Multiple intelligences training for counsellors:

Reflections on a pilot program

Mark Pearson

Counselling Program, University of the Sunshine Coast, Australia.

Author note:

Dr. Mark Pearson is a senior lecturer for the Counselling program, at the University of the Sunshine Coast, Queensland, Australia. He is also the director of the Expressive Therapies Institute of Australia.

Correspondence concerning this article should be addressed to: Dr. Mark Pearson: mpearson@usc.edu.au

Abstract

A pilot training intervention for counselling professionals was designed to introduce theoretical and practical ways of incorporating Gardner's theory of multiple intelligences (MI) into counselling practice with adult clients. Eight experienced counsellors were introduced to MI theory and an intelligence preference survey, as well as practical activities designed to use each intelligence. Qualitative data was gathered from the counsellors three months post-training, to gauge their perspectives on the program and its impact. Participants responded positively to the training, and indicated enhancement of their professional work. The MI preference survey was considered particularly helpful in informing treatment choices. Activities that primarily used the visual-spatial and musical-rhythmic intelligences were found to be most useful.

KEYWORDS: art therapy, counselling, creative arts, creativity, expressive therapies, multiple intelligences.

Multiple Intelligences Training for Counsellors: Reflections on a Pilot Program

The counselling education literature contains little information about the teaching of creative arts as an adjunct to counselling (Ziff & Beamish, 2004). This literature tends to focus on either traditional verbal counselling or creative arts-based therapy. However, a growing interest in applying multiple intelligences (MI) theory (Gardner, 1983, 2006, 2009) within counselling is emerging (e.g., Booth & O'Brien, 2008; Keteyian, 2011; O'Brien & Burnett, 2000a, 2000b; Odeleye, 2010; Pearson, 2011; Pearson & O'Brien, 2012). The literature proposing the use of MI recommends the use of a range of therapeutic mediums, including creative arts, selected in response to client abilities with MI.

Responses to a pilot counsellor training program that introduces MI theory and practice are described in this article. This pilot counsellor training program used a form of creative arts therapies – expressive therapies (ET) – to apply Gardner's theory of MI. ET is a synthesis of a wide range of creative arts mediums used therapeutically in counselling practice (Pearson & Wilson, 2008, 2009). The MI training intended to provide several contributions to knowledge in the field of counselling: a model for extending counsellor training with MI theory, a framework for counsellors to be more flexible in the delivery of service to clients, and new ways of matching treatment to client preferences and strengths, as recommended by (Bowles, 2013; Swift, Callahan, Ivanovic, & Kominiak, 2013). Participant feedback on the training indicated positive responses, and the visual-spatial and musical-rhythmic intelligences and activities were found to be particularly helpful for those newly acquainted with creative arts approaches.

In his MI theory Gardner (2006) delineates eight distinct intelligences, each one representing a different ability through which clients can communicate, process their difficulties, implement new behaviours, and learn. The implications for MI theory, as applied to counselling with young clients, have been described by Booth and O'Brien (2008) and

O'Brien and Burnett (2000a, 2000b). In this study MI theory and the practical activities of ET were brought together to form a MI approach to adult counselling. The MI training intervention described and investigated here aims to introduce counsellors to the application of the MI approach for incorporation into their therapeutic practice.

Although the study contained a small sample of eight participants, the findings describe positive outcomes from the pilot training, indicating that the training was considered by participants to be supportive of therapeutic practice. A growing trend in the counselling, psychotherapy, and psychology literature draws on practice-based evidence, and using professional expertise as part of the evidence trail (e.g., Barkham, Mellor-Clark, Connell & Cahill, 2006; Brendtro & Mitchell, 2012; Brendtro, Mitchell, & Doncaster, 2011; Fox, 2011; Hanley, Sefi, & Lennie, 2011; Leeman & Sandelowski, 2012). Data in this study was gathered from participants, with counselling expertise three months after receiving MI training allowing sufficient time for training outcomes to be integrated into daily practice. During the three months post-training participants were able to increase awareness of clients' individual learning or processing styles, and develop congruent treatment plans.

