EFFECTS OF SOCIAL COGNITIVE TRAINING AND MINDFULNESS TECHNIQUE ON COUNSELLOR EFFECTIVENESS OF PRE-SERVICE COUNSELLORS IN NIGERIAN UNIVERSITIES

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Abstract:
The study experimentally investigated the effectiveness of Social Cognitive Training (SCT) and Mindfulness Technique (MT) in enhancing counsellor effectiveness among pre-service counsellors. The pretest-posttest control group experimental design with a 3x3 factorial matrix was used. Two valid and reliable instruments were used to assess counsellor self-efficacy and emotional intelligence. Data were collected from 111 pre-service counsellors selected from 3 Universities in Nigeria, offering counsellor education programme, who were randomly assigned to experimental and control conditions. Three hypotheses were tested at 0.05 level of significance. Using ANCOVA the two treatment packages were found to be effective in fostering counsellor effectiveness among the participants. Implications of the findings for implementing a dynamic based counsellor education curriculum and programme targeting counsellor effectiveness were discussed.

Keywords: social cognitive training; mindfulness technique; counsellor self-efficacy; pre-service counsellors; counsellor education

1. Introduction

The counsellor is probably the most studied object in counselling and psychology research history. Much of that effort has been guided by a desire to understand how to train successful and effective counsellors. Counsellor effectiveness is a crucial factor for counsellors upon entering the profession to work effectively with clients and providing good quality services. The concept ultimately concerns helping someone else change within a therapeutic context (Agokei, 2011). The challenge of this is that counselling actions partly concern getting someone else to act rather than being exclusively focused on the person’s own actions. The ability of a counsellor to be effective with people plays
a huge role in fulfilling the essence of counselling intervention and achieving its goals (Larson & Daniels, 1998). Hence, being effective to a large extent describes the typified performance of the counsellor. In other words, counsellor effectiveness emphasizes mastery and performance competence with clinical finishing accruing from the belief of efficaciousness. In this light, counsellor educators are ethically charged with ensuring that new counsellors in the field are competent to meet standard set (American Counselling Association, 2005).

To this end, it is expected that by the end of a counsellor education programme, pre-service counsellors are expected to be proficient in their designated function as counsellors. Unfortunately, counsellor effectiveness of pre-service counsellors is greatly hindered by several factors with their attendant grave consequences to the society. These hindrances include a challenging curriculum, poor personality and cognitive development, student’s poor perception, poor commitment to training, a pervasive sense of anxiety and a resultant deficit in acquiring basic cognitive and habitual counselling skills (Agokei, 2011). For instance, in the training of counsellors, researchers have found that current counsellor education methods are effective in teaching discrete behavioural skills such as reflection of feelings and attending behaviour (Baker, Daniels, & Greeley, 1990; Hill & Lent, 2006). However, less is known about the development of internal (such as cognitive) counselling skills. Literature (such as, Bentley, 2007; Al-Darmaki, 2004; Gaubatz, & Vera, 2002) suggests that there is little guidance in counsellor education on how to prepare students in the habits of mind and ways of being, such as attention control and empathic understanding. It appears that a conceptualization of how these essential skills develop is less clear and, as of yet, less researched.

In addition, describing counsellor effectiveness from a Gestalt Therapy perspective, Yontef (1993), identified authenticity as a measure of effectiveness. He argued that acquisition of authenticity is not completed overnight; actually, it happens throughout one’s entire life, being learned and relearned. The author further noted that therapists cannot teach what they do not know and that therapists lacking effectiveness end up communicating to clients their own fears, courage, defensiveness, openness, confusion, and clarity. Ray and Altekruse (2000) in a study involving supervision identified variables that are considered necessary for counsellor effectiveness that included expertness, attractiveness, and trustworthiness. They suggest the therapeutic relevance of the counsellor-offered conditions or attitudinal qualities of empathic understanding, respect, or positive regard, and facilitative genuineness for counsellor effectiveness. With the continual evolving context of effectiveness, a gap still exist between theory and practice in counsellor education that may have a profound impact on counsellor development and outcomes among pre-service counsellors with regards to their effectiveness.

