grade Level

Source	SS	df	MS	F	Prob.
Between	25.560	2	12.780	30.594	.000 *
Within	76.027	182	.418		
Total	101.588	184			

$p > .05$ Note: An asterisk (*) denotes a $p > .05$.

Hypothesis 8.2

Research Question 8 was examined by Hypothesis 8.2, which stated that there is a significant difference of counselor perceived self-efficacy among counselors, based on the grade level of the children with which the counselor works when counseling children who speak a language in which the counselor is not fluent. The results of the ANOVA 9 indicate that there is no statistically significant difference in counselor perceived self-efficacy among counselors, based on the grade level of the children with which the counselor works when counseling children who speak a language in which the counselor is not fluent. ($F = .312$, $p = .732$). Hypothesis 8.2 was rejected because all counselors had similar scores with regard to counselor perceived self-efficacy regardless of the grade level with which the counselor worked. The results are presented in Table 19.

Table 19

ANOVA Summary Table: Perceived Self-Efficacy and Grade Level

Source	SS	df	MS	F	Prob.
Between	.121	2	.061	.312	.732
Within	35.386	182	.194		
Total	35.507	184			

$p > .05$

Research Question 9

The ninth research question was: “When counseling with children who speak a language in which the counselor is not fluent, (a) frequency of use of non-verbal counseling techniques and (b) counselor perceived self-efficacy are most likely to be predicted by (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) counselor’s fluency with languages other than English, (6) gender of the counselor, or (7) grade level in which the counselor works. Therefore, fourteen hypotheses were associated with Research Question 9. A stepwise multiple regression was conducted to analyze each of these hypotheses. The following section includes a list of each hypothesis, followed by an illustration of the results of data analysis in two separate tables labeled as 20 and 21.

Hypothesis 9.1

Research Question 9 was examined by Hypothesis 9.1, which stated that when counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the amount/level of training in non-verbal counseling techniques

Hypothesis 9.2

Research Question 9 was examined by Hypothesis 9.2, which stated that when counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the amount/level of training in non-verbal counseling techniques.

Hypothesis 9.3

Research Question 9 was examined by Hypothesis 9.3, which stated that when counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the amount/level of training in multicultural counseling.

Hypothesis 9.4

Research Question 9 was examined by Hypothesis 9.4, which stated that when counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the amount/level of training in multicultural counseling.

Hypothesis 9.5

Research Question 9 was examined by Hypothesis 9.5, which stated that when counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by linguistic differences between counselor and child.

Hypothesis 9.6

Research Question 9 was examined by Hypothesis 9.6, which stated that when counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by linguistic differences between counselor and child.

Hypothesis 9.7

Research Question 9 was examined by Hypothesis 9.7, which was stated that when counseling with children who speak a language in which the counselor is not fluent,

frequency of use of non-verbal counseling techniques is predicted by years of counseling experience.

Hypothesis 9.8

Research Question 9 was examined by Hypothesis 9.8, which was stated that when counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by years of counseling experience.

Hypothesis 9.9

Research Question 9 was examined by Hypothesis 9.9, which was stated that when counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the counselor's fluency with languages other than English.

Hypothesis 9.10

Research Question 9 was examined by Hypothesis 9.10, which was stated that when counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the counselor's fluency with languages other than English.

Hypothesis 9.11

Research Question 9 was examined by Hypothesis 9.11, which was stated that when counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by gender of the counselor.

Hypothesis 9.12

Research Question 9 was examined by Hypothesis 9.12, which was stated that when counseling with children who speak a language in which the counselor is not fluent, counselor perceived self-efficacy is predicted by the gender of the counselor.

Hypothesis 9.13

Research Question 9 was examined by Hypothesis 9.13, which was stated that when counseling with children who speak a language in which the counselor is not fluent, frequency of use of non-verbal counseling techniques is predicted by the grade level in which the counselor works.

Hypothesis 9.14

Research Question 9 was examined by Hypothesis 9.14, which was stated that when counseling with children who speak a language in which the counselor is not fluent, the grade level in which the counselor works helps to predict the degree of counselor perceived self-efficacy.

A multiple linear regression utilizing the stepwise method was utilized to calculate the ability to predict participants' frequency of use of non-verbal counseling techniques based on the following variables: (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) counselor's fluency with languages other than English, (6) gender of the counselor, and (7) grade level in which the counselor works.

A significant regression equation was found ($F = 12.612$, $p = .000$), with an R square of .298. Almost 30% of the variance in frequency of use of non-verbal counseling

techniques scores was explained by amount/level of training in non-verbal counseling techniques, amount/level of training in multicultural counseling, linguistic differences between counselor and child, years of counseling experience, counselor's fluency with languages other than English, gender of the counselor, and grade level in which the counselor works. Table 20 reflects these findings.

Table 20

Stepwise Multiple Regression Regarding Frequency of Use of Non-Verbal Counseling Techniques

Model Summary

R	R Square	Adjusted R Square	Standard Error of Estimate
.546	.298	.275	.63283

ANOVA

	Sum of Squares	df	Mean Square	F	Significance
Regression	30.304	6	5.051	12.612	.000
Residual	71.284	178	.400		
Total	101.588	184			

- a. Predictors: (Constant), amount/level of training in non-verbal counseling techniques, amount/level of training in multicultural counseling, linguistic differences between counselor and child, years of counseling experience, counselor's fluency with languages other than English, gender of the counselor, and grade level in which the counselor works
- b. Dependent Variable: Frequency of use of non-verbal counseling techniques

A multiple linear regression utilizing the stepwise method was utilized to calculate predicting participants' perceived self-efficacy based on the following variables: (1) amount/level of training in non-verbal counseling techniques, (2) amount/level of training in multicultural counseling, (3) linguistic differences between counselor and child, (4) years of counseling experience, (5) counselor's fluency with languages other than English, (6) gender of the counselor, and (7) grade level in which the counselor works.