The use of individual learning styles is not new in the field of education. In their Experiential Learning Model, Kolb and Kolb (2005) state that learning depends on individual styles, and that individuals develop preferences for specific modes. For more effective learning, awareness of individual learning styles, within a suitable learning space is advised (Kolb & Kolb, 2005). Recommendations for creating more effective learning spaces within higher education institutions (Kolb & Kolb, 2005), include several aspects that have been identified as valuable within creative arts therapies trainings, and are an integral part of the person-cantered ethos of creative arts group work (Rogers, 1993). For example, "respect for learners and their experience" (p. 207), "creating and holding a hospitable space for learning" (p. 207), "making spaces for feeling and thinking" (p. 208), and "making space for inside-out

learning" (p. 208). This last recommendation includes the concept of initially focusing on individual experience and the individual metaphors, interests and goals that underlie that experience. Kolb and Kolb (2005) found that, linking educational experiences to a learner's interests, activates intrinsic motivation and increases learning effectiveness. Manolis, Burns, Assudani, and Chinta (2013), highlight the way learning styles are of concern to educators, and individual communication/learning/ therapeutic styles may be becoming a concern of counsellors (e.g., Geller, 2005; Keteyian, 2011).

The refined Kolb 17-item self-rated learning inventory (Manolis, Burns, Assudani, & Chinta, 2013) displays several close similarities to MI preference self-rated surveys, which would help an educator or counsellor identify student/client intelligence strengths. For example, Item 6 "When I am learning I have strong feelings and reactions" and item 8 "I learn by feeling" would help indicate a preference for use of the intrapersonal, or emotional, intelligence; whereas item 5 "I learn best when I rely on logical thinking" and item 12 "When I am learning I am a logical person" would both point to a logical-mathematical preference (Manolis, Burns, Assudani, & Chinta, p. 51).

Multiple Intelligences Theory

Gardner developed the theory of MI, first published in 1983, from his research in developmental and cognitive psychology. The theory was influenced by his work with brain-damaged patients and his study of the development of children's skills in several art forms, (Gardner, 2009). This theory challenged the psychological orthodoxy of intelligence as a single factor. While he could have used the terminology of "faculties" or "talents" Gardner chose to use the word intelligences, describing an intelligence as a "biopsychological potential to process information in a certain way in order to solve problems or create products that are valued in at least one culture or community" (Gardner, 2009, p. 5). MI theory became very popular, very quickly in educational settings, offering the possibility to take seriously

differences between students, and to expand the effectiveness of teaching by activating several intelligences (Gardner, 2009).

Gardner found that students had individual combinations of preferred, or natural, intelligences. Sellars (2008) claimed that intelligence profiles developed using multiple intelligences (MI) theory are "as unique as a fingerprint; each profile comprising a set of relative strengths and limitations" (p. 79). Individual profiles are also made complex due to cultural and personal experiences (Gardner, 1999), in addition one intelligence is not usually developed independently from the other (Sellars, 2008). The current author proposes that understanding counselling clients may be enhanced through investigating and responding to the individual way intelligences are harnessed in communication and therapeutic process.

Hironaka-Juteau (2006) found that introducing MI infused teaching, sensitive to students' MI profiles, resulted in greater student self-awareness and a realization by students that they had their own way of being clever. Increases in learner self-esteem and perceived self-competence as a result of using students' MI profiles within education has contributed to increases in learning (Lumsden, 1997). Academic improvements have been widely reported, attributed to increases in student engagement, as a result of introducing MI-based instruction methods. Academic improvement due to the use of MI profiles has been described in the area of teaching reading (Al-Balhan, 2006), in teaching mathematics (Douglas, Burton, & Reese-Durham, 2008), and in science education (Ozdemir, Guneysu, & Tekkaya, 2006).

Academic debate abounds about the multiple or single factor basis of intelligence, and the basis of identifying individual intelligences (Lohman, 2001; Morgan, 1996); however, there is extensive evidence that incorporating students' intelligence profiles in teaching resulted in significant learning improvements (Gardner, 2006; Greenhawk, 1997; Hironaka-Juteau, 2006; Hopper & Hurry, 2000; Kezar, 2001; Vialle, 1997). For counsellors, this can

raise the question of possible improvement in treatment outcomes if MI is used. If MI theory helps students engage, could it help clients engage?

Gardner's descriptions of the eight intelligences can be summarized as verbal-linguistic (strong ability to use words), mathematical-logical (ability with deductive reasoning), visual-spatial (ability to use images and graphic designs), musical-rhythmic (ability to express through music and rhythm), bodily-kinaesthetic (ability with movement and use of the body), intrapersonal (awareness of internal moods and thoughts), interpersonal (ability to learn and express through relating to others), and naturalist-environmental (affinity with nature and living things) (Nolen, 2003). In this study only the first seven intelligences are explored, as the naturalist-environmental intelligence is more challenging to incorporate into office-based counselling practice. Descriptions of each intelligence, and the ways they can emerge within therapy, follow.

Interpersonal intelligence.