Larson and Daniels, (1998) proposed Social cognitive training (SCT) a specific counsellor model of training that combines many components of the social cognitive theory into a unified, empirically testable model. The social cognitive theory as espoused by Bandura (1977) assumes that people are able to symbolize their
experiences into internal models of action that allow them to engage in forethought to purposefully direct their behaviour. Further, this theory sees inner personal factors, environmental events and behaviour as all mutually interacting in a reciprocal manner, hence, learning unfolds in such manner. This training model is unique in that it focuses on variables that may be relatively enhancing counsellor efficacy. Specifically, Larson and Daniels, (1998) believe that the self-efficacy of pre-service counsellors would directly relate to their ability to successfully conduct counselling sessions. A variety of mastery-based interventions have been examined in the research. Some of these SCT studies related to counsellor effectiveness include role-plays (Larson, Clark, Weselly, Koraleski, Daniels, & Smith, 1999), practicum and practice based on theory-driven instruction (Grace, Kivlighan, & Kunce, 1995; Urbani, Smith, Maddux, Smaby, Torres-Rivera, & Crews, 2002). These studies consistently demonstrated support for Bandura’s hypothesis that mastery experiences are the most influential in the cultivation of counselling effectiveness. It also provides tentative suggestions of potential interventions to increase counsellor performance.

Mindfulness has been broadly conceptualized as present moment, non-judgmental awareness (Bishop, 2002). It is a state of being attentive to experience that is characterized by an attitude of openness and acceptance of experience (Brown & Ryan, 2003; Gunaratana, 2002; Kabat-Zinn, 2003; Martin, 1997). Phenomenologically, mindfulness involves freeing of attention that disentangles the individual from habitual or stereotyped cognitive appraisals of various events, providing the opportunity to explore a wider range of perspectives (Martin, 1997). Mindfulness practices are a form of mental training designed to cultivate this state of openness and acceptance. Both conceptual and empirical literature suggest that mindfulness practice helps to increase attentive presence, acceptance, empathy, and self-awareness, as well as reduce stress (Bentley, 2007; Bogels, Sijbers, & Voncken, 2006; Shapiro, Astin, Bishop, & Cordova, 2005). Although current mindfulness research suggests some links between mindfulness and key counsellor-training outcomes (Shapiro, et al, 2005), there is little research specifically on counsellor mindfulness and effectiveness (such as Hepworth, 2011; Adeyemo and Agokei, 2010; Bögels, Lehtonen and Restifo, 2010). It is suggested that mindfulness training and practice may be an untapped resource for developing core counselling skills as well as the person of the counsellor (Walsh & Shapiro, 2006).

Emotional intelligence is a moderating variable in this study. Basically, emotional intelligence has been described to be the ability to accurately identify and understand one’s own emotional reactions and those of others (Cherniss & Adler, 2000). This description involves the ability to recognize the meanings of emotion and their relationships, and to reason and translate to problem solving. There are sparse studies with regard to emotional intelligence and counsellor effectiveness. However, emotional intelligence has been reported to be an effective moderator in the linkages between counsellor efficacy and counselling outcomes (Adeyemo & Agokei, 2010; Martin, Easton, Wilson, Takemoto, & Sullivan, 2004). Research findings indicate that emotional intelligence skills are important and perhaps critical factors of student achievement, retention, and personal health (Nelson and Low, 2005; Elkins and Low, 2004; Williams,
In addition, teacher effectiveness included emotional intelligence facets such as knowledge, effective communication, well organized material, motivate and inspire students, friendly and open behaviour, and well classroom management (Adeyemo, Onongha & Agokei, 2010). Further, these studies reported that emotional intelligence skills add to and strengthen the critical cognitive problem solving skill of pattern recognition and perspective taking. This could be applicable to a counsellor-client situation. A counsellor's ability to lead and provide support and direction in such a way that the clients gain a feeling of empowerment is vital to counsellor effectiveness and client happiness.

Becoming a counsellor is an intellectually and emotionally challenging task (Skovholt & Ronnestad, 2003). Counsellors must orchestrate and continuously improvise multiple cognitive, social and behavioural sub skills to manage ever-changing circumstances in the session. Initiation and regulation of counselling actions are partly governed by judgments of operative capabilities. Hence as effectiveness among other counselling attributes and skills is vital to the outcome of counselling sessions, there is a great need to pay close attention to models that describe how best to train potential counsellors particularly pre-service counsellors.