A significant regression equation was found ($F = 3.911$, $p = .001$), with an R square of .118. Almost 12% of the variance in counselor perceived self-efficacy scores was explained by amount/level of training in non-verbal counseling techniques, amount/level of training in multicultural counseling, linguistic differences between counselor and child, years of counseling experience, counselor's fluency with languages other than English, gender of the counselor, and grade level in which the counselor works. A significant regression was found for each of the hypotheses. Therefore, the investigation failed to reject each of the Hypotheses for research question 9. Table 21 reflects these findings.

Table 21

Stepwise Multiple Regression Regarding Counselor Perceived Self-Efficacy

Model Summary

R	R Square	Adjusted R Square	Standard Error of Estimate
.344	.118	.088	.41940

ANOVA

	Sum of Squares	df	Mean Square	F	Significance
Regression	4.198	6	.700	3.977	.001
Residual	31.309	178	.176		
Total	35.507	184			

- a. Predictors: (Constant), amount/level of training in non-verbal counseling techniques, amount/level of training in multicultural counseling, linguistic differences between counselor and child, years of counseling experience, counselor's fluency with languages other than English, gender of the counselor, and grade level in which the counselor works
- b. Dependent Variable: Counselor Perceived Self-Efficacy

Summary

The results of the study were presented in this chapter. Participants in this study included 185 elementary school counselors from the states of Arizona, California, Colorado, Florida, Illinois, Louisiana, Nevada, New Mexico, New York and Texas. This study investigated 9 variables to determine their relationship to the frequency of use of non-verbal counseling techniques and perceived self-efficacy by elementary school counselors when counseling with children who speak a language in which the counselor is not fluent. Several variables yielded statistically significant relationships with frequency of use of non-verbal counseling techniques and counselor perceived self-efficacy. A detailed discussion of all findings and their implications is presented in the following chapter.

CHAPTER FIVE

DISCUSSION

A summary of the study is included in this chapter. The conceptual framework, purpose of this investigation, and a description of the sample and participant characteristics are provided first. Next, a synthesis of the study's findings is presented in terms of how such findings compare to relevant literature and research regarding school counseling and play therapy. Limitations of this investigation are presented, followed by a discussion of the results of this investigation as they pertain to the implications for elementary school counselors, counselor educators, and supervisors. This chapter ends with recommendations for research and concluding remarks.

Conceptual Framework

This study was based on the ever-growing need for elementary school counselors in the United States to provide counseling services to children who speak a language in which the counselor is not fluent. Unfortunately, there are not enough school counselors in the U.S. who speak more than one language even minimally to be able to provide counseling services to children who speak a language other than English. Meanwhile, there is an abundance of children who speak a language in which the counselor is not fluent and who do not have access to counseling services because of communication barriers. In an attempt to address this issue empirical attention to the areas of school

counseling and play therapy with children is being given. Accordingly, this research focuses on school counseling and play therapy with regard to children who speak a language in which the counselor is not fluent.

Purpose of the Study

The purpose of this study was to determine the frequency of use of non-verbal counseling techniques and counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent and their relationship to counselors' experience, training, and selected personal characteristics. The results of this exploratory study were intended to provide information that would increase our understanding of counselors' perceptions of self-efficacy when counseling children who are linguistically different from the counselor. This information is an important prerequisite for selecting and training counselors to provide services for children who do not speak English; as well as for increasing counselors' effectiveness when working with diverse populations. According to Gladding (1998), there is a growing necessity for specialized training in play therapy for elementary school counselors when counseling children who do not speak a language in which the counselor is not fluent. Play therapy helps children and elementary school counselors cross all of the barriers with regard to language and allow the children a safe space to express themselves in a manner comfortable and acceptable to their individual needs (Siehl, 2001).

Sample

The participants for this study were elementary school counselors who were members of the American School Counselor Association (ASCA) and/or the Association for Play Therapy (APT). Survey packets containing a researcher-constructed personal background and demographics questionnaire and instrument, the Salgado School Counseling Techniques Inventory (SSCTI), as well as the Counselor Self-Efficacy Scale (CSES) were mailed to 600 members. Out of the 205 surveys that were returned, 185 usable surveys were considered to be usable for data analysis. Thus, the return rate of useable surveys was 31%.

Participant Characteristics

The majority of the participants females (88%) with an average age of 47. Participants of Caucasian decent comprised the majority of the sample (79%). With regard to education, (83%) of the respondents had earned a Masters degree and had an average of 10 years of counseling experience. (72%) of the respondents indicated that they had received some sort of training in multicultural counseling and non-verbal counseling or play therapy techniques. Of the 185 respondents, (80%) indicated that they worked in an elementary school setting with children in grades K-5, (approximately another 20%) indicated that they worked with children in grades 6-8.

Of the 185 participants who responded to the survey, (73%) indicated that they spoke only the English language and were not conversationally fluent in another language. Of these same participants, (79%) indicated that to some degree they had counseled children who speak a language in which they were not fluent.

Discussion of Findings

The results of this study provide important information for school counselors, counselor educators, and supervisors about the use of play therapy with non-English speaking children in elementary school settings. A major outcome of this study pertains to the Salgado School Counseling Techniques Inventory (SSCTI). While the mean SSCTI score ($M = 2.99$, $SD = .74$) indicated that participants “sometimes” utilized play therapy techniques, this was only partially true. The results indicated that only 12 of the 31 items included in the instrument had a mean score of 3.0 or higher; which indicated that participants were only using some play therapy techniques in their practice on a regular basis. The other play therapy techniques were rarely or never implemented. Of the 12 techniques that participants implemented in their practice, 5 of them (observation of motor skill development, observation of materials used by child, observation of facial expressions, observation of specific behaviors, and exploration of themes), are general counseling techniques, which are not exclusive to play therapy.