People who have a particular capacity with interpersonal intelligence are characterized by the ability to cooperate in groups, sensitivity to the feelings of others, and good communication skills (Sellars, 2008). Some writers refer to the combination of the interpersonal and the intrapersonal intelligences as the 'personal intelligences' (Sellars, 2008), and some writers refer to the interpersonal intelligence as the 'social intelligence' (Holekamp, 2006; Wawra, 2009). Almost all approaches to counselling value interpersonal connections. In developing rapport with a client, the strengths of the counsellor's and the clients' interpersonal intelligences are central. The person-cantered approach to therapy, developed by Rogers (1951) and others, focuses on creating an extremely positive interpersonal connection.

Intrapersonal intelligence.

Sellars (2008, p.79) reports that Gardner considered his perception of the intrapersonal intelligence was "the most important construct for 21st century learners". Gardner's most

recent definition of the intrapersonal intelligence describes: "a cognitive capacity that processes self-relevant information. It analyses and provides coherence to abilities, emotions, beliefs, aspirations, bodily sensations and self-related representations. . ." (Moran & Gardner, 2007, p. 21). The intrapersonal and the interpersonal intelligences are interwoven and are the basis for forming a sense of self, what Gardner called a working model of self (Gardener, 1999). Activities that turn attention towards self-reflection and raise questions relating to the nature of 'self' have been reported to strengthen this domain (Lazear, 2003), and underlie a number of counselling approaches (e.g., existential and psychodynamic approaches).

A client with a preference for the intrapersonal might enjoy and learn through self-reflection, participate in meta-cognition and like working alone. Clients in this category may have an enhanced awareness of inner spiritual realities. One reason that ET was chosen for this pilot project is that it makes regular use of the intrapersonal intelligence. As an example of the use of the intrapersonal intelligence in an educational setting, in developing and conducting a support group approach to helping secondary students with social and emotional difficulties, Mowat (2011) was able to create conditions and activities that increased a majority of students' intrapersonal intelligences, enabling them to develop a greater understanding of their behaviour.

Emotional intelligence is term similar to Gardner's intrapersonal intelligence. The emotional intelligence construct was developed by Salovey and Mayer (1990) to focus on a subset of a combination of Gardner's intrapersonal and interpersonal intelligences, but being closer to the intrapersonal (Sellars, 2008). Emotional intelligence has been found to be closely connected with successful interpersonal relationships (Schutte et al., 2001), especially correlated with empathic perspective taking, self-monitoring, social skills, and marital satisfaction.

Verbal-linguistic intelligence.

The verbal-linguistic intelligence has been at the core of western psychotherapy since Freud adopted the term 'the talking cure' to describe psychoanalysis (Freud, 1910). The verbal-linguistic intelligence is used extensively in verbal therapy, and it is ideal for clients who think and learn through written and spoken words, and have the ability to memorize facts, fill in workbooks, respond to written tasks, and enjoy reading. However, for clients with a low verbal-linguistic ability other modalities and intelligences may be essential. This intelligence underlies verbal therapy, therapeutic writing (Pearson & Wilson, 2009; Wright & Chung, 2001), the use of journals (Progoff, 1992), bibliotherapy (Pardeck & Markward, 1995), and poetry therapy, which has been applied in clinical settings since 1970 (Bolton & Ihanus, 2011). Therapeutic writing activities include story construction, diaries, journal, letters, poetry and lyrics (Connolly Baker & Mazza, 2004).

Therapeutic writing can enable clients to explore narratives from various perspectives; to reflect on values, feelings, and identity; to use metaphors for issues that may be too distressing to articulate directly; and to enable acute observations for description and reflection (Bolton & Ihanus, 2011). The aim of using poetry in the psychological healing process is to bring forward a response from the client that will help them become more involved in the therapeutic process (Koppman, 2001). In general, writing has been found to enable clients to manage events and emotions and gain some control (Connolly Baker & Mazza, 2004).

Mathematical-logical intelligence.

This intelligence is involved in problem-solving while using mathematical functions, critical thinking, logic, use of abstract symbols and pattern recognition (Armstrong, 1994). This intelligence may be engaged when clients use cognitive behavioural therapy and participate in behaviour modification programs. These approaches may be most helpful for

clients who emphasize the logical and cognitive aspect of their lives, who can think deductively, and deal with logical consequences.

Visual-spatial intelligence.