It is understood that to achieve a significant level of measurable success in enhancing counsellor effectiveness, attention should be focused on pre-service counsellors. This is because they are yet to be involved in practice and it is only during training that they are easy target for better productivity. It is on this note that the researcher is concerned with examining the effectiveness of social cognitive training (SCT) and mindfulness technique (MT) in fostering counsellor effectiveness among pre-service counsellors in some Nigerian universities.

1.1 Research hypothesis
The following research hypotheses were tested for significance at 0.05 probability level.

1) There is no significant main effect of treatments on effectiveness of pre-service counsellors.
2) There is no significant main effect of emotional intelligence on the effectiveness of pre-service counsellors.
3) There is no significant interaction effect of treatments and emotional intelligence on the effectiveness of pre-service counsellors.

2. Methodology
The study adopted the pre-test post-test control group quasi-experimental design with a 3X3 factorial matrix.

2.1 Ethical Consideration
The ethical consideration with regard to this study was acquired from the University of Ibadan Ethical Consideration Committee after due process.
2.2 Participants
The population consist of all pre-service counsellors (final year counselling students) in Nigerian Universities who are currently undertaking degree programmes in Counsellor Education. Based on convenience and availability (Christensen, 1994), One hundred and eleven (111) participants were recruited for the study from three randomly selected Universities, which offer degree programmes in Counsellor Education. Thereafter they were randomly assigned to the experimental and control groups. Among these 49 were males and 62 were females. The age range of the participants was between 20 and 33, with a mean age of 26.5 and a standard deviation of 5.27.

2.3 Measures
A. Counsellor Effectiveness Rating Scale (CERS)
The scale was an adapted version of the Linden, Stone and Shetzer (1965) originally developed instrument. In the original scale, the items were randomly arranged into three sub-scales namely counselling climate (9 items), counselling comfort (5 items) and client-satisfaction (7 items). The instrument used in this study contains all the 21 items in the original instrument. The items were however re-arranged to ensure that items which belong to the same sub-scale follow one after the other. It is projected that the re-arrangement of items, intended to make the scoring procedures less tedious, and the re-wording of some items to remove sex-bias, cultural complexity and client perspective of effectiveness, would not significantly affect the psychometric properties of the original instrument. However, the adapted version of the instrument was subjected to psychometric procedures before its use in this study. A test-retest reliability coefficient of 0.69 was obtained after an interval of two weeks. Based on this result and considering that the original instrument had been extensively used and ascertained to have robust psychometric properties by many researchers (Popoola, 2004) the CERS was considered a valid and reliable instrument for measuring counsellor effectiveness in this study.

B. Emotional Intelligence Scale (EIS)
The scale is the Emotional intelligence questionnaire developed by Schuttle, Malouff, Hall, Haggerty, Cooper, Golden & Dornheim (1998). It is a thirty three (33) item scale structured in a five point Likert format. The scale has demonstrated high internal consistency with Cronbach's alpha ranging from 0.87 to 0.90 a test-retest reliability coefficient of 0.78.

2.4 Procedure
The study was carried out in four phases: pre-sessional activities, pre-test, treatment and post-test. At the pre-session, activities include the recruitment and assignment of participants to the two experimental and control group. At the pre-test stage the counsellor effectiveness scale and the emotional intelligence scale was administered to the participants. Participants in the two experimental groups were only exposed to eight weeks (eight sessions) of treatment (social cognitive training and mindfulness techniques). The treatment was conducted in the first semester of all schools concerned. Each session spanned for an average 90 minutes. Though the control group was not
treated, they were given talks on methods of study. The post-test was administered following the conclusion of the programme.

2.5 Therapeutic programmes

A. Social Cognitive Training

The SCT programme utilized a skills training strategy (i.e., instruction combined with coaching, modelling, rehearsal, self-observation, peer feedback and praise) to improve knowledge and skills related to: self-efficacy; self-talk, positive thinking; communication; problem solving; and perception. The programme was designed for meetings 90 minutes weekly over a two-month period (eight sessions). Homework was assigned to reinforce knowledge and skills taught during the lessons.

