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Effects of Presenting Concern and Therapeutic Relationship on College Counseling Outcomes

Given the substantial severity of psychopathology among college students, the current study sought to identify variables associated with positive outcomes among college counseling center clients. The study explored how a client's presenting concern and therapeutic alliance variables relate to positive counseling outcomes, such as progress and goal attainment. Thirty-two undergraduate counseling clients indicated their presenting concern and rated levels of trust, comfort, goal attainment, and therapy outcomes. Findings revealed that the perceived strength of the therapeutic alliance directly related to positive outcomes in therapy. Unexpectedly, college students who presented with issues of college adjustment and interpersonal problems were more psychologically distressed than those who presented with substance abuse or preexisting conditions.

Clinicians in college counseling centers have noted significant increases in the severity levels of presenting concerns among students seeking services at college counseling centers. In 1984, 54% of college counseling center directors believed that they had seen an increase in severity of problems among students (Gallagher, 1984). By 1994, this figure increased to 84% (Gallagher, Bruner, & Weaver-Graham, 1994); and by 2004, 86% of directors believed caseload severity was increasing (Gallagher, 2004). In an examination of over 13,000 college counseling center clients over a 13-year period, Benton, Robertson, Tseng, Newton, and Benton (2003) found significantly increased severity in 14 of the 19 client problem areas including relationship issues, depression, and personality disorders.

Empirical research on severity levels has yielded mixed results. While Gallagher's survey results, spanning from 1984 to 2004, support the notion of increasing pathology, several studies have failed to find increasing severity (e.g., Kettmann, et al, 2007; Schwartz, 2006). Benton et al. (2003) found significantly increased severity in 14 of the 19 client problem areas including relationship issues, depression, and personality disorders. Because severity has been subjectively defined and confounded with presenting concern in previous research, the present study examines the relationship between the two in order to determine whether presenting concern serves as a useful predictor of outcome.

Current research shows that roughly one-third of the college counseling center clients can be considered moderately or highly distressed based on comprehensive assessments such as the Symptom Check List-90 and the Outcome Questionnaire (Johnson, Ellison, & Heikkinen, 1989; Wolgast, et al, 2005). A comparison of counseling center clients with other students revealed significantly higher rates of depression and anxiety among clients, with prevalence rates ranging from 28 to 39% (Green, Lowry, & Kopta, 2003). Due to these high severity levels, predicting differential outcomes among college students receiving counseling is necessary to enhance the effectiveness of mental health services for students.

A wealth of counseling research has demonstrated that the strength of the therapeutic alliance between counselor and client is one of the strongest predictors of counseling outcomes (Horvath & Symonds, 1991; Martin, Garske, & Davis, 2000). Paris, Anez, Bedregal,* Faculty sponsor
Andres-Hyman and Davidson (2005) found that as the therapeutic alliance strengthened between Latin American women and their counselors, the women became more satisfied with their services. Nabors, Weist, Reynolds, Tashman and Jackson (1999) found that urban minority adolescents placed a high value on the therapeutic relationship when assessing the mental health services at their school. Furthermore, Williams (1974) found that regardless of racial background or therapist matching, clients felt more comfortable with and trusted their counselors more after a relationship had been built between counselor and client. The converging results of research with various client groups demonstrates that development of a positive relationship between counselor and client leads to increased client disclosure, trust in the counselor, client satisfaction, and higher ratings of counselor effectiveness among both adolescents and adults.

A successful counseling relationship has also been associated with positive outcomes among adolescents and college students (Coll & Stewart, 2002; Nabors et al., 1999). Rochlen, Rude, and Baron (2005) found that a strong working alliance was significantly correlated with progress as assessed by the Outcome Questionnaire and the Stages of Change Scale. Martin and Garske’s (2000) review of the literature concludes that the therapeutic alliance is consistently related to outcome, regardless of other variables. Due to these robust findings, the current study examined the relationship between therapeutic relationship variables and outcome in college counseling center clients.

Given the substantial levels of psychopathology among college students, the present study sought to identify variables associated with positive outcomes among college counseling center clients. It was expected that certain presenting concerns (including college adjustment and interpersonal problems) would lead to more positive outcomes. It was also anticipated that increases in trust, comfort, and disclosure in the therapeutic alliance variables would be related to positive counseling outcomes.