Art therapy and the use of graphics, images (collage), drawing, sandplay therapy and symbol work primarily use the visual/spatial intelligence. Generally clients are able to express and communicate well through visual modalities. However, these modalities may be particularly supportive for clients who can visualize images and pictures, and have the ability to create graphic designs and communicate with diagrams, images and symbols. Extensive practice-based researchers, over many decades, have illuminated the ways images and image-making can support therapy (e.g., Hass-Cohen & Carr, 2008; McNiff, 2004; Ulman & Dachinger, 1996).

Musical-rhythmic intelligence.

This intelligence is a foundation for participating in music therapy and is activated whenever spontaneous music-making or recorded music is used as part of therapy (Bonny, 1973; Brey, 2006; McIntyre, 2007). It can be connected with the kinaesthetic intelligence through dancing to rhythms, and to the verbal/linguistic intelligence through the rhythms of poetry in therapy.

Application of the musical-rhythmic intelligence may be ideal for clients who can recognize tonal patterns, and environmental sounds, and who learn through rhyme, rhythm and repetition. Music has been shown to evoke intense emotional experiences, accompanied by dopamine release, (Salimpoor, Benovoy, Larcher, Dagher & Zatorre, 2011), and pleasurable experiences with music activate the reward and emotion regions of the brain (Blood & Zatorre, 2001). Music can also have a significant impact on individual's management of pain (Bernatzky, Presch, Anderson & Panksepp, 2011). The value of

engaging with music, both in counselling sessions and as an extra-therapeutic activity, is supported by neuro science (Baker & Roth, 2004; Sutoo & Akiyama, 2004).

Bodily-kinaesthetic intelligence.

Gardner (1983) described the bodily-kinaesthetic intelligence as: "the ability to use one's own body in highly differentiated and skilled ways, for expressive as well as goal-directed purposes" (p. 206). Blumenfeld-Jones (2009) identifies dance as the premier example of this intelligence, along with skilled-athleticism. This intelligence may also be active in somatically focused therapies (Diamond, 2001; Levine, 2004; Roberts, 2004), dance therapy (Levy, 1992), bioenergetics (Lowen, 2006), and relaxation. A perspective on this intelligence that is most useful for counsellors, describes it as the ability to be aware of one's motion, "sensing of one's motion" and "knowing what you are doing with your body" (Blumenfeld-Jones, 2009, p. 66).

Strength in this intelligence suggests ability with sensory awareness and movement, and an ability to learn through physical movement and body wisdom, as well as having a sense of knowing through body memory. Enhancing clients' ability with body awareness has become part of the evolving cognitive behavioural treatments, where the relaxation response is activated, and has also been an aim in somatic therapy. Improving body awareness has been suggested as an approach for treating patients with conditions such as chronic pain, obesity and post-traumatic stress disorder (Mehling et al., 2009).

Creative Arts Based Training Programs

A combination of creative arts therapies, ET has been selected as a practical basis for actualizing MI theory in practice. Expressive therapies have been recognized as enabling the use of all the intelligences (Booth & O'Brien, 2008). Specialists with post-graduate training in their creative arts field (e.g., art therapists, music therapists, dance therapists, sandplay therapists, etc.) may predominantly use their preferred modality. What is described here is the

use of a wide range of modalities, drawn from the creative arts, with the basis for modality

choice emerging, not from therapists' preferences, but from an understanding of the client's

individual MI profile.

The inclusion of creative arts therapies within the counselling process is supported by

a range of evidence. Dahlman (2007) found that science students participating in an arts

program reported an increased ability to solve problems, new ways to observe the

environment, greater self-confidence, and an enhanced understanding and valuing of the

working process. Her participants reported that the artistic activities affected their academic

courses since the exercises were experienced as creative and meaningful. The artistic

activities developed an ability to concentrate, which was found to be very helpful in problem

solving.

After teaching a post-graduate course on using a multi-modal approach to the arts in

counselling, Ziff and Beamish (2004) reported that intern counsellors' feedback was positive,

specifically noting that they appreciated the opportunity for experiential work that induced

relaxation and enjoyment. In other words, students were able to experience some of the

benefits that counselling clients might experience. A highlight of feedback was the

counselling interns valuing of the "trust and support created through the experiential work"

(Ziff & Beamish, 2004, p. 156). Many of these trainee counsellors were able to immediately

introduce the creative arts techniques into their internship practices.