B. Mindfulness technique

The therapeutic package for mindfulness techniques facilitated the understanding of mindfulness practice theoretically and experientially. Through lectures, demonstrations, participatory exercises and small group discussions, skills objectives of: being emotionally calmer, experience inner happiness; have clear and creative thoughts; take responsibility for your well-being; and developing inner stress management and stronger self-confidence were taught. There were 8-sessions comprising 90 minutes per session. Homework was assigned to reinforce knowledge and skills taught during the lessons.

2.6 Data Analysis

Analysis of covariance (ANCOVA) is the major statistical tools employed in this study. The Scheffe Post-hoc analysis was also used in this study to determine the directions of differences and significance identified.

3. Result

<table>
<thead>
<tr>
<th>Source of Variation</th>
<th>Sum of Squares</th>
<th>DF</th>
<th>Mean Squares</th>
<th>F</th>
<th>Sig. (f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Covariates</td>
<td>3609.006</td>
<td>1</td>
<td>3609.006</td>
<td>132.625</td>
<td>.000</td>
</tr>
<tr>
<td>Main effects</td>
<td>15728.936</td>
<td>4</td>
<td>3932.234</td>
<td>144.503</td>
<td>.000</td>
</tr>
<tr>
<td>Treatment</td>
<td>14229.754</td>
<td>2</td>
<td>7114.877</td>
<td>261.461</td>
<td>.000</td>
</tr>
<tr>
<td>Emotional Intelligence</td>
<td>1499.182</td>
<td>2</td>
<td>749.591</td>
<td>27.546</td>
<td>.000</td>
</tr>
<tr>
<td>2-way interaction group</td>
<td>540.616</td>
<td>4</td>
<td>135.154</td>
<td>4.967</td>
<td>.001</td>
</tr>
<tr>
<td>TRT x EI</td>
<td>540.616</td>
<td>4</td>
<td>135.154</td>
<td>4.967</td>
<td>.001</td>
</tr>
<tr>
<td>Explained</td>
<td>19878.557</td>
<td>9</td>
<td>2208.729</td>
<td>81.167</td>
<td>.000</td>
</tr>
<tr>
<td>Residual</td>
<td>2748.416</td>
<td>101</td>
<td>27.212</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>22626.973</td>
<td>110</td>
<td>205.700</td>
<td></td>
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</tr>
</tbody>
</table>

Table 1 reveals there is a significant main effect of treatments on effectiveness of pre-service counsellor ($F_{(2,101)} = 261.461, P < .05$). Therefore, the hypothesis which states that there is no significant main effect of treatment on the effectiveness of pre-service counsellors is rejected. The implication is that the treatments were effective in fostering...
counsellor effectiveness. In order to provide some indications of the performance of each group, the MCA was computed. The results are presented in table 2.

**Table 2: Multiple Classification Analysis (MCA)**

<table>
<thead>
<tr>
<th>Source of Variation</th>
<th>N</th>
<th>Unadjusted Dev</th>
<th>Eta</th>
<th>Adjusted Dev</th>
<th>Beta</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. S C T</td>
<td>33</td>
<td>4.35</td>
<td></td>
<td>4.97</td>
<td></td>
</tr>
<tr>
<td>3. Control</td>
<td>41</td>
<td>-15.40</td>
<td></td>
<td>-15.40</td>
<td>.86</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>.85</td>
</tr>
<tr>
<td>Emotional intelligence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. High</td>
<td>36</td>
<td>6.16</td>
<td></td>
<td>5.58</td>
<td></td>
</tr>
<tr>
<td>2. Moderate</td>
<td>37</td>
<td>-.73</td>
<td></td>
<td>-.15</td>
<td></td>
</tr>
<tr>
<td>3. Low</td>
<td>48</td>
<td>-5.13</td>
<td></td>
<td>-5.13</td>
<td>.32</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>.31</td>
</tr>
<tr>
<td>Multiple R Squared</td>
<td></td>
<td>.32</td>
<td></td>
<td>.855</td>
<td></td>
</tr>
<tr>
<td>Multiple R</td>
<td></td>
<td>.924</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The MCA as shown in Table 2 describes the counsellor effectiveness of all the groups. The students exposed to MT had the highest mean score (82.49 \((69.86 + 12.63)\)), followed by students exposed to SCT (74.83 \((69.86 + 4.97)\)) before those in the control group (54.46 \((69.86 - 15.40)\)). This implies that MT is more effective than SCT in fostering counsellor effectiveness. To determine the actual source of the observed significant differences as indicated in the ANCOVA, Scheffe Post-hoc analysis is carried out on the mean scores of the groups; this is presented in table 3.