**Method**

**Participants**

Thirty-two undergraduate students who were receiving counseling at a small private college in the mid-Atlantic region participated in this study. Fourteen participants were men and 18 were women. The mean age was 19.41. Most participants were Caucasian (n = 29), while the other participants were American Indian/Alaskan Native (n = 1), Hispanic (n = 1) and African American (n = 1). Twenty-nine of the participants were heterosexual, one was homosexual, and one was bisexual. Of these college students, 10 were freshmen, 8 were sophomores, 9 were juniors, and 5 were seniors. Most students were either single (n = 21) or in a committed relationship (n = 10); however, one student was married. Seven students indicated college adjustment-related issues as their presenting concern, 15 with interpersonal/relationship issues, six indicated alcohol/substance abuse issues, one rape/sexual assault issue, and 17 indicated other issues (including pre-existing conditions such as depression and anxiety). Several respondents indicated more than one issue.

**Materials and Procedure**

All students who received counseling services during the fall semester of 2007 were asked to complete a questionnaire which gathered demographic information and assessed participants’ perception of their therapeutic relationship and therapy outcomes. Participants rated the extent to which they felt their counselor was genuine and trustworthy, as well as their level of comfort, disclosure, and satisfaction with the counselor. They also rated the extent to which they made progress toward their goals, learned about themselves, and learned coping skills. Retention likelihood was assessed by asking participants to rate their academic improvement and the extent to which they are more likely to stay at college after counseling. Each item was rated on a Likert scale (see Appendix).

Participants also completed the Outcome Questionnaire for Adults (OQ-30.2) (Lambert, Finch, Okiishi, & Burlingame, 2005). The OQ-30.2 is a 30-question, self-report measure that assesses adjustment as defined by life satisfaction, academic and/or work satisfaction, and relationship satisfaction. In the validation sample, the OQ-30.2 demonstrated acceptable internal consistency reliability (α = .93) among college students and convergent validity with the Symptom Checklist-90 and the Beck Depression Inventory (r = .70 and .61, respectively; Lambert et al., 2005). Scores on the OQ-30.2 range from 0-120, with higher scores indicating higher levels of distress. Internal consistency reliability for the OQ-30.2 was acceptable in the current study (α = .89).

In order to ensure confidentiality, no identifying information was collected. Each participant received an informed consent form stating that he or she could withdraw from the study at anytime. After the surveys were completed and returned to researchers, data was entered into SPSS for statistical analysis.

**Results**

Participants who sought counseling for college adjustment-related issues had a higher average OQ-30.2 score (M = 59.29), than those who indicated that they sought counseling for other reasons (M = 44.62), t(30) = 2.59,
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Participants seeking services for interpersonal/relationship issues had a higher average OQ-30.2 score \((M = 53.37)\), than those not in counseling for interpersonal/relationship issues \((M = 42.94)\), \(t(30) = 2.16, p < .05\). Women yielded significantly higher scores \((M = 52.31)\) than men \((M = 42.07)\), \(t(30) = 2.1, p < .05\). The 95% CI for OQ scores for clients with each presenting concern fell within the mild-moderate or severe range (see Figure 1).

Significant positive correlations were found among concern, trust, comfort, willingness to share, and satisfaction (see Table 1). When clients perceived the counselor as being genuinely concerned about them, they reported that the counselor was trustworthy \((r = .98)\), they were comfortable with the counselor \((r = .91)\), they disclosed more to the counselor \((r = .85)\), and they were more satisfied with counseling \((r = .89)\). Significant positive correlations were also found among therapeutic relationship variables, such as satisfaction with counseling, and several outcome variables. Participants who reported a strong therapeutic relationship with the counselor also indicated reaching their goals \((r = .88)\), making progress toward goals \((r = .90)\), learning about themselves \((r = .87)\), acquiring coping skills \((r = .79)\), and improving academic performance \((r = .47)\). Participants who reported learning coping skills also indicated improvements in academic performance \((r = .57)\). There was no significant correlation between therapeutic relationship variables and outcome as measured by the Outcome Questionnaire (OQ-30.2).

Discussion

As expected, significant differences in overall adjustment were observed depending on a student’s reason for seeking counseling. It was originally assumed that the brief therapy utilized by college counseling centers would be more effective with college adjustment and interpersonal/relationship issues due to their decreased complexity and severity; however, the results challenged this assumption. Students who presented with college adjustment-related issues reported higher levels of distress than those who attended counseling for other reasons. Students seeking services related to interpersonal/relationship issues showed higher levels of distress than those who sought counseling for substance abuse. The mean scores for students with college adjustment-related issues and interpersonal relationship issues were in the moderately distressed range (see Figure 1). Given the elevated level of distress for these groups, the traditional assumption that college counseling centers primarily serve individuals with only mild psychological distress seems unwarranted. College counseling centers should document this trend and bring it to the attention of administrators in order to secure increased resources to meet increasing demand for services.

