THE PERFECT MATCH: TOWARD MORE EFFECTIVE COUNSELLING

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I. INTRODUCTION:

For years now the research in psychotherapy has been aimed at the question, "Is psychotherapy effective?" There is no single answer to this question as yet, and in fact it is now considered a meaningless question because it is too broad (Lazarus & Davidson, 1971). "Is psychotherapy effective?" Ask the psychotherapist - he might say yes. Ask his client - he might say no. Ask the parent or the mate - they might say yes or no. So the effectiveness of psychotherapy seems to have to do with one's individual viewpoint. Even given one person and someone else who knows him very well (say a husband or wife, or mother or father), and another person who's gotten to know him quite well (a therapist), there can be lack of agreement. Thus the whole question of whether or not psychotherapy in general is effective has been replaced by various specific questions such as, "What type of therapist is most effective with what type of client using what kind of therapy?"

Kiesler (1971) states that people doing research in psychotherapy all claim to have the one best way, or that there <u>is</u> a best way to do psychotherapy. However, there may not be a best way for everybody. There may be a best way for a given individual and Kiesler says that it takes different therapist behaviours to bring out different changes in different kinds of people.

The whole area of matching and stimulating development or bringing about developmental changes has been considered by Piaget (1948), Kohlberg and his colleagues (Kohlberg, 1963, 1966; Turiel, 1966, 1969), and Hunt (1971), among others. Piaget's viewpoint was definitely psychological, Kohlberg's was psychological with an emphasis on moral development, and Hunt looked at a matching model in education or, 'how can a teacher and children be put together in such a way that best results occur educationally'.

Now it's our intention in this paper to examine the possible applications of Kohlberg's theory to counselling theory. We also suggest that if we are going to test clients, and we often do, that in order to most effectively match counsellor and client it might be wise to use the same test. We suggest a developmental test to be used on both the counsellor and client as an introductory step in the direction of examining the question, "What type of therapy with what type of therapist is best for what type of person?"

II. KOHLBERG'S THEORY OF MORAL DEVELOPMENT:

Kohlberg and his associates have elaborated what they call a cognitive approach to moral development (Blatt & Kohlberg, 1969; Kohlberg, 1963, 1964, 1966; Kohlberg & Kramer, 1969; Kohlberg & Lockwood, 1970; Kohlberg & Turiel, 1971; Turiel, 1966). Kohlberg doesn't mean to imply by his theory that some stages are more moral than others. What he is saying, basically, is that morality is as you view it from your developmental stage. For instance, a person at a lower stage would consider it very moral to get away with something that someone at a higher developmental stage would not be able to do. If a person who is operating at the second developmental stage steals something and gets away with it, he would consider that moral. Kohlberg is not saying that some people are immoral and some people are moral; he is saying that moral is as you see it through your developmental viewfinder.

One of the most important things about this cognitive approach is that the stages follow one another distinctly and clearly through a sequence in which movement over time is forward and in which the order of stages is unchanging. The model is also hierarchic, that is, a person does not reach stage 4 without first having passed through stages 1, 2, and 3. Each stage is not simply an addition to the previous stage but represents a restructuring of thought - the ways people deal with things change, their world view changes, and thus each stage represents a qualitatively different organization of thought and is sort of a holistic way of relating to the world. Society or culture may accelerate or hinder the movement of individuals through these stages, but this doesn't change the quality or order of the different types of thinking that one experiences in these stages.

Achieving the next developmental stage is not inevitable, that is, not every individual is going to make each stage, but for those who do, each successive stage is marked by differentiation and integration, or complexity and resolution, improving the individual's ability to resolve conflicts. Conflicts at a higher stage are seen as much more complex, are thought through much more deeply, and are resolved taking into consideration many more aspects than would conflicts at lower stages.

Kohlberg identifies three general levels of moral judgment: preconventional, conventional, and post-conventional. Within each level there are two distinct stages. A summary characterization follows:

I. Preconventional Level:

At this level the individual is responsive to cultural rules and labels of good and bad, right or wrong, but interprets these labels in terms of either the physical or the hedonistic consequences of action (punishment, reward, exchange of favours) or in terms of the physical power of those who enunciate the rules and labels. The level is divided into the following two stages:

Stage 1 - Punishment and obedience orientation

Stage 2 - Instrumental relativist orientation

II. Conventional Level:

Maintaining the expectations of one's family, group, or nation is valuable in its own right, regardless of immediate or obvious consequences. It is characterized by active support of the fixed rules or authority in society. At this level there are the following two stages:

Stage 3 - The interpersonal concordance or 'good boy - nice girl' orientation

Stage 4 - The 'law and order' orientation

III. Post-Conventional, Autonomous, or Principled Level:

This level is characterized by a clear effort to define moral values and principles which have validity and application apart from the authority or groups of persons who hold them and apart from individual identifications with these groups.

