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## Elementary School Counsellors' Perceptions Of Their Current And Ideal Role With Parents And Families

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### Abstract

This study sought to identify B.C. elementary school counsellor's perceptions of (a) their "current" interventions with families, (b) their "ideal" forms of family interventions and (c) barriers to working with families. A survey instrument was mailed to 327 elementary counsellors and returned by 249 (76.2%). To determine if the differences between "current" and "ideal" means were significant, two-tailed paired samples *t*-tests were conducted. The results indicated that counsellors prefer to work with children individually ( $M=1.37$ ), consult with teachers ( $M=1.50$ ), more than doing parent consultation ( $M=1.86$ ). Parent education, parent consultation and family consultation were reported as appropriate services offered by school districts. "Work Load" and "Work Schedule" were found to be the largest barriers to performing more family interventions.

### Résumé

Cette étude cherchait à identifier les perceptions des conseillers scolaires de la Colombie-Britannique sur (a) leurs types d'interventions "actuelles" (b) leurs pratiques "idéales" d'interventions familiales et (c) les obstacles rencontrés en travaillant avec les familles. Un questionnaire a été posté à 327 conseillers en éducation à l'élémentaire et 249 l'ont retourné (76.2%). Pour déterminer si la différence des moyennes entre "actuelle" et "idéale" était significative, deux paires de tests *t* ont été conduits. Les résultats indiquaient que les conseillers préféraient travailler avec les enfants individuellement ( $M=1.37$ ) et de consulter les enseignants ( $M=1.50$ ), plutôt que de pratiquer la consultation avec les parents ( $M=1.86$ ). L'éducation des parents, la consultation des parents et la consultation familiale ont été présentées comme relevant plutôt de la commission scolaire. "La répartition du travail" et "les heures de travail" ont été signalées comme étant les obstacles les plus difficiles à surmonter pour la pratique visant l'intervention familiale.

It has long been recognized that the family is the single most influential factor on children's personality development (Adler, 1927; Dreikurs & Soltz, 1964; Freud, 1929; Ginott, 1965). It is within the family that the child learns behaviour patterns, attitudes, perceptions of self and relationships, and how to respond to the social and academic tasks of school (Nicoll, 1984). Hence for nearly seven decades, authorities have emphasized the importance of studying personal interrelationships at home as a basis for understanding social, emotional and/or behavioural problems at school (Adler, 1927; Dreikurs & Soltz, 1964; Muro & Dinkmeyer, 1977).

Despite this awareness, conventional school counselling interventions traditionally have focused on the individual child to the exclusion of parents or family. It is therefore not surprising that there has been long-

standing dissatisfaction with the priorities of school counselling techniques and the lack of focus on family involvement (Brown & Brown, 1975; Palmo, Lowry, Weldon & Scioscia, 1984; Umansky & Holloway, 1984).

#### LITERATURE REVIEW

The school counselling literature of the 1960s and 1970s responded to these issues with rationales for, models of, and research on the effectiveness of parent education and parent consultation. Throughout 1980s and now in the 1990s a greater number of proposals are being offered for the use of family interventions such as consultation, counselling and/or therapy to treat school problems. This shift is largely due to an awareness that for the past decade, more and more children are experiencing emotional difficulties resulting from family change and instability (Coldicutt, Green & Jopson, 1988; McDaniel, 1981; Palmo et al., 1984).

Despite the numerous rationales that have been offered (Amatea & Fabrick, 1984; Bundy & Poppen, 1986; Dinkmeyer & Dinkmeyer, 1978; Goldenberg & Goldenberg, 1981; Nicoll, 1984; Umansky & Holloway, 1984), a gap continues to exist between the perceived need for and the implementation of both parent and family intervention in elementary school counselling programs. The barriers most frequently mentioned include: deficiencies in training (Dinkmeyer & Dinkmeyer, 1984); a lack of administrative support (Umansky & Holloway, 1984); insufficient time (Golden, 1983; Strother & Jacobs, 1986); and unmanageable counsellor/pupil ratios (Walsh & Giblin, 1988).