Findings also indicate that women reported higher levels of distress overall than did men. Because participant distress levels were self-reported, the differences between men and women may indicate that women are more likely than men to acknowledge that they are distressed, regardless of their absolute level of distress. It is possible that social pressures might make women more susceptible to higher stress levels. Because women reported a statistically significant difference in outcome from men, explanations for the sex differences warrant further study.

By contrast, findings concerning the therapeutic relationship were consistent with expectations. Positive correlations between therapeutic relationship variables and counseling outcomes were observed. Because genuineness, trust, comfort, and disclosure are integral components of developing an effective therapeutic alliance, each of these variables was associated with positive counseling outcomes. Given the strong and consistent relationship between therapeutic alliance variables and outcome, it seems likely that the strength of the alliance was critical in these positive outcomes; including goal attainment, perceived progress, learning about oneself, acquisition of coping skills, and improved academic performance. These findings imply that college counseling center staff should focus on

![FIGURE 1](image-url)

Outcome Questionnaire (OQ-30.2) scores for groups defined by presenting concern including, college adjustment-related issues (Adju), interpersonal/relationship issues (Inter), substance abuse (Subs), rape/sexual assault (Rape), and other concerns. Cutoff scores for the OQ-30.2 were used to define scores as reflecting normal, mild-moderate, and severe adjustment problems.
the strength of the therapeutic alliance, even within a brief therapy model.

Given that one of the central goals of college counseling centers is to decrease mental health concerns which impede academic success, it is noteworthy that academic performance was significantly positively correlated with the acquisition of coping skills during counseling. It seems likely that the coping skills acquired through therapy sessions helped students deal with stressors of everyday life, thereby improving academics. Outcome measures such as perceived progress and learning about oneself were also positively correlated with academics. Once participants perceived progress in their counseling sessions, they may have been better able to focus on coursework, thereby learning more and improving their grades.

Administrators commonly perceive that a secondary goal of college counseling centers is to increase retention at the college. Given this perception, it is interesting that no significant correlations were found between intention to remain at the college and therapeutic relationship variables or outcome. There are several possible reasons for the lack of significant correlations with college retention. It is possible that students may not have seen their counseling outcomes as related to remaining at the college because they did not have any intention of leaving the college in the first place or because their positive counseling experience helped them decide that this college was a poor fit for them. Future research should explore the reasons for this apparent lack of association with college retention.

**Limitations**

Reliance on self-reported data limits this research because clients’ self-reported reasons for coming to counseling may not accurately reflect the issues that were causing their distress. The higher distress levels reported among those who indicated college adjustment and interpersonal issues as their presenting concern may have resulted from other underlying issues. It is also possible that students reported less severe issues because they are perceived as more socially acceptable. If students were experiencing several symptoms, they may have attributed their distress to less severe causes in order to minimize their perception of their psychological distress, despite the fact that other underlying issues may have been involved.

The correlations between the OQ-30.2 and the other variables were not significant. Participants were asked to rate therapeutic relationship and outcome variables on a Likert scale from strongly agree to strongly disagree (see Appendix A). Considering contradictory qualitative responses, it is likely that some participants misinterpreted this instrument and transposed their intended ratings. Therefore, this problem could account for the fact that there was no significant relationship between the Likert scale questions and

### TABLE 1

Pearson Correlations Between Therapeutic Relationship Variables and Outcome

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<th>Share</th>
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Note. Conc = counselor’s concern was genuine, Trust = counselor was trustworthy, Share = shared information with counselor, Comf = shared more when comfortable, Goal = reached goals, Prog = made progress, Lear = learned about self, Cope = learned coping skills, Ret = more likely to stay at college, Aca = improved academic performance, OQ = total adjustment score on the Outcomes Questionnaire.

*p < .05, **p < .01.
the OQ-30.2. However, it is also possible that no significant relationship exists between therapeutic relationship variables, counseling outcome, and several items on the OQ-30.2, as observed by Vermeersch, et al. (2004). Lastly, given the small sample size in this study, further research is warranted to confirm that these findings can be generalized to the population of college students.

Despite these limitations, this study supports previous findings that therapeutic relationship variables are integral to the development of an effective working alliance. In addition, a strong working alliance relates to a positive outcome including overall satisfaction, goal attainment, perceived progress, learning about oneself, and acquisition of coping skills. While further study could offer alternative explanations for current findings, it can be concluded that college counseling centers should not subscribe to the traditional assumption that individuals presenting with college adjustment issues are less distressed. A counseling center’s ability to accurately assess distress in clients increases the likelihood that students will get the help they seek. The OQ-30.2 could be a helpful tool for counselors to use before the first session with each client, as well as periodically to monitor changes in distress levels. These results suggest that college counseling centers should consistently evaluate and adjust to meet the increasing demand for services, given the levels of distress and severity of problems among their clients.

References