Stage 5 - The social-contract legalistic orientation

Stage 6 - The universal ethical principle orientation

Hunt (1971) argues for matching models in education in his recent book of the same name in which he applies the Kohlberg theory. One of the dimensions he uses in his matching model is that of moral maturity, as defined by Kohlberg (1963, 1966). Hunt specifies the match as an environment consisting of content primarily at the stage above the child's present stage, or secondarily, content at the same stage as the child in which the children are grouped according to stage of development. The goal is to produce developmental progression. Depending on developmental level of the group, the environment is matched in terms of learning styles and teaching methods. He states that it is the way they learn that will differ, not what or how much they

learn. For example, if you have children who like approval, the teacher knows this and treats them with that knowledge in mind.

III. IMPLICATIONS FOR COUNSELLING THEORIES AND COUNSELLING:

What application does the Kohlberg theory have to counselling theories? We would like to propose a tentative classification of counselling theories in terms of developmental level within the Kohlberg theoretical framework. Carkhuff and Berenson (1967) view different models of therapy as being effective at different levels of client population. They then elaborate which therapies may be most effective with which types of people. We see this as being a valuable insight and would like to speculatively place some of these theories in a broader theoretical framework.

Behaviour Therapy - seems to fit into Kohlberg's preconventional level

(stages 1 & 2) in that both client and therapist at this level of development see themselves as products of their environment. That is, life is determined and because of this they cannot accept responsibility for themselves or their actions. There is a basically external orientation to rules and justice which is interpreted in terms of physical or hedonistic consequences. Moral behaviour is acquired through the conditioning of anxiety responses with cultural norms as the base. People at this level are bound by impinging stimuli and in the case of morality, by the physical power of those who enunciate the rules. This level of therapy is not geared to help the client function at higher levels, but is a phenotypic approach in that is is concerned with immediate and observable behavioural change. Here the life of the mind is subordinated to the laws of the body. The mind is reduced to the physiological and the physical.

Client Centered Therapy - is basically that of stage 3, interpersonal concordance at the conventional level. This is the person who doesn't really know what he wants because he is so used to doing what other people want, and pleasing them. The emphasis is on the reflection of communication and verbal expression of the feelings. This type of therapy helps the client get in touch with his feelings and encourages him to do what he wants to do. At this stage, moral value resides in performing good or right roles. This orientation is reflected in one of Roger's basic premises - namely, that the basic core of man's personality is good and that with the proper opportunities, man will develop in a positive direction. The therapist reflects the client's communication and does

nothing that may hurt his client or produce any bad feelings that may be directed toward him. They form a sort of 'mutual admiration society' in which the human personality is to be magnified and praised.

<u>Psychoanalysis</u> - seems to fit the 'law and order' orientation at the conventional level. Psychoanalysis seems to provide the insight which may be used as an excuse for why a person is a certain way. E.g. "I am like that because my parents trained me that way and I can't change" - a typically legalistic orientation. The insight is there without accompanying emotion. Psychoanalysis provides the justification for a person acting the way he does. Psychoanalysis defines morality as conformity to cultural standards and views moral development as the incorporation of a set of rules and values that come from the external world. They maintain that morality is a negative cultural imposition on the individual, and is regulated by sanction-guilt. The psychoanalyst doesn't do much about the person's guilt except tell him why he has it, because insight doesn't necessarily erase guilt.

Existential Therapy - fits very closely to Kohlberg's post-conventional, autonomous, or principled level. It more closely fits the stage 5 person who recognizes an arbitrary element in rules, which is necessary for agreement. This person is socially legalistic in that his duty is defined in terms of contract, and majority will and welfare. People at this level start to develop an individual conscience and through counselling come to their own conclusions which are partly legal and partly a result of their own thoughts and feelings. People at this level are starting to think for themselves, they are developing a measure of autonomy, and probably engage in 'psychotherapy' to themselves. Existential therapy defines man's condition and the direction he must go. Existential therapy might be defined as a genotypic theory in that it is designed to produce cognitive and affective structural reorganization. If humanism and existentialism could be accepted as being somewhat similar, man's moral obligation would be to reach his fullest potential, as man is the ultimate value.