In addition, some disagreement exists regarding the appropriateness of the elementary school as the setting for interventions with families and/or parents. According to some, school counsellors should not be expected to work with severely dysfunctional families requiring intensive and long-term family therapy (Golden, 1983; Friesen, 1976; Strother & Jacobs, 1986). From this perspective, elementary counsellors should have an understanding of family dynamics that would enable them to assess and provide short-term consultation to parents and families, and effectively refer more dysfunctional families for therapy. Others (Palmo et al., 1984; Wilcoxon, 1986) claim that many school counsellors would like to and should be able to use family counselling. However, the distinction between family consultation, family counselling and family therapy remains blurred.

For some time now, elementary counsellors have been asked to develop priorities for their programs and to engage in systematic efforts to implement these priorities (Allan & Ross, 1979; Bonebrake & Borgers, 1984; Wilgus & Shelley, 1988). Research indicates that teachers (Wilgus & Shelley, 1988), principals (Bonebrake & Borgers, 1984), and counsellors themselves (Bonebrake & Borgers, 1984; Carreiro & Schulz, 1988) be-

lieve that a higher priority should be placed on parent education, contact and consultation than presently exists. In British Columbia, earlier studies suggest that superintendents and directors (Allan, 1977), special service directors and counsellors (Allan & Bolland, 1981) and principals and intermediate teachers (Allan, Doi & Reid, 1979) believed that family counselling skills were among those of greatest immediate need. It appears that elementary school counsellors should be trained in family counselling skills and make short-term interventions.

To date there is only one unpublished study, a doctoral dissertation carried out by Beck (1984), that focuses on the attitudes of school counsellors toward family counselling as a role function. School counsellors and counsellor educators in Milwaukee reported family counselling to be an appropriate school counsellor function and that the barriers preventing its implementation are insufficient time, heavy work load, and no appropriate time to meet with families.

Beck's (1984) study presupposes that family counselling should be done in the elementary schools by school counsellors. It does not ask for counsellors' views on this function in relation to other types of family member interventions, nor does it address the lack of distinction between the terms consultation, counselling and therapy in relation to school counsellor roles. In addition, while academic and theoretical understanding has progressed, the long-standing barriers to any kind of involvement of parents and/or families in school counselling programs still exist. It therefore seemed important, especially in light of the current debate about their role functions, that elementary school counsellors themselves be consulted regarding their role with family members.

## METHOD

### *Sample*

Letters were sent to the Heads of Student Services in all 76 school districts in the province of British Columbia (B.C.), Canada, requesting the names and schools of counsellors working at the elementary level. With a return rate of 84%, 64 districts reported 327 elementary school counsellors serving 92% of B.C. elementary students. Districts that did not respond tended to be small and rural and typically do not employ elementary counsellors. Survey forms were then mailed to these counsellors and responses were received from 249 (76%) of them. A demographic analysis indicated that 56% of the respondents were female, 44% male, 79% had a masters degree in counselling and over 80% had taken courses or workshops on working with parents and families. Most counsellors worked full time (65%), were assigned to three or more schools (61%), and had a case load of over 500 students (84%).

### *Questionnaire*

A literature review and two pilot studies led to the development of a 17-item questionnaire, investigating counsellors' "current" and "ideal" role with parents and family members. It included working definitions of the following six different forms of intervention (complete definitions used in the study may be obtained by writing to the author): parent education (educational meetings to help parents learn more effective parenting skills); parent consultation (assisting parents to understand their child within an educational and social context, and providing information regarding community resources and parenting skills); parent counselling (counselling for parents as individuals or couples regarding their own personal issues); family consultation (short term assistance to help a child's family understand him or her within the family context, to refer a family for counselling or therapy, and/or to suggest ways they may assist their child at home); family counselling (assisting a child and his or her family to resolve family issues that are linked to difficulties the child is experiencing in school); family therapy (an intensive treatment process with a family that is intended to create shifts in world views, interpersonal relationships, etc.). The questionnaire also collected standard demographic information on age, sex, education and training and sought to determine counsellor functions and the barriers to performing those functions.