This finding suggests that, while approximately 72% of the participants indicated that they had received training in play therapy techniques, that many of the commonly accepted play therapy techniques included in the SSCTI were excluded from the participants’ repertoire of school counseling when counseling children who speak a language in which they were not fluent. This coincides with the literature, which states that there are some persons in the mental health field who are claiming to be “play therapists,” but who improperly utilize the basic tenets of play therapy or simply have inadequate training. Perhaps the participants in this study received their non-verbal counseling techniques or play therapy training in the form of a workshop versus a

university-offered play therapy graduate course. It is important to be reminded that workshops, although helpful, cannot be considered a replacement for the depth of training received in a graduate course (Landreth, 2001).

This study also found that the mean CSES score ($M = 4.34$, $SD = .44$) indicated that participants perceived their counseling abilities to be effective. When correlated with the SSCTI, it was found that there was a statistically significant relationship between frequency of use of non-verbal counseling techniques (play therapy) and counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent.

Also, of all the variables considered, non-verbal counseling techniques training, APT membership, ASCA membership, and grade level with which the counselor works had statistically significant correlations with the frequency of use of non-verbal counseling techniques. It was found that play therapy or non-verbal counseling techniques as well as APT membership had an inverse relationship with frequency of use of non-verbal counseling techniques. That is those who indicated that they had received training in play therapy techniques and who were members of APT had a lower score on the SSCTI, indicating less frequent use of play therapy or non-verbal counseling techniques, when counseling children who speak a language in which the counselor is not fluent. This, however, appears to have been affected by the aforementioned finding, which indicated that participants' limited the implementation of many of the non-verbal counseling techniques.

It was also found that ASCA membership had a statistically significant positive correlation with frequency of use of non-verbal counseling techniques. That is, as the

ASCA membership of elementary school counselors increased, the frequency of use of those non-verbal counseling techniques also increased. This coincides with the literature, which states that ASCA members are encouraged to engage in professional development. ASCA members are encouraged to continue to actively explore their own culture, keep current in theory, research, and interventions (i.e. play therapy training), advocate for comprehensive in-service professional development programs conducted in work settings, and expose themselves to forms of artistic expression that communicate to diverse groups (Herring, 1997). Fortunately, many ASCA members are aware of the benefits that innovative interventions such as play therapy have in the counseling process (Landreth, 2001).

Another finding indicated a significant negative correlation between the grade level in which participants primarily work and the participants' frequency of use of non-verbal counseling techniques. That is, as the grade level in which the elementary school counselor works increased, the frequency of use of those non-verbal counseling techniques decreased. Elementary school counselors tend to use play therapy more often with younger children, usually with children below the fifth grade level. The younger elementary school child, through play, develops his/her social relations, tests various roles and concepts, and works through his/her frustrations and concerns. In contrast older children verbalize frustrations, love, anger, and acceptance, the younger child acts these feelings. The younger child tends less to talk about his/her feelings than to live them; he/she is an activist (Stone & Bradley, 1994).

Several ANOVAs were conducted in this investigation to determine if any statistically significant differences existed between or among various groups with regard

to frequency of use of non-verbal counseling techniques and counselor perceived self-efficacy. Among the groups examined in this study were multilingual counselors and English only speaking counselors, English only speaking counselors who had received training in play therapy and English only speaking counselors who had not received training in play therapy, English only speaking counselors who had received training in multicultural counseling and English only speaking counselors who had not received training in multicultural counseling, novice counselors and experienced counselors, male and females, and counselors who work with grades K-5 and counselors who work with grades 6-8.

No statistically significant differences were found between or among any of the groups examined during this investigation with regard to counselor perceived self-efficacy. Likewise, no statistically significant differences were found between or among any of the groups with regard to frequency of use of non-verbal counseling techniques, except with regard to the grade level in which the counselor works. This finding indicates that there is a statistically significant difference with regard to frequency of use of non-verbal counseling techniques and the grade level with which the counselor works when counseling children who speak language in which the counselor is not fluent.

Another finding of this study was that almost all of the variance in frequency of use of non-verbal counseling techniques as well as counselor perceived self-efficacy scores were explained by amount/level of training in non-verbal counseling techniques, amount/level of training in multicultural counseling, linguistic differences between counselor and child, years of counseling experience, counselor's fluency with languages other than English, gender of the counselor, and grade level in which the counselor

works. This finding indicates that all of the aforementioned variables have an equal effect and are significant predictors on the frequency of use of non-verbal counseling techniques as well as counselor perceived self-efficacy when counseling with children who speak a language in which the counselor is not fluent.

Limitations and Delimitations

Limitations in quantitative research often pertain to external constraints that may potentially alter the validity of findings (Pryczak & Bruce, 1998). The following discussion pertains to limitations that are specific to this investigation.

One limitation of this study pertained to the researcher-constructed instrument, the SSCTI. Although the instrument was tested in three different pilot studies at three different universities in the southern part of the United States, the participants in the pilot studies were rather homogenous. The initial pilot study was conducted in an advanced graduate play therapy course, which resulted in more of the non-verbal counseling techniques being implemented by the participants. This in and of itself is significantly different from the data gathered from the 10 chosen states. Additional testing should be conducted to determine the validity and reliability of the SSCTI.