**Table 3: Scheffe Post-Hoc Test on Counselling Effectiveness**

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Mean</th>
<th>S C T</th>
<th>M T</th>
<th>Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Social Cognitive Training</td>
<td>74.83</td>
<td>*</td>
<td>*</td>
<td>*</td>
</tr>
<tr>
<td>2 Mindfulness training</td>
<td>82.49</td>
<td>*</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>3 control</td>
<td>54.46</td>
<td>*</td>
<td></td>
<td>*</td>
</tr>
</tbody>
</table>

Table 3 shows that the mean score of pre-service counsellor exposed to MT is significantly different from those exposed to SCT and the control. Also, the mean score of students treated with SCT is significantly different from those in the control group.

4. Discussion

The finding from testing hypothesis one shows there is a significant main effect of treatments on the effectiveness of pre-service counsellor. There is a significant difference among the groups (SCT, MT and control) in the post-test scores on counsellor effectiveness. The null hypothesis is therefore rejected. The MCA further indicated that the group exposed to MT had better performance than those exposed to SCT. The finding is in congruence with prior studies on counsellor mindfulness and effectiveness (such as Hepworth, 2011; Adeyemo and Agokei, 2010; Bögels, Lehtonen and Restifo, 2010).
Specifically, Adeyemo and Agokei (2010) reported that mindfulness effectively mediates the development of counselling effectiveness. Among the skills that are fundamental to being an effective counsellor are the abilities to strategically control attention during the session and to have both a cognitive and affective empathic response to the client (Greenberg, Elliott, Watson, & Bohart, 2001; Lambert & Barley, 2001). As these researches have been conducted to demonstrate that mindfulness is a mechanism mediating positive counselling outcomes, the current finding is an extension in literature, affirming the functional mechanism of mindfulness on counsellor effectiveness.

This result is easily explainable bearing in mind that conceptual and empirical literature suggest that mindfulness practice helps to increase attentive presence, acceptance, empathy, and self-awareness, as well as reduce stress. For instance, a counsellor in a state of mindfulness emphasises simply on noticing either internal or external experience without making judgments, reacting in habitual ways to the stimulus, or elaborating on the meaning of the event and in this case, counselling the client. This provides opportunities to gain insight into the nature of thoughts and feelings as passing events in the mind rather than inherent aspects of the self or valid reflections on reality, warding off constraint, stress and emotional discomfort that may be affecting clients.

The result found affirms that SCT is also effective in enhancing counsellor effectiveness. This has further strengthened previous findings concerning SCT and counsellor effectiveness (Larson et al., 1992; Larson, Clark, Weselly, Koraleski, Daniels, & Smith, 1999; Munson et al., 1986; Munson, Zoerink & Stadulis, 1986; Romi & Teichman, 1995). The efficacy of SCT can be viewed from the perspective that the treatment beliefs unarguably influences how people think, feel, motivate themselves, and act.

Pre-service counsellors exposed to SCT were thought to set higher goals and exhibit stronger commitment, motivation, perseverance, and resiliency toward achieving those goals. Further, according to Bandura (1977; 1997), SCT and corollaries are important aspects of performance and preparation to successfully perform a given behaviour, and involves generative capability in which component cognitive, social, and behavioural skills are organized into integrated courses of action to serve innumerable purposes. By extension, these generative capabilities in SCT would include demonstrating increased persistence in the face of obstacles, show lower anxiety level, and show flexibility in the use of counselling strategies, employ more self-regulation strategies and greater propensity for self-motivation and successful client assistance. These attributes may have impacted significantly and positively on enhancement of counsellor effectiveness among the participants. This plausibly explained the kind of linkage that was found between SCT and counselling effectiveness of participants in this study.