The instrument requested information about respondent background, education and work history in Part I. Part II asked for opinions as to who should provide parent and family services. In this section counsellors were also asked to indicate (using a five-point rating scale: very often=1, often=2, sometimes=3, almost never=4, never=5) the extent to which they currently and would ideally like to perform role functions. The final question sought opinions about the barriers to intervention.

This study asked for self-descriptions and opinions; the validity of this type of response in survey research has been well established (Babbie, 1986; Wiesma, 1991). Traditional reliability and validity tests are more appropriate for test and scale development. There were no logical grounds for test-retest, Cronbach's Alpha, split-half or other means of assessing the reliability of instrumentation. Issues of external validity are of concern with low return rates, but that was not the case in this study. However, a potential threat to the internal validity of the study could be construct validity; the definitions were included in the questionnaire to counter this potential threat. The purpose was to provide a frame of respondent reference for the six key concepts, a strategy that was intended to increase the likelihood of similar definitions for key constructs and thus strengthen the internal validity of the study. This seemed to be the case, since in the two pilot studies, several respondents commented that the definitions were very helpful.

## RESULTS

This study sought to identify B.C. elementary school counsellors' perceptions of: (a) the extent to which they are currently using six different forms of intervention with family members (family consultation, family counselling, family therapy, parent education, parent consultation, and parent counselling); (b) the extent to which they would like to use these forms of family member intervention; (c) the need for school districts to offer services for family members; (d) the appropriateness of these functions to the elementary school counsellor role; (e) the severity of the barriers hindering counsellors' performance of the six different forms of family member intervention; and (f) what is needed to overcome these barriers.

As we were especially interested in the extent to which counsellors currently and would ideally like to intervene at the family level, our results relating to family interventions will be emphasized, and will be compared to responses concerning more traditional, student-focussed interventions (i.e., counselling students, consultation with staff, consultation with other professionals, group counselling, and classroom instruction).

*Extent of current use of family interventions.* Table 1 (ranked in order of ideal function) lists the means and standard deviations of the counsellors' ratings of the current extent (using a scale from 1="Very Often" to 5="Never") to which they use 13 counsellor functions. The results indicate that parent consultation ranked third (via telephone  $M=1.99$  and face-to-face  $M=2.18$ ) and is currently being performed "Often." The remaining five family member interventions were ranked as those functions currently being performed to the least extent, from family consultation ( $M=2.93$ ) which ranked ninth and is being performed "Sometimes" to family therapy ( $M=4.50$ ) which ranked thirteenth and is being performed "Almost Never."

These results further indicate that B.C. elementary school counsellors are currently performing to the greatest extent those functions that have traditionally been associated with the role of the school counsellor. They are counselling students "Very Often" ( $M=1.30$ ), and consulting with staff ( $M=1.59$ ), parents ( $M_s=1.99$  and  $2.18$ ) and other professionals ( $M=2.18$ ) "Often."

*Extent of ideal use of family member interventions.* The means (see Table 1) indicate that B.C. elementary counsellors would like to use all family member interventions (with the exception of telephone parent consultation) more frequently. However in relation to some of the more "traditional" school counsellor functions, this increase did not necessarily result in a higher frequency ranking. For instance, although the counsellors would like to use face-to-face parent consultation more "Often"

**TABLE 1**  
*Means and Standard Deviations of Counsellors' Current Extent  
 and Ideal Extent of Intervention Use*

Intervention	Current			Ideal		
	n	M <sup>a</sup>	SD	n	M <sup>a</sup>	SD
Counselling students	249	1.30	.55	247	1.37	.64
Consultation with staff	248	1.59	.73	246	1.50	.65
Consultation with other professionals	249	2.18	.86	248	1.81	.69
Parent consultation - face-to-face	249	2.18	.73	247	1.86	.63
Group counselling	249	2.53	.93	247	2.00	.84
Parent Consultation - telephone	249	1.99	.80	245	2.02	.86
Family consultation	247	2.93	1.02	247	2.33	.90
Classroom instruction	249	2.78	1.03	246	2.62	1.11
Parent education	240	3.21	.92	244	2.73	.83
Counselling staff	249	2.92	.93	248	2.89	.92
Family counselling	247	3.57	.99	247	3.03	1.15
Parent counselling	249	3.31	1.01	244	3.04	1.07
Family therapy	246	4.50	.78	234	3.97	1.12

<sup>a</sup> Mean range = 1-5 where 1 denotes "Very Often," 2 denotes "Often," 3 denotes "Sometimes," 4 denotes "Almost Never," and 5 denotes "Never."