Another limitation of this study was the unforeseen data, which was gathered from the SSCTI alone. In that participants only utilized 12 of the 31 non-verbal counseling techniques itemized on the instrument. Many techniques and materials such as; puzzles, sand tray, collages, inflatable punching bag, musical instruments, rope, masks/hats, or play money were rarely or never used by elementary school counselors in their practices. This might suggest that many elementary school counselors may work in

schools in which these materials are not available to their students, either due to a lack of financial resources of the school or lack of knowledge by the counselor. This finding may have had a significant impact on the study itself.

Another potential limitation of this study was the population with which the CSES was utilized. Several of the items on the scale are not relevant to the type of work that elementary school counselors do in an elementary school setting. Also neither the SSCTI nor the CSES directly test for a major component of this investigation, that of linguistic differences between counselor and client. The SSCTI and the CSES could only indirectly test for this component by factoring correlations, ANOVAS, and multiple regressions.

Other potential limitations for this study are those true of any survey study, that of differences between participants who chose to return their survey and those who did not and the assumption that respondents' answers were completely honest.

It is possible that there were differences unaccounted for in the variables of gender and ethnic background because of the wide disparities among the groups. Since this study's respondents were predominantly Caucasian, middle-aged, and female.

A delimitation is a boundary to which the study was deliberately confined (Pryczak & Bruce, 1998). One delimitation of this study is that it only considered respondents from only ten states in the country. While the states included regions in which there is a large non-English speaking population, the participants' responses may not be representative of other states, which were not investigated.

Another delimitation of this study is with the type of training that the participants received with regard to play therapy or non-verbal counseling techniques as well as multicultural counseling. While the SSCTI did specifically ask what level of training the

participants had received (i.e. a workshop, a graduate course, supervision) with regard to both play therapy or non-verbal counseling techniques as well as multicultural counseling, the study only took into account whether the participants had training in play therapy or non-verbal counseling techniques as well as multicultural counseling or not. It grouped all forms of training into one category and the lack or absence of training into another category.

Implications and Recommendations

Elementary School Counselors

The elementary school counselors who participated in this study, report to use at least some basic play therapy techniques and materials when counseling with children who speak a language in which the counselor is not fluent. While this is a commendable start, play therapy does not seem to be taking place in many elementary school settings across the United States. Play Therapy can be an effective service for children of diverse backgrounds. It is essential that counseling services within schools be tailored to include professionals who are trained in play therapy and multicultural counseling so as to cater to the specific needs of children who speak a language in which the counselor is not fluent.

While 71.9% of the participants stated that they had received some sort of play therapy or non-verbal counseling techniques training, many of them report to only sometimes utilizing a minimum of the techniques, materials, and strategies available to them $M = 2.99$ ($SD = .74$). This study indicates that elementary school counselors are only utilizing some of the basic tenets of play therapy sometimes. Perhaps elementary

school counselors are not receiving adequate training in their programs. This coincides with the inadequate training in child therapies in general. Despite the continued overwhelming mental health needs for children, there also continues to be a failure of existing mental health programs to provide adequate clinical training in working with the population (Tuma, 1990). The findings of this study may be useful in developing new curriculum for play therapy and school counseling. They may also help begin a movement for school counselors and counselor educators to be more innovative in the work that they do with children. Perhaps it will motivate a new generation of elementary school counselors to be intentional about seeking out quality training and qualified supervision (Landreth, 2001).

Counselor Educators

Perhaps re-educating elementary school counselors about play therapy would be a possible solution. Leading play therapists and counselor educators may consider implementing better play therapy training programs for their school counseling graduate students. School counselor training programs have given little attention to preparing school counselors to provide play therapy for children, let alone children who speak a language in which the counselor is not fluent. Play therapy in the schools, as an adjunct to current counseling programs, is a logical extension of this therapeutic dimension. The primary reason for taking play therapy to the elementary school setting is the ultimate benefit this intervention brings to all aspects of the child's life (Landreth, 2001).

Individuals who have worked with children from the play viewpoint have noted greater appreciation for the children and perceive themselves to be effective in the work that they do with children. Counselor educators may consider developing play therapy courses and

adding them to their curriculum for aspiring school counselors (Sandhu, 2001). There are, unfortunately, too few training opportunities for school counselors wanting to learn about play therapy. Although there are increasing numbers of individuals providing workshops in the field, there are not nearly enough universities that offer course work and supervised experience in play therapy. There is a need to devise training programs that incorporate theoretical models, treatment strategies, and supervision specific to play therapy. Through these methods the concepts and principles of play therapy can be taught to a new generation of professionals, who will find that they are counseling with children who do not speak a language in which the counselor is not fluent.

Supervisors

It is both clinically and ethically imperative that elementary school counselors interested in play therapy training have an adequate supervised experience in the field. It is an ethical mandate of most professional codes. Although the assessment of competence by a supervisor is ambiguous at best, it is nevertheless an obligation for those working with any population, in particular one like children who speak a language in which the counselor is not fluent, to have adequate supervision in the field (Landreth, 2001).

Therefore, it would benefit appropriate school administrators (i.e. chair of the guidance and counseling department), counselor educators, and leading play therapists in the field to serve as play therapy supervisors for aspiring elementary school counselors who wish to implement such techniques in their practice with children.

Further Research

This was a first study exploring the frequency of use of play therapy or non-verbal counseling techniques and counselor perceived self-efficacy when counseling children who do not speak a language in which the counselor is not fluent. The findings suggest several areas for future exploration. It would be useful to investigate the factors that contribute to the frequent utilization of only a few play therapy techniques and the exclusion of others.