The use of imagery has been shown to be a highly effective support to the therapeutic

process (Hass-Cohen & Carr, 2008; Lazarus, 1982; McNiff, 2004; Rogers, 1993; Skovholt,

Morgan & Negron-Cunningham, 1989). Art therapy has been used in a variety of ways, in a

wide array of contexts, with extensive research indicating many positive outcomes. For

example, creative arts processes have been used successfully in debriefing professional

hospice workers (van Westrhenena & Fritz, 2013); these processes produced therapeutic

effects in that they facilitated communication, promoted self-care, and improved wellbeing among participants. Expressive arts therapies are described as valuable with adolescents dealing with cancer (Baerg, 2003). Baerg notes that the use of a range of expressive arts, particularly visual art and poetry, support adolescents to deal with the additional existential challenges of dealing with life-threatening illness.

Art therapy has been to support access to "the non-verbal core of traumatic memory" (Talwar, 2007), with drawing combining the cognitive and reflective domains with the affective, expressive domain. In trauma work art has been shown to support a reduction in acute stress symptoms (Talwar, 2007). It can help a client tap into the non-verbal realm of imagery (Cohen & Riley, 2000), and can integrate left and right hemisphere functioning that contributes to integration of difficult experiences (McNamee, 2006). It involves both hemispheres in accessing memories and working through emotions, bringing forward trauma that may have been locked in the somatic memory (Talwar, 2007).

Teachers in China, impacted on by the 2008 earthquake in Sichuan, found that a three-day expressive arts training, using a strength focus, provided significant support in increasing self-efficacy and teaching efficacy (Ho et al., 2012). A useful (therapeutic) feature of creative arts lies in the foundation of a non-judgmental therapeutic relationship, which has been shown to increase motivation within education (Zhao & Kuh, 2004). Rogers (1993) also describes the importance of the non-judgmental approach in arts therapies group work for achieving optimal outcomes. Curl (2008) found that including a positive focus in treatment using the arts, as opposed to having clients focus on their negative experiences, resulted in a significant decrease in stress, and this reduction in stress was also attributed to the cathartic qualities of art-making.

The inclusion of creative art therapies using a MI framework into a counsellor's modalities is warranted by the literature. For example, programs or methods that use non-

verbal means – such as arts-based practices – may better access trauma than traditional verbal means (Gantt & Tinnin, 2009). Benefits of art-based activities include the enhancement of mental-wellbeing, overall stress reduction and an increase in positive emotions (Curl, 2008; Walsh, Chang, Schmidt, & Yoepp, 2005). In an educational setting, multi-sensory and active involvement has been shown to stimulate the ability to receive information (Laird, Naquin, & Holton, 2003). Creative arts activities can involve problem solving, decision making, along with opportunities for self-exploration and, in a group setting, awareness of others (Coholic, 2011; Foster, 1992). These skills are generally used in expressive arts therapies, and these abilities are developed, most particularly with those affected by trauma (Ahmed & Siddiqi, 2006).

A common finding of the application of art in therapy with disaster survivors is the facilitation of emotional expression, as it provides a medium for communication and appears to enhance the resolution of painful emotions (Ahmed & Siddiqi, 2006). For instance, children, affected by a strong earthquake in Kashmir and north western Pakistan were observed to exhibit increased resilience after working with art in a group setting (Ahmed & Siddiqi, 2006). In addition, art therapy was found to be effective for providing psychological support for children affected by a tsunami in Sri Lanka (Chilcote, 2007), and Davis (2010) found expressive arts and music highly supportive of children transitioning back to school after a tornado.

In mental health treatment, therapy that incorporates art and therapy in which art is the main modality have become popular and more widely accepted (Kalmanowitz & Potash, 2010). The expressive arts training model of Kalmanowitz and Potash (2010) specifically addresses the ethical and practical challenges of introducing complex skills in short periods. These authors describe the aim of teaching the use of art in a therapeutic setting as a set of skills for participants to use within their own professional boundaries. Similarly, the MI

training intervention does not aim to transform counsellors into art therapists, somatic therapists, music therapists, or therapeutic writing experts within a short training, it aims to provide a solid theoretical framework, experiential leaning and engender reflection on application within participants' professional settings and boundaries.

Sources of Multiple Intelligences Counselling Activities

Activities drawn from ET were used in this study, as a way to implement MI therapy in counselling practice. ET is a synthesis of client-cantered expressive counselling principles, modalities, and practical, experiential activities for supporting clients in counselling. ET has been developed since 1987 (Pearson, 1997, 2004; Pearson & Nolan, 1991, 2004; Pearson & Wilson, 2001, 2008, 2009) and provides many experiential activities that engage the full range of intelligences. As well as traditional verbal exchange, ET incorporates art, imagery, music, movement, emotional expression, and therapeutic writing into counselling sessions (Pearson & Wilson). ET provides a wide range of practical counselling activities from which counsellors can select appropriate interventions that correspond to clients' preferred intelligences.