Can the use of the Kohlberg model of moral development assist us in reaching some of the desired objectives in matching counsellor, client, and specific client problem? Turiel (1966) designed an experiment in which he matched experimenter and subject according to moral developmental level. He found that moral development was maximally facilitated when the experimenter communicated

to the subject at one level above the subject's own level.

The model of Carkhuff and Berenson (1967) dictates "that persons at higher levels of functioning can help persons at lower levels to achieve higher levels of functioning (p.40)."

Dabrowski (1969) argues that the standard therapeutic framework must be ignored and that the procedure or method that promises to be of greatest benefit for any given patient, in his situation and at that time, must be used. He says that the therapist needs to be flexible and that he must adapt himself and his approach to the specific functional components of each individual case. "Thus, we may concurrently or successively utilize all or any of the methods of psychoanalysis, group therapy, individual psychology, relaxation therapy, 'positive regression', integrative therapy (Mowrer), etc. (p.22)."

Kohlberg has developed a 'test', a series of moral dilemmas, which he claims is a measure or test of his theory. We would like to suggest that, while this test may be used to determine developmental level of a client population, it could also be used to determine developmental level of the therapist. This could be a start in matching therapist and client in the therapeutic relationship.

This points to the need for a new area of research in which the counsellor is not immune from being tested. Counsellors and clients could be matched on the basis of Kohlberg's developmental level. Research could be done in which development levels were manipulated and the dependent variable would be therapeutic outcome. It could then be determined whether there is any validity to this matching model in counselling, and, if it is valid, the most effective combinations of therapist and client matches could be determined. One of the hypotheses would be that counsellors who are at a lower developmental stage than their client would produce negative or no growth in the client. We think that this combination would also produce the highest termination rate before therapy had been 'completed'.

This matching model has far-reaching consequences into the entire area of counselling psychology. Counsellors and clients would now <u>both</u> be 'measured'. We suspect that many counsellors would object to this and be reluctant to participate in this type of a model. How many counsellors would really be willing to admit that they are at, for example, stage 2, and should only be taking clients who are at stage 1?

What about our counsellor training programs? Research has shown that outcome in psychotherapy is, at best, only slightly positive. Does this mean that we are turning out counsellors who are not at a very high developmental level? Or does it mean that the right counsellor has only a random chance of being put together with the right client at the most opportune time? Will research show that we should be more concerned with the global development of our counsellor trainees and that we should be facillitating their growth to the highest possible level? Or will it show that we should be turning out a certain number of counsellors at each developmental level?

We think that one of the largest barriers will come from the counsellors themselves, in that, they may be very reluctant to be evaluated in terms of developmental level. This is very understandable for a number of reasons. Some may be reluctant to be evaluated for either positive or negative defensive reasons, i.e. some may be reluctant because they see it as infringing on their personal rights, while others may be defensive because they don't wish to see themselves as being at a low developmental level. Hopefully, though, we would find some psychologists who really do have their clients' welfare as their greatest concern, and would be willing to participate in this kind of endeavour, if there would be a possibility that it would promote the effectiveness of psychotherapy as a whole.

So far, in this discussion, we have talked about the individual counselling situation, but matching clients and counsellors could also be carried into the group situation. Hunt (1971) has made a move in this direction in education, by dividing children into groups of the same developmental level, and having the teacher meet the needs of a particular group. We think that a similar thing could be done in group psychology. That is, have each group consist of people of the same developmental level. But, we would go one step further than Hunt (1971), and have the therapist 'leveled' and matched with the best-fit group, thus producing the most positive outcome.

Given the validity of matching therapist, client, and client problem, will research show that developmental levels of counsellor and client will be a sufficient matching criterion? Or will it show that therapists will have to be versatile enough to use different therapeutic frameworks and procedures for each client and situation? If the latter is the case, this would again have far reaching implications into our counsellor training programs, in that counsellors will have to have a much broader background, and greater knowledge regarding their ability to implement different therapeutic techniques in specific situations with particular individuals.

In summary, research methods have not been very effective in answering the question, "Is psychotherapy effective?" We're suggesting that rather than a continued search for new answers within old frameworks, let us ask new questions. We have attempted to place some therapeutic theories within a single theoretical framework and touched on some of the implications that research within this framework may have for a matching model in counselling.

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