With the inverse relationship between play therapy training and frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent, it would be useful to investigate whether training by way of a workshop, a graduate course, or supervision would have an impact on the relationship between play therapy and frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent. This in turn, would have implications for training.

It would also be useful to investigate the types of training and supervision these counselors have received for play therapy and determine if they are effective. Perhaps the participants of this study received their non-verbal counseling techniques or play therapy training in the form of a workshop versus a university offered play therapy graduate course. It is important to be reminded that workshops, although helpful, cannot be considered a replacement for the depth of training received in a graduate course (Landreth, 2001).

Furthermore, it might be useful to separate the types of training that elementary school counselors have received, be it in the form of a single workshop, a graduate

course, a full curriculum, or supervision and determine the counselors' perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent.

Furthermore, many school counselors who purport to utilize non-verbal counseling techniques or play therapy are limited by their own creativity. Many school counselors are not utilizing other non-verbal counseling techniques, because they do not feel comfortable with some of the materials that are available to them. Many school counselors do not utilize watercolors or paints, because they are difficult to clean (Stone & Bradely, 1994). A future study may investigate why certain types of non-verbal counseling techniques or play therapy techniques are preferred over others.

Further research may look at the aforementioned scenarios and eliminate the linguistic component and simply generalize the study.

Conclusions and Recommendations

A review of the literature shows that the number of school aged children who do not speak a language in which the counselor is fluent will continue to increase throughout the course of the next 50 years (Fix & Zimmerman, 1993). Elementary school counselors will be faced with the task of providing adequate services for these children. Successfully providing adequate counseling services for children who speak a language in which the counselor is not familiar is necessary if it is expected that all children have the opportunity to lead mentally healthy lives.

This study, which attempted to gain a better understanding of the frequency of use of non-verbal counseling techniques (play therapy) by elementary school counselors

when counseling children who speak a language in which the counselor is not fluent and counselor perceived self-efficacy, has provided interesting results for consideration and further research. The findings of this study show that elementary school counselors only sometimes utilize play therapy techniques when counseling with children who speak a language in which the counselor is not fluent and that even then the methods and materials used are limited.

Limited information is available regarding the frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent. There is also limited information available regarding counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent. Results from this study that link experience and preparation from training to a higher frequency of use of non-verbal counseling techniques when counseling children who speak a language in which the counselor is not fluent and a more positive self-efficacy perception by counselors when counseling children who speak a language in which the counselor is not fluent may help improve counselor training and counselor selection, and may ultimately improve the types of services that are offered to children who speak a language in which the counselor is not fluent. More exploratory studies should be conducted in order to help counselors gain insight into issues related to counseling children who speak a language in which the counselor is not fluent.

This study has investigated the notion that play therapy is a specialization within the counseling profession that can easily be adapted to the school setting and benefit many children of diverse backgrounds regardless of culture, ethnicity, or linguistic differences. It has differentiated factors, which are associated with the frequency of use

of play therapy techniques and counselor perceived self-efficacy when counseling children who speak a language in which the counselor is not fluent and those which are not. The results of this study inform both school counselors and counselor educators of means by which they can improve services offered to children of diverse backgrounds.

REFERENCES

- American Counseling Association. (1995). *Code of ethics and standards of practice*. Alexandria, VA: Author
- American School Counselor Association. (1996). *Ethical Standards for School Counselors*, Alexandria, VA: Author.
- American School Counselor Association. (1993). *The American School Counselor Association position statements*. Alexandria, VA: Author.
- Arredondo, P., Toporek, R., Brown, S.P., Jones, J., Locke, D.C., Sanchez, J., & Stadler, H., (1996). Operationalization of the multicultural counseling competencies. *Journal of Multicultural Counseling and Development*, 24, 42-78.
- Babbie, E. (1990). *Survey research methods*. Belmont, CA: Wadsworth.
- Berger, E.H. (1996). Multiple intelligences: enabling diverse learning. *Early Childhood Education Journal*, 23, 249-253.
- Bodenhorn, N., (2002). Development of the school counselor self-efficacy scale. 62-03A, 922.
- Cardenas, J., Taylor, L., & Adelman, H.S. (1993). Transition support for immigrant students. *Journal of Multicultural Counseling and Development*. 21, 203-210.
- Christensen, T.M., (2001). Introduction to Play Therapy – handout.

- Cochran, J.L. (1996). Using play and art therapy to help culturally diverse students overcome barriers to school success. *The School Counselor*, 43, 287-298.
- Cohen, J. (1988). *Statistical power analysis for the behavioral sciences*. Hillsdale, NJ: Lawrence Erlbaum Associates.
- Constantine, M.G. & Yeh, C. (2001). Multicultural training, self-construals, and multicultural competence of school counselors. *Professional School Counselor*, 4, 202-207.
- Creswell, J.W. (1994). *Research design: Qualitative and quantitative approaches*. Thousand Oaks, CA: Sage.
- DeLeon-Yznaga, S. (2000). The effects of solution-focused brief therapy training on the self-efficacy of elementary and secondary school counselors. 61-03A, 894.
- Dillin, J.T. (1991). *Review of Educational Research*. 54, 327-361.
- Esquivel, G.B. (1998). Group interventions with culturally and linguistically diverse students. In K.C. Stoiber & T.R. Kratochwill (Eds.), *Handbook of group intervention for children and families* (pp. 252-267). Boston: Allyn & Bacon.
- Esquivel, G.B., & Keitel, M.A. (1990). Counseling immigrant children in the schools. *Elementary School Guidance and Counseling*, 24, 213-221.
- Fix, M., & Zimmerman, W. (1993). *Educating immigrant children: In the changing city*. Washington, DC: The Urban Institute Press.
- Fradd, S.H., & Weismantel, M.J. (1989). *Meeting the needs of culturally and linguistically different students: A handbook for educators*. Boston, MA: College-Hill.

