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VIDEOTAPE RECORDING IN COUNSELLING: "WHAT WE KNOW AND WHERE TO FIND IT"

ABSTRACT: This paper reviews the use of video tape with respect to the training of counsellors and other helping professionals, accelerating client growth in counselling and therapy, and improving the functioning of different types of groups in various settings, and examines the sources of information on VTR. Generally, VTR procedures were found to be very useful in promoting desired outcomes in the above three areas. However, it was noted that an overwhelming majority of the information describing these outcomes was located in journals that were not readily accessible to counsellors, especially those who worked in non-university settings. The implications of this condition are discussed.

The use of videotape recording equipment as a generally accepted component of training and research in counsellor education is a fairly recent development. This change is the direct result of the drastically reduced costs of the equipment. The proliferation of the use of closed circuit television has generated a pressing need for research examining the effects of the applications of this technique. A considerable amount of inquiry has already been conducted but to this point no synthesis of this information exists as it pertains to counselling. The purpose of this paper is to summarize the general findings to date and to speculate on reasons for the obscurity or felt lack of information in this area.

The use of videotape playback is based on the general assumption that this process will enhance self-awareness which in turn will lead to growth with respect to personal as well as professional skills. In using the procedure, issues such as selection of an activity for playback, timing of the playback, disturbing effects of the presence of the equipment, and the optimum quantity of feedback desirable for maximizing benefits for the subjects must all be considered. These factors are

representative of the types of problems with which the literature has been concerned.

The settings in which the research has been conducted may be classified into three broad categories: first, in training counsellors; second, as a self-confrontation device in individual counselling and therapy; and third, for feedback in group counselling and other group settings.

THE USE OF VIDEOTAPE IN TRAINING COUNSELLORS

There appears to be evidence that videotape feedback can be an important adjunct to conventional training for counsellors and the use of videotape recording in this capacity is widespread. Frankel (1971), Yenawine and Arbuckle (1971), Kagan, Krathwohl, and Miller (1963), Walz and Johnson (1963), and Archer, Dendy, and Scharf (n.d.) have demonstrated that there is definite merit in videotaping the interviews of counsellor trainees and then replaying these interviews as a source of feedback for the trainees. Counsellor trainees, after viewing videotapes of their interviews, tend to change their self-perceptions, gain in confidence, gain awareness of personal qualities, and experience an increased desire for further self-study. Yenawine and Arbuckle (1971) compared the effects of using audiotape and videotape recording techniques on counsellor trainee experiences within the counselling practicum. Two groups of counsellor education students, one using audiotape and one using videotape, were observed for one semester. Their results showed the videotape group to be superior to the audiotape group in: (a) developing an earlier and greater awareness of the nature of the counselling relationship; (b) developing "openness" within the group; (c) presenting tapes of their own earlier and in greater quantities; (d) being more openly and frankly critical of themselves; (e) criticizing the counsellor's performance rather than discussing the client's problems; (f) achieving harmony between supervision and student reactions on self-disclosure and self-examination in conjunction with critiques of recorded interview to the practicum; and (g) willing, open, and honest self-evaluation.

Although there was an indication that viewing videotapes of counselling interviews week after week can become a very passive and uninvolved experience, the practicum supervisor concluded that members of the videotape group moved farther and faster in their professional growth than their fellow counsellors in the audiotape group (Yenawine & Arbuckle, 1971, p. 4).

A number of articles have also demonstrated the usefulness of presenting counsellor trainees with simulated client problems (Archer, Dendy, & Scharf, n.d.; Eisenberg, 1971; Eisenberg & Delaney, 1970; Taplin, 1968). Studies of the process indicate that it broadens the range of problems that the trainee is confronted with in the practicum. Further, it tends to narrow the gap between counselling in the practicum and counselling in the field. It is possible that this could become the basis of a counsellor-learning package designed to teach trainees counselling skills. Finally this procedure may be used as a vehicle for in-service training, or for public education of the counsellor's role (Stamm & Nissman, 1971; Kagan, 1970.)