The MI pilot program was trialled to gain feedback from experienced counsellors on the effectiveness, impact, value, and the possible improvements that might strengthen its usefulness. In particular, the study hoped to gain insight into the experiences of counsellors as they integrate MI theory and a range of creative arts-based counselling activities into their work with clients.

<div align="center">Method</div>

A qualitative, phenomenological design was used in this study, to explore participants' experiences and gain insight into their perspectives (Langdridge & Hagger-Johnson, 2009). Participants were selected on the basis of having expertise in the field of counselling. While

not aiming to gather generalisable findings, the researcher sought to determine if outcomes from the pilot program might indicate support for conducting a larger study.

The feedback from participants, via a short questionnaire on their response to the training intervention and open-ended interviews conducted three months post-intervention, became the raw material underpinning the study. Participant experiences gathered from the questionnaires were analysed through a simple frequency count that indicated commonalities in their experiences. Interpretive phenomenological analysis (IPA) was used for the analysis of interviews, a qualitative approach that interprets how people make sense of their lived experiences (Smith, Flowers, & Larkin, 2009). IPA is concerned with what the participant thinks or believes about the topic being investigated, and the IPA researcher's own conceptions are required to make sense of the personal world being studied (Chapman & Smith, 2002). The stages of IPA according to Willig (2008) are:

1. Reading and re-reading the interview transcription. Significant responses from the reader, statements, sentences, or quotes will be identified in the transcripts (open coding).

2. Identification of and labelling of themes.

3. Structuring the analysis, clusters of themes are labelled in a way that captures their essence.

4. Production of a summary table of the themes, with quotations that illustrate them. Abandoning of themes that are not well-represented.

Participants

Eight counsellors – from the Perth (Australia) metropolitan area – (sourced through a professional counselling association and a university alumni association) volunteered to participate in the study. This number is considered suitable for phenomenological research (Kuzel, 1992; Morse, 1994). They were all female and members of a professional counselling association, which ensures a uniform minimum level of training, and supervision. They had

experience in a counselling practice for at least three years (mean = 5.9 years) and had

flexibility in choice of counselling methods. Three participants maintained private practices

and five worked for government or social welfare agencies. Participants worked primarily

with adult clients attending personal counselling, dealing with a range of issues, such as

bereavement, relationship difficulties, foster parenting, drug and alcohol dependence, and

adjustment to relocation. Participants attended a one-day training in the use of MI within

counselling with adult clients, and agreed to report on their experience of the training and the

implementation of MI within their practices, three months after the training.

The Intervention

A one-day MI training intervention, was developed by the researcher, to introduce

participants to: (1) an overview of MI theory, (2) means for assessing participants' own and

clients' preferred or natural intelligences, (3) practical counselling activities that use each of

the intelligences, and (4) session-planning on the basis of a clients' intelligence profiles (i.e.

matching MI activities to the client's profile). The practical counselling activities presented

during the MI training were previously designed by the researcher and colleagues, and have

been tested and published (Pearson, 2003; Pearson & Nolan, 2004; Pearson & Wilson, 2001,

2009). The intervention included a survey (Chislett & Chapman, 2005) to inform participants

about their preferred intelligences and to assess clients' intelligence preferences. Participants

were encouraged to include the intervention framework and activities in their professional

work according to their own assessment of client needs and readiness. A detailed program for

the training is provided in Appendix I.

Data Gathering and Analysis

A 15-item questionnaire was devised by the researcher - "Reflecting on your

experience of using the MI training" - as a framework for reflection and reporting on each

aspect of the training as well as their experience of the MI approaches. The questionnaire was

reviewed by two senior researchers who were experienced in qualitative data gathering, and revised in the light of their recommendations. The questionnaire included a 5-stage Linkert-style response table, allowing for evaluations of the 15 intervention components, ranging from "very useful" to "not at all useful." The questionnaire included a column for the MI activities to note whether they had been used yet within counselling sessions. A section was provided for participants to respond to the question: "Any other comments?" Frequency counts were used to identify commonalities in the participants' perception of the training components.

An opportunity was provided for questionnaire responses to be amplified through a short open-ended interview. Interview transcripts were analysed using IPA, resulting in the identification of major and minor themes. All eight participants completed the questionnaire and attended an interview, approximately three months post-training. The data was collected three months post training, in order to provide time for the participating counsellors to integrate the MI approach into their daily professional work.

Results

The Questionnaire

Participant comments on the questionnaire indicated that the MI training was considered helpful and had a positive impact on their professional work. Indicators of a positive impact were supported via general comments such as: "I wish I had this tool previously. I was very impressed with the entire program – all the tools were great. This was an opportunity to expand the way I work."