- Frevert, V.S., & Miranda, A.O., (1998). A conceptual formulation of the latin culture and the treatment of latinos from an adlerian psychology perspective. *The Journal of Individual Psychology*, 54, 291-309.
- Fuertes, J.N., & Westbrook, F.D. (1996). Using the social, attitudinal, familial, and environmental (s.a.f.e) acculturation stress scale to assess the adjustment needs of Hispanic college students. *Measurement and Evaluation in Counseling Development*, 29, 67-76.
- Gay, L.R., & Airasian, P. (2000). *Educational research: Competencies for analysis and application*. Columbus, OH: Merrill.
- Glasgow, G.F. & Gouse-Sheese, J. (1995). Theme of rejection and abandonment in group work with caribbean adolescents. *Social Work with Groups*, 17(4) 3-27.
- Griggs, S.A., & Dunn, R. (1989). The learning styles of multicultural groups and counseling implications. *Journal of Multicultural Counseling and Development*, 17(4), 146-155.
- Helms, J.E. & Cook, D.A. (1999). *Using race and culture in counseling and psychotherapy: theory and practice*. Boston: Allyn & Bacon.
- Herring, R.D., (1997). *Multicultural counseling in schools: a synergetic approach*. American Counseling Association, Alexandria, VA.
- Hinkle, D.E., Wiersma, W., & Jurs, S.G. (1998). *Applied statistics for the behavioral sciences* (4th ed.). Boston: Houghton Mifflin.

- Holcomb-McCoy, C.C. (2001). Exploring the self-perceived multicultural counseling competence of elementary school counselors. *Professional School Counselor*, 4, 195-201.
- Keppel, G. (1991). *Sexuality today: The human perspective* (6th ed.). New York: McGraw-Hill.
- Keys, K.L., (1989). The counselor's role in helping students with limited English proficiency. *The School Counselor*. 37, 144-148.
- Kopala, M., Esquivel, G., & Baptiste, L. (1994). Counseling approaches for immigrant children: Facilitating the acculturative process. *School Counselor*, 41, 352-359.
- Kranz, P.L., Kottman, T., & Lund, N. L. (1998). Play therapists' opinions concerning education, training, and practice in play therapies. *International Journal of Play Therapy*, 6(2), 73-87.
- Landreth, G.L. (2001). *Innovations in play therapy: issues, process, and special populations*. Philadelphia: Brunner-Routledge.
- Landreth, G.L. (1987). Play therapy: facilitative use of child's play in elementary school counseling. *Elementary School Guidance and Counseling*, April, 253-261.
- Lee, C.C. (1997). *Multicultural issues in counseling: new approaches to diversity*. Alexandria: American Counseling Association.
- McMillan, J.H. & Schumacher, S. (1997). *Research in education: a conceptual introduction, Fourth edition* (296-302). New York: Addison-Wesley Educational Publishers, Inc.

- Melchert, T.P., Hays, V.L., Wiljanen, L.M., & Kolocek, A.K. (1996). Testing models of counselor development with measure of counseling self-efficacy. *Journal of Counseling and Development, 74*(6), 640-644.
- Miranda, A.O., Frevert, V.S., & Kern, R.M. (1998). Lifestyle differences between bicultural, and low- and high-acculturation- level latino adults. *The Journal of Individual Psychology, 54*, 119-134.
- Morse & Russell. (1988). How elementary counselors see their role: an empirical study. *Elementary School Guidance and Counseling, 23*(1), 54-62.
- Myers, J.E., Sweeney, T.J., & White, V.E. (2002). Advocacy for counseling and counselors: A professional imperative. *Journal of Counseling and Development, 4*, 394-402.
- Omizo, M.M., & Omizo, S.A. (1989). Art activities to improve self-esteem among native Hawaiian children. *Journal of Humanistic Education and Development, 27*, 167-176.
- Pinholater, R.T. (1983). From dark to light: The use of drawing to counsel nonverbal children. *Elementary School Guidance & Counseling, 17*, 268-273.
- Pomales, J., & Williams, V. (1989). Effects of level of acculturation and counseling style on hispanic students' perceptions of counselor. *Journal of Counseling Psychology, 36*, 79-83.
- Pryor, D.B., & Tollerud, T.R., (1999). Applications of adlerian principles in school settings. *Professional School Counseling, 2*, 299-304.
- Pryczak, F., & Bruce, R.R. (1998) *Writing empirical research reports*. Los Angeles: Pyrczak.

- Ramos-Sánchez, L., Atkinson, D.R., & Fraga, E.D., (1999). Mexican-americans' bilingual ability, counselor bilingualism cues, counselor ethnicity, and perceived counselor credibility. *Journal of Counseling Psychology*, 1, 125-131.
- Rotter, J.C., Horak, R.A., & Heidt, H.M., (1999). Incorporating children's drawings as early collections in adlerian psychotherapy. *The Journal of Individual Psychology*, 55, 316-327.
- Sandhu, D.S., (2001). Elementary school counseling in the new millennium. *American Counseling Association Publishing*, 37-47, 209-222.
- Santiago-Rivera, A.L. (1995). Developing a culturally sensitive treatment modality for bilingual Spanish-speaking clients: Incorporating language and culture in counseling. *Journal of Counseling and Development*, 74(1), 12-17.
- Schmidt, J.J. (1999). *Counseling in schools: essential services and comprehensive programs*. Needham Heights, MA: Allyn and Bacon Publishing.
- Seymour, H. (2001). Helpmate unto him. *Family Therapy*, 28, 39-43.
- Skutnabb-Kangas, T. (1984). *Bilingualism or not: The education of minorities*. Clevedon, England: Multilingual matters.
- Stone, L.A., & Bradley, F.O., (1994). *Foundations of elementary and middle school counseling*. White Plains, N.Y.: Longman Publishers.
- Suarez-Orozco, M.M. (1991). Immigrant adaptation to schooling: A Hispanic case. M.A. Gibson & J.U. Ogbu (Eds.) *Minority status and schooling: A comparative study of immigrant and involuntary minorities* (pp. 37-61). New York: Garland
- Sue, S., & Zane, N. (1987). The role of culture and cultural techniques in psychotherapy. *American Psychologist*, 1, 37-45