( $M=1.86$ ), they place an even higher priority on consulting with other professionals ( $M=1.81$ ).

Both the means and rating positions of family consultation ( $M=2.33$ ) and parent education ( $M=2.73$ ; seventh and ninth, respectively) indicate that counsellors would like to use these interventions more frequently. However, they would prefer to perform family consultation ( $M=2.33$ ; "Often") more frequently than parent education ( $M=2.73$ ; "Sometimes"). Family counselling ( $M=3.03$ ; "Sometimes," eleventh), parenting counselling ( $M=3.04$ ; "Sometimes," twelfth) and family therapy ( $M=3.97$ ; "Almost Never," thirteenth) retain the low ranking that they were given in the preceding section. Compared to all other functions, counsellors would still like to perform these to the least extent.

While the order of the frequency rating changes somewhat between current and ideal functions, elementary counsellors would ideally like to perform to the greatest extent those same "traditional" school counsellor functions that they are currently most often performing. They would like to counsel students and consult with staff "Very Often," and consult with other professionals and parents as well as counsel groups of students, "Often."

*Discrepancy between current and ideal use of family member interventions.* A mean difference score was calculated by subtracting the current from the ideal mean score for each function (Table 2). Two-tailed paired samples *t*-tests were then conducted to determine whether differences between corresponding means were significant (Borg & Gall, 1983). With the exception of telephone parent consultation, all differences between current and ideal means scores for family member interventions were significant ( $t=2.601, p=.01$ ). Thus there is sufficient evidence to indicate that B.C. elementary school counsellors would ideally like to use parent education, parent consultation (face-to-face), parent counselling, family consultation, counselling, and family therapy more than they currently do.

With regard to six "traditional" counsellor functions, differences between current and ideal use are significant for classroom instruction ( $t=-2.67, p=.008$ ), group counselling ( $t=-10.06, p=.000$ ) and consultation with other professionals ( $t=-6.84, p=.000$ ). Hence there is sufficient evidence to indicate that B.C. elementary counsellors would also ideally like to perform these traditional counsellor functions more than they currently do.

*Role responsibilities.* Other research questions addressed the issues of school district responsibility and counsellor role appropriateness for working with families. Parent education (78%), parent consultation (99%), and family consultation (86%) were reported by counsellors as family interventions that should be offered by the school district. They

TABLE 2  
*Mean Differences between Current and Ideal Extent of Intervention Use*

Intervention	Mean Difference <sup>a</sup>	t
Family consultation	-.6000	-9.66**
Family counselling	-.5407	-7.92**
Group counselling	-.5344	-10.06**
Family therapy	-.5279	-8.90**
Parent education	-.4768	-8.72**
Consulation with other professionals	-.3790	-6.84**
Parent consultation - face-to-face	-.3279	-7.31**
Parent counselling	-.2705	-4.32**
Classroom instruction	-.1463	-2.67**
Consultation with staff	-.0857	1.97*
Counselling staff	-.0282	-0.51
Counselling students	.0688	1.79
Parent consultation- telephone	-.0245	0.50**

<sup>a</sup> Negative t values denote higher frequency for ideal use.

Positive t values denote higher frequency for current use.

\*  $p < .05$ .

\*\*  $p < .01$ .



further indicated that parent consultation (97%) and family consultation (81%) were the interventions most appropriate to their role. A little over half reported parent education (56%) as an appropriate role function for counsellors while family counselling (44%) and parent counselling (39%) were seen as interventions less appropriate to their role. Family therapy was reported as an intervention that should not be part of the role of the school counsellor nor the school district (79%). In sum the majority of counsellors believe that their role with family members should be primarily consultative.