Another important innovation in the use of videotape technology for training counsellors and other members of the helping professions has been developed by Norman Kagan and his associates (Kagan, Krathwohl, Goldberg, Campbell, Schauble, Greenberg, Danish, Resnikoff, Bowes, & Bandy, 1967) which they refer to as the Interpersonal Process Recall (IPR) method. The IPR system has been succinctly described in a preamble to an article by Kagan, Krathwohl, and Miller:

A new technique in stimulated recall methodology, Interpersonal Process Recall (IPR) . . . provides participants in a recently concluded diadic encounter with maximum cues for reliving the experience by means of video-tape playback. The participants view the playback in separate rooms and are encouraged by interrogators at significant points in the playback to recall feelings and interpret behavior. Parallel reactions are obtained from the participants through simultaneous interruption of the video-tape playback (1963, p. 237).

It must be emphasized that this system is not restricted to counsellor education but may also be used for validation of theory, examining group processes, accelerating psychotherapy, and gaining further insights into the nature of supervisory relationships (Kagan, Krathwohl, & Miller, 1963).

Videotape recordings may also be used as documents to be studied in the research of various aspects of counsellor training. The literature in the area, however, is rather limited. Greenberg, Bowes, and Kagan (1970), for example, used videotaped vignettes in a project designed to study the dimensions of empathic judgment of clients by counsellors. The findings in the above articles are representative of the results that can be anticipated through the use of videotape replay (VTR) in training counsellors.

THE USE OF VIDEOTAPE FEEDBACK AS A DEVICE IN INDIVIDUAL COUNSELLING AND THERAPY

Videotape playback has been gaining increased recognition as a valuable aid to the therapeutic process in individual counselling. Basically, the research relative to the use of videotape in this area may be classified into two categories: the use of VTR as a self-confrontation device, and its use in the teaching of specific behavioral skills.

The research on the use of videotape playback for self-confrontation purposes has shown that it may accelerate the psychotherapeutic process (Kagan & Schauble, 1969; Alger & Hogan, 1967; Moore, Chernel, & West 1965; Cornelison & Tausig, 1964; Kagan et al., 1963; Nielson, 1962; Cornelison & Arsenian, 1960; Wolff, 1943). While not a recent therapeutic development, self-confrontation exercises have been documented as aids in promoting growth through the counselling process. The specific benefits of such an exercise for clients include greater personal insight, a willingness to express spontaneous remarks, and an increase in effectiveness of communications skills. These factors combine to lead the client to commit himself to behavioral change and to experience a more accelerated growth rate during therapy.

With respect to self-confrontation, the IPR model developed by Kagan can be used very effectively. The use of an "inquirer" or "interrogator" helps the client to become more fully aware of his thoughts, feelings, and behaviors when viewing the videotape of his session. The evidence suggests that the IPR process aids the client in four ways: he admits discomfort; he commits himself to change; he differentiates stimuli; and, finally, he changes his behavior. The process of client self-confrontation in counselling can certainly be enhanced through the use of videotape playback.

In terms of using a videotape approach for specific skills training, much less documentation is available. However some evidence exists which suggests that the techniques may be successfully used to teach specific problem-solving skills: methods of applying for a job; leadership skills; or means of sharing ideas and feelings (Higgins, Ivey, & Uhlemann, 1970; Crews, Carr, & Hunter, 1969; Logue, Zenner, & Gohman, 1968).

THE USE OF VIDEOTAPE IN GROUPS

The literature pertaining to the use of videotape with groups falls under two general categories. First, there have been a number of studies in which group sessions were videotaped and then various aspects of the feed-back process were studied. Secondly, the impact of VTR procedures on attitudes, skills training, and empathy has been examined.

The effects of videotape playback in group situations are many and varied (Hum, 1970; Martin, 1970; Miller, 1970; Stoller, 1970; Danet, 1969). A summary of the observations gleaned from the research follows: Videotape usage requires careful planning, selection, and discussion to be effective (Martin, 1970); also, it requires the adequate handling of a skilled therapist (Danet, 1969). These authors agree further that videotape feedback does not have a consistently positive effect on groups. Other indications are that videotape feedback can inhibit a group's process as well as facilitate that process (Danet, 1969). More positively, Miller (1970) found that video playback was superior to audiotape feedback or to no feedback at all in enhancing self-ideal congruence. Further he suggested that there was no difference in effect between immediate and delayed feedback. Stoller (1970), however, advocated immediate feedback, and this principle is also central in most of Kagan's work.