- Tang, M. Fouad, N.A., Smith, P.L., (1999). Asian Americans' career choices: A path model to examine the factors influencing choices. *Journal of Vocational Behavior*, 54, 142-157.
- Tashakkori, A., & Teddlie, C. (1998). *Mixed methodology: Combining qualitative and quantitative approaches*. Thousand Oaks, CA: Sage.
- Thompson, R.A., (2002). *School counseling: best practices for working in the schools*. Brunner-Routledge. New York & London.
- Trostle, S.L. (1988). The effects of child-centered group play sessions on social-emotional growth of three- to six-year-old bilingual Puerto-Rican children. *Journal of Research in Early Childhood Education*, 2(3), 93-106.
- U.S. Bureau of the Census. (2000). *Growth of U.S. population*. Washington, DC: U.S. Government Printing Office.
- U.S. Bureau of the Census. (1998). *Growth of U.S. population by race and ethnicity*. Washington, DC: U.S. Government Printing Office.
- Westbood, M.J., & Ishiyama, F.I. (1990). The communication process as a critical intervention for client change in cross-cultural counseling. *Journal of Multicultural Counseling and Development*, 18(4), 163-171.
- Zayas, L.H., & Solari, F. (1994). Early childhood socialization in Hispanic families: Context, culture, and practice implications. *Professional Psychology: Research and Practice*, 25(3), 200-206.

APPENDIX A

Letter to Human Subjects Committee

Dr. Matthew Stanford, Chair
Human Subjects Committee
Department of Psychology
University of New Orleans
New Orleans, LA 70148

Dear Dr. Stanford:

I am a doctoral student in Counselor Education at the University of New Orleans. I am writing this letter to request a waiver of the formal review process by the Human Subjects Review Committee for my dissertation research project. The chairperson of my dissertation committee is Dr. Teresa Christensen, assistant professor of Counselor Education in the Department of Educational Leadership, Counseling, and Foundations.

My dissertation instruments consist of a survey designed to assess the frequency of use of non-verbal counseling techniques by elementary school counselors as well as a survey to assess counselor perceived self-efficacy. I plan to survey members of the American School Counselor Association and members of the Association for Play Therapy. The participants will receive the survey instrument and a self-addressed stamped envelope. Two weeks later, all of the participants will receive a postcard reminding them to complete the survey if they have not already done so, and thanking them for their participation. No data will be collected that could be used to identify any of the potential participants.

Please contact me by phone (830-0159) or e-mail (rsalgado@uno.edu) if you have any questions. If you prefer to speak to Dr. Christensen, her phone number is 280-7434 and her e-mail address is tchriste@uno.edu.

Thank you for your consideration in this matter.

Sincerely,

Roy A. Salgado, Jr., M.Ed.
Doctoral Candidate

APPENDIX B

Letter from Human Subjects Committee

To: Roy A. Salgado, Jr., M.Ed.
Doctoral Candidate
Department of Educational Leadership, Counseling and Foundations

From: Matthew S. Stanford, Ph.D.
Associate Professor and Chair
University Committee for the Protection of Human Subjects in Research.

Date: 12/16/02

Because of the anonymous nature of your project it is exempt from committee review as stated in section 46.101 B, paragraph 2 of the OHRP guidelines.

Attachment #1: [mstanfor.vcf](#)

APPENDIX C

Letter to Participants

December 1, 2002

Dear Colleague:

I am conducting a study related to the frequency of use counseling techniques by elementary school counselors. The results of this study will provide valuable information, which can be utilized to ensure that continuing education programs address the professional development of elementary school counselors. The results may also be used to guide counseling programs as they prepare students to effectively use non-verbal counseling techniques in an elementary school setting.

I would greatly appreciate your assistance with my research. I have enclosed a survey and a self-addressed envelope. The survey will take approximately 15-20 minutes to complete.

Thank you for your time and cooperation.

Sincerely,

Roy A. Salgado, Jr., M.Ed., NCC

APPENDIX D

The Salgado School Counseling Techniques Inventory

The Salgado School Counseling Techniques Inventory

Directions: The following are a list of counseling techniques commonly used by school counselors. Respond to the following items by marking the answer that most appropriately pertains to you.