*Barriers to interventions with family members.* Counsellors were also asked to rate nine potential barriers in terms of how large a hinderance they are to performing the six family member interventions. Barriers were rated on a scale from 1 (not a barrier) to 4 (large barrier). "Work Load" and "Work Schedule" were consistently rated as the largest barriers to performing each intervention. "Parent reluctance," "Lack of Facilities" and "Lack of Training" all received ratings of "Not a Barrier" or a "Small Barrier" for each of the six family member interventions. "Role definition" was rated similarly except with regard to family counselling and family therapy where it was rated as a "Moderate Barrier." "Administrative Attitude," "Teacher Attitude" and "Theoretical Orientation" were reported by counsellors as hindering their involvement with families to the least extent. Means for these items ranged from 1.08 to 2.37.

*Counsellor's recommendations for overcoming barriers.* The last item on the Survey was an open-ended question designed to elicit counsellors' views about overcoming these barriers. A written response was received from 194 (78%) counsellors and most recommended: (a) a decrease in the counsellor/pupil ratio, the provision of more counselling time for schools and the hiring of more counsellors (n=108); (b) an increase in opportunities for training and supervision (n=41); (c) the provision of an appropriate space to work (n=34); and (d) a redefinition and clarification of the role of the elementary school counsellor (n=34). Other suggestions included more flexible hours and increased community resources for family referrals. A few counsellors (n=21) stated that working with families in counselling or therapy is not the role of school counsellors (e.g., "consulting yes, counselling no").

### *Summary*

In general, the results of this study suggest that B.C. elementary school counsellors have fairly traditional views of their role, both currently and in terms of their visions for the future. Counselling individual students, consultation with staff (teachers, administration), consultation with other professionals followed by parent consultation are the functions that they would ideally like to perform to the greatest extent.

Telephone consultation is currently elementary counsellors' most frequent form of contact with parents; however, they would ideally prefer to consult with parents face-to-face. Even so, they would prefer to consult with other professionals more often than with parents. The only family intervention that they would like to use to any large extent is family consultation.

Hence, despite a general indication that these elementary school counsellors would ideally like to perform family member interventions to a greater extent, it is clear that they see themselves first as counsellors to children, secondly as consultants to staff and other professionals, thirdly as consultants to parents, and fourth as family consultants.

#### DISCUSSION

This study indicates that most elementary school counsellors in the Province of British Columbia would like to use all forms of family member intervention with the exception of telephone parent consultation and family therapy. However, in comparison to such traditional counsellor functions as individual student counselling and consultation with teachers and other professionals, family interventions are not a priority. Counsellors do want to spend more time with families, but feel restricted by work load and work schedules and by a belief that the traditional functions are more important. In regard to role functions with family members, counsellors place parent consultation and family consultation ahead of parent education, but see all three of these functions as falling within their mandate.

The responses on this survey clearly indicated the major problem facing counsellors: "Work Load." Over 84% had case loads of over 500 students and 52% were responsible for 1000 or more students. Only 16% were responsible for 500 or less students. In a study conducted over 12 years ago (Allan & Ross, 1979), 81% of elementary counsellors reported "overload" and "lack of time" as the main inhibiting factors to successful job completion; hence these factors continue to hinder counsellors in the performance of their role. It is apparent that counsellors currently perform most often those functions which can most easily be accomplished within the school setting and within school hours: counselling students, consultation with staff and telephone parent consultation.

Considering the fact that parents and family are primary influences on the child, the finding that elementary counsellors would like to consult with professionals more frequently than with parents or families was unexpected. Two possible explanations exist for this finding. First, because elementary counsellors in B.C. work primarily in isolation with minimal peer contact, this finding may reflect a need for greater professional support and consultation. It is also equally likely that counsellors see this function as consistent with their role as consultants; by referring

parents and families to other services they are able to serve more students. However, the latter explanation is somewhat confusing in light of the fact that some consultation with parents and/or families is necessary in order to make successful referrals to other services.