Stoller (1970) was particularly impressed with the ability of the VTR procedure to help encounter groups deal with immediate behavior. Specifically, he proposed using "focused feedback" in which only small but relevant portions of the videotape were replayed. These portions highlight particular aspects of a group member's behavior. Relevant to this, Hum (1970) found that group activity tended to increase with the use of videotape feedback. Finally, Anderson, Hummel, and Gibson (1970) also observed that a camera and a recorder lend themselves to inclusion within the group without threatening or creating anxiety for the participants (p. 174). Generally, the use of VTR in group set-

tings can be useful in promoting the therapeutic objectives of these activities.

Articles in the second category are concerned with attitudes, behavioral change, and the measurement of empathy. Landy (1970) demonstrated that the attitude of individuals toward participation in a group experience may change as a result of viewing a videotape of such an activity. Further, there have been suggestions that families may modify their behavior after being confronted with videotaped samples of interaction patterns among their members (Stabler, 1972; Kaswan & Love, 1969). Also, anxiety-oriented behaviors may be reduced by the video-taped vicarious desensitization approach (Woody & Schauble, 1969). Finally, Danish and Kagan (1971) have shown that the Affective Sensitivity Scale, a videotape test of sensitivity or empathy, can identify positive changes in sensitivity as a result of an intensive group experience.

SUMMARY AND IMPLICATIONS

The studies reviewed in this article have indicated that the VTR process can be a very useful adjunct to facilitating counsellor training and promoting growth in individual and group counselling, and in psychotherapy. However, many questions remain unanswered with respect to the application of these techniques in the above three areas. A summary of these questions follows.

With respect to training, do some trainees benefit from videotape feedback while others do not? If this is so, is it possible to define the characteristics of those who will or will not benefit? Are there specific training methods with which videotape recording is not compatible? The following questions can also be asked of the other two uses. Does videotape recording have a novelty effect which will eventually diminish and turn the training or therapy into a passive and uninteresting experience? Does the presence of the equipment create anxieties within either the counsellor or client that would interfere with the counselling relationship? Does the timing of the feedback affect its impact as a growth-promotion tool? In the individual counselling process, there was an indication that videotape playback could be a vehicle for teaching clients specific skills. Implicit in this statement alone are several research problems. Can videotape playback be empirically established as an effective tool for teaching problem-solving skills, developmental skills, or means of sharing ideas and feelings? If so, to what types of client populations — neuropsychiatric, normal, motivated, old, young? The suggestion that videotaping is superior to audiotaping was indicated, but this again was not empirically established.

In group settings attention should be directed to a study of the effects of videotape feedback on specifically defined goals of group processes. For example, is videotape feedback helpful in developing personal honesty, in developing communication skills, in encouraging open, honest feedback, and in developing specific skills of interpersonal relationships? It has also been suggested that videotape playback

SUMMARY TABLE OF REFERENCES SOURCES
AND THE ACCESSIBILITY OF THE SOURCE TO COUNSELLORS

Journals readily accessible:

	# of articles		# of articles
American Journal of Psychotherapy	3	Journal of Consulting and Clinical Psychology	3
Canadian Counsellor/ Conseiller Canadien	2	Journal of Counselling Psychology	18
Counsellor Education and Supervision	13	Personnel and Guidance Journal	2
		TOTAL:	41

Journals relevant but not readily accessible:

	# articles		# articles
American Psychologist	2	Journal of Clinical Psychology	1
American Vocational Journal	3	Journal of Consulting Psychology	1
Audio-Visual Instruction	5	Journal of Educational Psychology	1
AV Communications Review	2	Journal of Medical Education	6
Canadian Journal of Behavioural Science	1	Journal of Research and Development in Education	1
*Comparative Group Studies	7	Journal of Social Work	1
Current Psychiatric Therapies	1	Psychological Bulletin	1
Dissertation Abstracts	2	Psychology Today	1
Educational Technology	4	Psychotherapy: Theory, Research, Practice	2
Improving College and University Teaching	1	School Management	2
International Health Science TV Bulletin	2		
International Journal of Group Psychotherapy	6	TOTAL:	53

Journals that do not appear relevant and are less accessible:

	# of articles		# of articles
American Journal of Clinical Hypnosis	3	Journal of the American Medical Association	1
American Journal of Ortho- psychiatry	3	*Journal of Nervous and Mental Diseases	13
American Journal of Psychoanalysis	1	Journal of Psychoanalysis in Groups	1
American Journal of Psychiatry	8	Medical Journal of Australia	1
Archives of General Psychiatry	1	Mental Hospital	1
Canadian Medical Association Journal	1	Perspectives in Psychiatric Care	1
Delaware Medical Journal	1	Psychiatric News	1
Diseases of the Nervous System	1	Psychiatric Quarterly and Supplements	4
		Psychosomatics	2
		TOTAL:	44

Books and manuscripts with relevant titles..... 16
Books and manuscripts with non-relevant titles:..... 4

**Comparative Group Studies* and *Journal of Nervous and Mental Diseases* are excellent sources of information on the use of video-tape procedures.

NOTE. There are 160 references listed but only 158 are tabulated above since two articles published in M.M. Berger are listed separately in the bibliography.

may be useful in facilitating behavioral change. Can these behaviors be taught more effectively through the use of videotape than by other means? If so, in what kinds of groups and with what results? Finally, Hum's (1970) study suggests the merits of widespread videotaping of counselling groups in the public-school system. But to this point, no systematic documentation of other activities in this area exists.

Even though there is a proliferation of information on videotaping, it is not easy to identify where the information exists; very often information is difficult to locate simply because it is not where you would most expect to find it. Although some of the related research has been recorded in counselling journals, an abundance of research has been reported in places not usually used by counsellors. In reviewing the references for this paper, it surprised the authors to discover that only one third of the journal articles were located in journals directly oriented to counselling and only a small proportion of one quarter of the references could really be considered readily accessible. Table 1 summarizes the published sources of the references upon which this paper was based.

It becomes obvious that the balance of the material on the use of videotape recording equipment is found in journals that are not directly related to counselling and in books and manuscripts that are difficult to locate. This situation is detrimental to practitioners in the field, especially in the school systems, where most counsellors probably refer only to the *Canadian Counsellor* or the *Personnel and Guidance Journal*. Yet articles in these journals made up less than three percent of the total references for this paper. This condition greatly restricts the amount of information pertaining to videotaping procedures that is readily available. Although the list of references for this paper is in no way exhaustive, the importance of the implications of the location of the 158 references cited cannot be denied.

The distribution of information relevant to videotaping procedures raises two important issues. First, counsellors must be made aware that considerable information on this subject does exist, but that they may have to turn to journals from such fields as psychiatry, medicine, and education in order to find the information. Secondly, there is a responsibility on the part of counselling-oriented journals to seek out more of the existing information. An awareness of these two issues would make the distribution of videotape information more functional. This, in turn, would contribute to a more effective use of videotape procedures in the profession and serve to enhance the effectiveness of the counsellor and the growth of the client.

RESUME: Cet article discute de l'usage du magnétoscope dans la formation des conseillers et des autres professionnels de la relation d'aide. On discute aussi de son usage en tant qu'agent de l'évolution du client en counseling et en thérapie et comme moyen d'améliorer le fonctionnement de différents groupes dans diverses situations. En général, les procédures

V.T.R. se sont avérés très utiles pour obtenir les résultats souhaités dans ces trois secteurs. Cependant, on s'est aperçu que la plus grande partie de l'information relative à ces résultats n'était pas facilement accessible aux conseillers, surtout à ceux qui ne travaillaient pas dans un milieu universitaire. On discute des implications de cette situation.

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