		5 = Always	4 = Often	3 = Sometimes	2 = Rarely	1 = Never
		5	4	3	2	1
1.	I use art/ drawings when I counsel children.					
2.	I use materials that represent a diverse population. Ex: Ethnically different dolls, figurines, religious symbols, and regional paraphernalia.					
3.	I use dolls and dollhouses when I counsel children.					
4.	I use puzzles when I counsel children.					
5.	I use non-structured games when I counsel children.					
6.	I use a sand tray when I counsel children.					
7.	I use structured games when I counsel children.					
8.	I use symbol exploration when I counsel children.					
9.	I use objects used in everyday activities when I counsel children, such as old keys, checkbooks, wallets, purses, pots and pans, and clothing.					
10.	I use puppets when I counsel children.					
11.	I use photographs and pictures when I counsel children.					
12.	I set non-verbal limits when I counsel children.					
13.	I use pencils, markers, and crayons when I counsel children.					
14.	I use collages when I counsel children.					
15.	I use an inflatable punching bag when I counsel children.					
16.	I use building toys when I counsel children.					
17.	I use craft projects when I counsel children.					
18.	I use paints and brushes when I counsel children.					
19.	I use clay with or without water when I counsel children.					
20.	I use toys such as cars, trucks, police, an ambulance, kitchen utensils, food, Dr.'s kit, etc. when I counsel children.					
21.	I use construction supplies when I counsel children.					
22.	I use musical instruments when I counsel children.					
23.	I use sports/ physical activity equipment when I counsel children.					
25.	I use rope when I counsel children.					
26.	I use masks and hats when I counsel children.					
27.	I use play money when I counsel children.					
28.	I observe motor skill development when I counsel children.					
29.	I observe the materials that children use when I counsel them.					
32.	I observe facial expressions exhibited by children when I counsel them..					
30.	I make note of specific behavioral patterns and cues when I counsel children.					
31.	I make note of themes that appear within and across sessions.					

APPENDIX E

Permission to use the Counselor Self-Efficacy Scale

Message
Roy Salgado,

I received your voice message, and you do have my permission to use the Counselor Self-Efficacy Scale for research purposes. I wish you luck with your project, and would appreciate a copy of the report of the final results.

Thanks,

Tim Melchert

Timothy P. Melchert, Ph.D.
Associate Professor and Chair
Department of Counseling and Educational Psychology
Marquette University
146 Schroeder Complex
Milwaukee, WI 53201
Phone: 414-288-7379
FAX: 414-288-3945

APPENDIX F

Counselor Self-Efficacy Scale

Counselor Self-Efficacy Scale

Directions: This part of the questionnaire is designed to evaluate your confidence in your own counseling abilities. Choose the response, which most accurately describes your counseling abilities.

	5 = Strongly Agree	4 = Agree Moderately	3 = Neutral/ Uncertain	2 = Disagree Moderately	1 = Disagree Strongly
	5	4	3	2	1
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
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16.					
17.					
18.					
19.					

	to group work.					
20.	I can function effectively as a group leader/ facilitator.					

(Melchert, Hays, Wiljanen, and Kolocek, 1996)

VITA

Roy A. Salgado, Jr. earned a Bachelor of Science degree in Psychology from Tulane University in 1995 and a Master's of Education degree in Counseling from the University of New Orleans in 2000. He is a National Certified Counselor and is working toward his license in counseling in the state of Louisiana.

Roy has earned several honors as a graduate student at the University of New Orleans. He was honored with the 2000 Outstanding Graduate in Counseling Award by the faculty of the Counselor Education department, the 2000 Outstanding Graduate in Counseling Award by the Counseling Organization of Graduate Students, the 2001 Outstanding Leadership Award by the Student Government of the University of New Orleans, and the 2002 Outstanding Research Award by the Association for Counselor Education and Supervision.

While earning his Master's degree, Roy taught Spanish in two parochial schools in the New Orleans area. His experience as an educator at the high school level, has allowed him the opportunity to acquire additional insight when working with adolescents, a population with which he has extensive experience. In addition to the training that Roy has received in counseling, he has also received specialized training in play therapy and non-verbal counseling techniques. This specialized field in counseling has been of such great interest to Roy that he has sought opportunities outside of his required internship to practice these specialized counseling skills.

Roy has had several internships as a graduate student including, Good Shepherd

School, K-Bar-B Youth Ranch, Bethany Home, Asevedo and Associates, Mid-City Counseling Center, Archbishop Rummel High School, and Pastoral Counseling Center. Each of these sites has allowed Roy the opportunity to learn and grow in his profession as a counselor and future counselor educator. Roy has recently accepted a position at Xavier University of Louisiana for the Fall of 2003 as an assistant professor of counselor education.

DOCTORAL DISSERTATION REPORT

CANDIDATE: Roy A. Salgado, Jr.

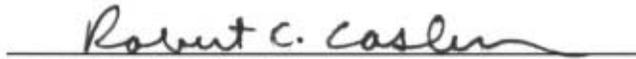
MAJOR FIELD: Counselor Education

TITLE OF DISSERTATION: Counseling Children Who Speak A Language In Which The Counselor Is Not Fluent; Play Therapy And Counselor Perceived Self-Efficacy

APPROVED:

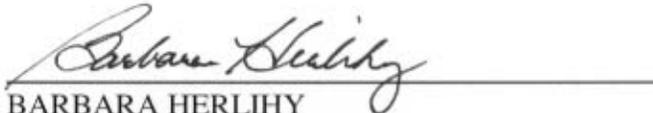


Major Professor & Chair
TERESA CHRISTENSEN

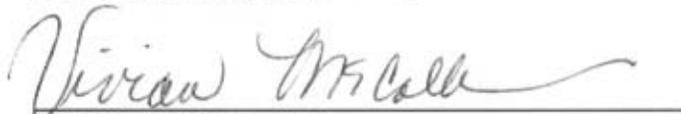


Dean of the Graduate School

EXAMINING COMMITTEE:



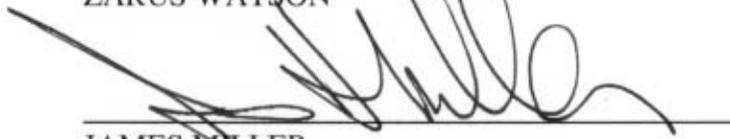
BARBARA HERLIHY



VIVIAN MCCOLLUM



ZARUS WATSON



JAMES MILLER

DATE OF EXAMINATION:

May 8, 2003