In comparison with a study by Morse and Russell (1988), both B.C. and Kansas counsellors reported that they would like to be more involved in parent consultation activities. In addition, the discrepancies found in this study between the current and ideal frequencies of function performance are consistent with the conclusions made by Morse and Russell (1988) that conflict exists between the actual and ideal functions of elementary school counsellors.

The results of the present study are not consistent with those of Furlong, Atkinson and Janoff (1979) who found that the actual and ideal roles of California elementary school counsellors are congruent. However, in both studies counsellors ranked the individual counselling of students as the activity that currently does and ideally would take most of their time, with consulting ranked second, and parent help third.

Contrary to the beliefs held by Umansky and Holloway (1984), "Administrative Attitude" was not reported to greatly hinder the counsellors' performance of any of the family member interventions. The same was found for both "Teacher Attitude" and "Theoretical Orientation." These results suggest, at least from the perspective of these B.C. elementary counsellors, that the attitudes of administrators, teachers, and the counsellors themselves are not to any great degree preventing elementary counsellors from working with parents or families. Considered in conjunction with the findings as a whole, it would seem that counsellors are not theoretically opposed to working with parents and families; they just do not see these functions as priorities for their role.

The finding that "Parent Reluctance" is a "Moderate barrier" to elementary school counsellors' implementation of family therapy provides some support to the claim of Strother and Jacobs (1986) that parents are unwilling to participate in this process. However, these results may be a consequence not only of parent reluctance but also of counsellor training; few reported that they were trained in family therapy and therefore are likely unprepared to engage reluctant parents and/or families in the process of therapy.

#### IMPLICATIONS

While the practical implications of the results of this investigation pertain specifically to B.C. elementary counselling, it is hoped that this study's findings and implications will be useful to those involved in the development of elementary school counselling programs in other regions of Canada.

With particular regard to the research questions of this study, elementary counsellors in B.C. believe that parent consultation and family consultation are the two most appropriate forms of family member intervention to their role. Moreover, they would like to be involved in these activities "Often." However, there are a number of barriers which counsellors perceive to be hindering their ability to provide such services.

Given these findings, in combination with counsellor recommendations, it is recommended that elementary counsellors and those involved in the training and hiring of these professionals begin to actively work toward making parent and family consultation activities a clearly defined aspect of the elementary school counsellor role.

More specifically the results of this study suggest that:

1. More efforts must be made to decrease counsellor/pupil ratios. This recommendation is the most important, not only to address effectiveness and the high degree of role conflict experienced by elementary counsellors, but it may also result in their being more open to consult with parents and families.
2. School counsellor graduate level training programs should place more emphasis on instruction in family systems theory in order to increase counsellor awareness of the impact of family functioning on the individual student. In addition, family and parent consultation skills training should be a mandatory component of counsellor training programs.
3. Counsellor educators need to re-examine the congruence between their training programs, the role demands that counsellors actually face, and the professional role that counsellors would like to fulfil.
4. Elementary counsellors need administrative support to create flexibility within their work schedules. This would better permit them to meet the needs of working parents.
5. The provision of an appropriate space for counsellors in which to work with children and small groups (e.g., parents, families, students) should be made in every school that provides counselling services.
6. Since parent counselling, family counselling and family therapy are not priorities for elementary school counsellors, a sufficient number of community resources must be established in order to accommodate referrals and provide these services.
7. The role of the elementary counsellor as a consultant to parents and families must be clarified and established through promotion and the education of school staff, parents, and the community as a whole.

8. Finally, we would suggest, as do Morse and Russell (1988), that elementary counsellors assume leadership in defining their roles and needs.

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Author's note. Copies of the definitions of family member interventions and/or the questionnaire ("Elementary school counsellor survey: Your role with parents and families") can be obtained by writing to John Allan, Department of Counselling Psychology, Faculty of Education, 5780 Toronto Road, Vancouver, B.C., Canada V6T 1L2.