In the result from testing hypothesis two, emotional intelligence is observed to have significant main effects on the counsellor effectiveness of the participants. The finding is consistent with related studies (Nelson & Low, 2003; Adeyemo & Agokei,
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2010; Adeyemo, Onongha & Agokei, 2010; Potter, 2005; Martin, Easton, Wilson, Takemoto, & Sullivan, 2004; Smith, 2004). In these studies, emotional intelligence is reported to have positive influence on work performance. These findings provide a compelling case for including emotional skill development in academic and student services programmes in schools and colleges. Plausible explanation for the current finding could be seen from the description of emotional intelligence. It refers to the capacity for recognizing our own feelings and those of others, for motivating ourselves and for managing emotions well in others and us and responding appropriately to them. By effectively applying the power and energy of emotion as in our daily life and work, one can become a source of information, connection and influence (Cooper & Sawaf, 1997). Moreover, Goleman, (1998) indicates that strong emotional intelligence also plays a role in making it possible to support individuals via encouraging them to strive for excellence, celebrate their achievement and let them know they are valued and respected A counsellor’s ability to lead and provide support and direction in such a way that the clients gains a feeling of empowerment is vital to counselling effectiveness and client happiness.

The finding for hypothesis three shows that there is a significant interaction effect of treatments and emotional intelligence on counselling effectiveness of participants. Further, the interaction effect reveals that having high emotional intelligence in addition to the treatment approaches is essential in developing strong counsellor effectiveness. This however is different for both treatment groups, given that pre-service counsellors exposed to MT with high emotional intelligence were better off than those exposed to SCT with high emotional intelligence. As earlier noted emotional intelligence has strong relationship with being mindful (Adeyemo & Agokei, 2010, Bentley, 2007). Another explanation for this finding may lie in the messages pre-service counsellor received about what it means to be mindful and the need to have strong boundaries with clients. It is possible the pre-service counsellors exposed to mindfulness technique adopted a more mindful and emotionally intelligent approach to life as a working strategy for handling the challenges of being a counsellor. Concomitant with their numerous responsibilities, trainees in counsellor education programmes experience fluctuating emotions that vary from self-doubt to self-confidence, anxiety to certainty (Hughes & Kleist, 2005). Adopting a mindful approach to their experience whilst regulating their emotions may have helped these trainees navigate the vicissitudes of this part of their drive with more equanimity. Being able to step back and observe, for instance, rather than reacting immediately to various situations may allow for the mental space necessary to make healthy choices rather than automatic ones.

As earlier noted, one attribute of an effective counsellor is the ability to strategically control attention during sessions and to have both a cognitive and affective empathic responses to the client. Mindfulness is further noted to be the gap between perceiving and responding appropriately, a trait requisite for accurate empathy. The ability to attend to and experience the client on a deeper level would improve as this basic task becomes automatic. Therefore, the combination of being able to non-
judgmentally and be purposively attentive, as well as regulating ones’ and others emotions offer plausible explanation for the finding.

5. Conclusion

The current study provides empirical support for the theorized relationship between SCT, MT and key counsellor effectiveness. The results provide evidence that a sizable portion of the variance in counselling effectiveness can be explained by a student’s ability to integrate personal, environmental, behavioural actions and being mindful in everyday life and strategically control attention during counselling sessions. Based on the impact of counsellor effectiveness on client outcomes, it is important that counsellor education programmes provide learning experiences that cultivate these skills. Hence, the results have implications for counsellors in terms of potential counsellor-training admissions, counsellor education, and counselling practice. Therefore, the study provides a significant contribution to literature and knowledge particularly to disciplines and profession of personality development and counselling psychology.

The result also has implication for facilitating students’ development in internal cognitive and personal skills which had evolved less systematically. This is readily understood given the mechanism of change (including perceiving, attentiveness, self-management and self-regulation, values clarification, and exposure, relaxation) functional in the sensitivity, quality and repository of skills packaged in the treatment. For instance, mindfulness training emphasized the development of core counselling skills such as attention regulation, empathy, attentive presence, acceptance, and self-awareness. Thus, findings of this study would also provide pre-service counsellors the required knowledge on the understanding of the functioning of counsellor effectiveness and the repertoire of knowledge required in the provision of effective counselling service.

As evidenced in this study although MT was more potent than SCT in enhancing counsellor effectiveness both treatment procedures were significantly potent in enhancing counsellor effectiveness. Also, the effect of the treatment was moderated by emotional intelligence. Considering the gains in counselling outcomes that may arise from the impact of SCT and MT, introducing the experience into a course or designing courses to specifically reflect the training may result in successful counsellor training. Emotional intelligence programmes should also be encouraged among students in order to facilitate this counselling outcome.

References

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