The components of the program most often implemented were: the overview of MI theory, the concept of applying MI theory through using ET, the MI preference survey, and engaging the interpersonal intelligence in encouraging clients' communication. Engagement

with the MI preference survey was also considered by some participants to have a positive impact on client self-esteem.

The training program presented a number of therapeutic activities that could be applied in response to clients MI strengths. The MI activity that was considered the most useful was the visual-spatial intelligence activity that used drawing and reflection "My Family at Dinner" (clients recall a scene of their family at dinner during childhood, sketch the scene and discuss the relationships). Three components of the training took second place as most useful: use of the MI survey, use of the musical-rhythmic intelligence through the "Feeling Responses to Music" activity (recording responses to four tracks of music, using colour and line, sketching, metaphor and choice of feeling words), and the range of ways to engage the interpersonal intelligence in strengthening the therapeutic alliance. This range of ways included recommendations from Muran and Barber (2010) such as facilitating the expression of affect, working on the here-and-now of the therapeutic relationship, ongoing collaboration about both counsellor and client contributions to the alliance, and exploring interpersonal themes.

The component least used by participants was the logical-mathematical inspired activity "Life Review Map" (a worksheet activity that calls for sequencing of life events), although half the participants noted that they wished to use it in the future. Two other components were indicated by half the participants in the 'future use' category of the questionnaire: use of the verbal-linguistic intelligence with the "Sentence Starters," and the bodily-kinaesthetic bioenergetics activity "Using Tension for Self-Awareness" (a series of physical movements and postures derived from bioenergetic theory [Lowen, 2006] designed to induce self-awareness and relaxation).

Responses to the question "Is there any one component that stood out to you as most useful?" also included the MI survey helped clients to "understand themselves", "visual-

spatial intelligence and music", "using of music", "music and drawing helped child clients engage, when they had previously not engaged", "The information helped me identify approaches I was trying that weren't working, and steered me into finding more suitable interventions."

Themes and Comments from Participant Interviews

The two major themes that emerged from the post-questionnaire interviews indicated that counsellors' responses to the MI training were highly positive (with no negative responses); and that the MI training had a positive impact their professional work. Jenny noted that she found "it opened up all sorts of different possibilities as well. I found that it became maybe more user friendly. It was almost like softer. It was colourful." All participants reported similar appreciation for the professional extension through applying MI theory and practice to their work.

Continuing the theme of positive responses to the intervention, Elaine noted: "You're open to all these other possibilities where they (clients) can express their emotions, not just by talking but by tapping into that part of their inner self that suits them better." One minor theme indicated that participants found the use the MI preference survey itself as valuable (this stood out over the other components of the training). Harriet indicated that the MI resources were useful: "The resources that we got on the day were absolutely excellent, because there were things there that I thought - for example, that multiple intelligence questionnaire, I've never had one of those before, and that's actually given me the opportunity to bring it to my counselling." Elaine also commented on the usefulness of the MI preference survey: "Having the questionnaire to give to the clients really brought my awareness to what their strengths are and what they need to do."

The experiential engagement with the MI activities was highly valued and lead to confidence in presenting the activities to clients. Peer interactions during the training day

were also valued. "Then doing some of exercises made me feel more comfortable in presenting some of those things to the clients, so I found that really useful." (Emily) ". . . doing it ourselves showed our own skills, which sometimes we forget. So that was really good for me." (Alexandra)

Participating counsellors recognized MI preferences as related to strengths, and described MI preferences to their clients as "strengths." This way of introducing the MI concept was seen as enhancing client interest in the MI preference survey (it was not seen as a test but as an interesting investigation) and resulted in some positive impact on client self-esteem. Additionally, although this was not the aim of the study, several participants noted that they were able to use the MI activities, as well as the MI preference survey, with ease with young clients.

Discussion

Participants all expressed positive responses to the MI training intervention, and indicated it had a positive impact on their professional work, and for some it enhanced their professional creativity. While being introduced to the theory of MI rated highly as a valuable training component, the actual application of the MI preference survey stood out as particularly useful in practice. The survey was seen as helpful for understanding clients, for supporting informed treatment choices, and for both counsellor and client self-awareness. Participants attributed therapeutic value to their clients' engagement with the survey, independent to the value of understanding client profiles. For example, several participants considered the MI survey has a positive impact on client self-esteem, and the experience of completing the survey appeared to encourage clients to engage in some extra-therapeutic activities that contributed to their overall wellbeing.

From among the MI activities, those that primarily incorporated the visual-spatial and musical-rhythmic intelligences were rated the most useful. Participants also valued the

opportunity for experiential learning and for helpful peer interactions throughout the training. Overall, introduction to MI theory seemed more impactful than the introduction to MI-based activities. This suggests that the acquaintance with theory that both integrates a basis for treatment choices and suggests relevant therapeutic activities was welcomed and useful.

Implications for Practice

MI theory may be a valuable addition to counsellor training, particularly supporting the use of integrative and multi-modal approaches. MI theory and practice, and especially the use of the MI preference survey, may contribute to a framework for counsellors to be more flexible and intentionally eclectic at delivering services to clients. MI theory may provide a basis for reflecting on personal methodological biases. MI provides a new way to match counselling treatments to clients' preferences and strengths. Incorporating MI theory and practice into counselling may also contribute to the early therapeutic alliance. Participants valuing of the use of the visual-spatial and musical-rhythmic intelligences suggests that introducing art and music activities into counsellor training may contribute to overall professional effectiveness. The MI training program used in this study could be a valuable addition within both pre-service and in-service professional development for counsellors.

Limitations.

The number of participants was considered suitable for phenomenological research (e.g., Kuzel, 1992; Morse, 1994); however, a study with a larger number of participants, may achieve more generalizable results. The researcher is aware that the study aimed to gather participants' perspectives on a program devised by the researcher, and that there is a potential for confirmation bias in data analysis. A possible limitation within the study may be the inevitable consequences related to self-selection of participants, in that they may have had an existing interest or knowledge about MI theory and the use of creative arts in counselling.

Limitations have also been noted in possible social desirability bias of participants due to the development of loyalty to the MI trainer who was also the interviewer.

Recommendations for Future Research

A study with a larger number of participants, surveying both counsellor and client perceptions of the impact of MI training may achieve results that are more transferable to the counselling profession. A longer-term study, with another population, that gathered implementation data three months and six months post-training might indicate if benefits from the MI training are sustained, and whether they have a long-term impact on practice. A survey of counsellors' treatment selection procedures pre-MI training may allow for post-treatment comparisons, and further investigation is needed to confirm the value of the MI approach with a wider range of specific client populations.

Conclusion

In this study MI theory and the practical activities of ET were brought together to form a MI approach for adult clients. The MI training provided several contributions to knowledge in the field of counselling: a model for extending counsellor training with MI theory, a framework for counsellors to be more flexible in the delivery of service to clients, and new ways of matching treatment to client preferences and strengths. Participants responded positively to the training, and indicated enhancement of their professional work. The MI preference survey was considered particularly helpful in informing treatment choices. Activities that primarily used the visual-spatial and musical-rhythmic intelligences were found to be most useful.

The participants' positive experiences with the MI training, and its value to their counselling practices, suggest that a larger scale study is warranted. It is hoped that training in MI theory and practices within counselling with adult clients may be integrated into pre-service and in-service counsellor education, and that MI theory may become a useful

foundation for counsellor and client self-awareness and for treatment selection. The

integration of MI theory and practice into counselling may provide new ways to understand

and enhance both the personal and interpersonal components of the therapeutic alliance. The

MI approach can provide a framework for counsellors wanting to introduce creative arts-

based therapeutic activities. With further research, a broader, more reliable model may

emerge for enhancing counsellor training with MI theory and practice. This model could

provide a foundation for counsellors to be more flexible in the delivery of service to clients,

and incorporate new ways to match treatment to clients' preferences, abilities and strengths.

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Appendices

Appendix I

MI Training Intervention Program Overview

- Introductions – 9am start

- Overview and aims of the program, framework for experiential learning

- Overview of MI theory

- Application of MI theory to counselling: Use of Expressive Therapies

- Participants complete MI Preference Survey (Chislett & Chapman, 2005)

- Interpersonal intelligence: ways of enhancing client communication

- Intrapersonal intelligence: emotional mapping activity - *Emotional Mapping*

- Verbal-linguistic intelligence: therapeutic and expressive writing activity – *Sentence Starters*

- Logical-mathematical intelligence: problem-solving and deduction skills – *Life Review Map*

- Visual-spatial intelligence: use of art and imagery – *My Family at Dinner*

- Musical-rhythmic intelligence: use of recorded music – *Feeling Responses to Music*

- Bodily-kinesthetic intelligence: use of movement through bioenergetics – *Using Tension for Self-Awareness*

- Brain-storming MI counselling activities for session planning

- Review of the program and informal feedback

- End of program - 4.30pm