



## RESEARCH ARTICLE

# Examination of Psychological Counselor Candidates' Views of Using Cognitive Behavioral Therapy (CBT) in Individual Psychological Counseling: A Q-Methodology Approach

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## ABSTRACT

Individual Psychological Counseling Practicum is an applied course in which Guidance and Psychological Counseling undergraduate senior students have an opportunity to have a practical experience with an actual client in Turkey. In the course, the theoretical approaches chosen by the counselors and their views on this approach may affect their attitudes towards the practicum process and their experiences. Therefore, the current study aims to determine the opinions of guidance and psychological counseling senior students who took the course Individual Psychological Counseling Practicum about using Cognitive Behavioral Therapy in individual psychological counseling with the Q-methodology approach. For this purpose, 33 senior undergraduate students participated in the current study, taking the Individual Psychological Counseling Practicum-2 course in Atatürk University. The research utilized Q-statements crafted by the researcher along with a Q-sort comprising 18 sentences ranging from -3 to +3, facilitating forced placement, as the data collection instrument. Results showed that the opinions of the counselor candidates about the use of Cognitive Behavioral Therapy were gathered in a single dimension, which indicates a positive attitude.

## Using Cognitive Behavioral Therapy (CBT) for Individual Psychological Counseling

Cognitive behavioral therapy (CBT) has been successfully used to treat many psychological problems, and many research results have proved its effectiveness. Research has used various methods to determine counselors' views on cognitive behavioral therapy. However, there are relatively few studies in which the opinions of counselor candidates about cognitive behavioral therapy are determined with the Q-methodology. This study tried to determine how many groups of counselor candidates' opinions about cognitive behavioral therapy were gathered during their undergraduate education.

Aaron Temkin Beck pioneered Cognitive Behavioral Therapy (CBT) in the 1950s, offering an effective approach to address various issues like phobias, panic attacks, sleep problems, anxiety disorders, and particularly depression (Sharf, 2015; Blom et al., 2015; El Alaoui et al., 2015; O'Donohue & Fisher, 2009). CBT posits that individuals evaluate events according to their thinking, leading to different emotional responses even in the same situations (O'Donohue & Fisher, 2009). It highlights the pivotal role of cognition

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in emotions, behaviors, and certain psychological disorders (Murdock, 2004; O'Donohue & Fisher, 2009). In other words, individuals' beliefs lead to different emotions and behaviors due to evaluating the events (O'Donohue & Fisher, 2009). As a result, individuals who experience the same event display different emotions and behaviors (Murdock, 2004; O'Donohue & Fisher, 2009).

CBT uses the ABC (A = Antecedents, B = Belief, C = Conclusion) method to solve clients' problems. Psychological counselors educate clients about how issues arise and how they perceive events that affect their emotions and behaviors. In addition, many cognitive and behavioral techniques such as directed exploration, Socratic questioning, evidence review, behavior experimentation, exposure, worst-case scenario, and down arrow technique are used to identify negative automatic thoughts and create alternative ideas. The counselor teaches the client how to use these techniques, and the client obtains information about these techniques in each session in therapeutic cooperation (Beck & Beck, 2011). In this context, the role of the counselor in CBT is didactic (Sharf, 2015). The counselor is like a teacher introducing the cognitive model and explaining how to use the techniques to the client.

In this approach, one aim is to teach the client to be a self-therapist. In this way, clients can apply the skills they learned in the sessions to different problems they experience daily, and it is tried to prevent the reoccurrence of the issues. In this case, clients can apply the techniques they participate in in the counseling environment to their life, revealing the change (Beck & Beck, 2011). Although the client is less active than the counselor, roles are shared equally (Murdock, 2004; Sharf, 2015).

In CBT, since the content of the sessions is structured, it is clear what will be studied in which session. It is a guiding factor for clients and counselors, encouraging learning and helping sessions to continue orderly. In addition, the sessions have a structured system of checking mood, checking last week, reviewing homework, setting the agenda, addressing current issues, setting new tasks, and summarizing. By following this system, clients also become aware of being their therapist (Beck & Beck, 2011).

#### **Q-Methodology Approach in Views of Using CBT**

Research has shown that the studies in which CBT was applied, and its effectiveness was demonstrated were primarily quantitative (López-López et al., 2019; Oud et al., 2019; Simon et al., 2019; Springer et al., 2018). In applying CBT to psychological problems, it is thought that the practitioner's attitudes towards using CBT in counseling sessions are also crucial for the success of the process. Studies conducted in this context have revealed that many characteristics of psychological counselors, such as personality traits, values and beliefs, and theoretical orientations, are an essential factor that determines the effectiveness of the practice process (Conte et al., 1991; Lambert & Ogles, 2004; Sandell et al., 2000; Sandell et al., 2007). Therefore, it can be said that determining the opinions of the students in undergraduate education and newly involved in the application process for psychological counseling will also affect the counseling process and the outputs of the process. By determining the negative attitudes of these students before they graduate from the education system, it may be possible to change their wrong perceptions before they start their professional lives. In this way, psychological counselors can become more willing to practice with more positive attitudes and make efforts to improve their competencies. Considering the contribution of the theoretical approach adopted in the psychological counseling process to improving the problems, it can be thought that the practitioner's views, attitudes, and beliefs towards that theoretical approach will also affect the implementation process. This view is supported by research conducted by Öz-Soysal et al. (2016) indicated that cognitive-behavioral, short-term solution-oriented, client-paced, family counseling, creative drama and psychodrama approaches were the most preferred approaches. This study also highlights the importance of why the participants used these approaches, which were suitable for the school environment, suitable for the high number of students, being behavior-oriented and concrete, making it possible to solve in a short time, and highlighting the positive aspects of individuals. At the same time, the fact that the participants have received training on these issues and their tendencies have also contributed to their preference for these approaches. Wilcockson (2022) examined the counselors' practices of CBT, and the results indicated five themes: processes in transition, ongoing processes reconciling roles, features retained from counseling practice and changed from counseling practice, and resisted and not adopted features of CBT. Contextually, counselors' views about the counseling process may

affect the psychological counseling process. So, researchers must indicate psychological counselors' views about psychological counseling theories and their distinct opinions about them. Therefore, it may be helpful for educators to determine the views and attitudes of counselor candidates about theoretical approaches and to turn possible negative attitudes into positive ones.

Early intervention studies for negative attitudes can be carried out by determining the attitudes and thoughts of students toward theoretical approaches. In addition, it can be said that it is essential to use the Q-methodology in determining how many groups the students' opinions are gathered in. Research results demonstrated that the Q-methodology effectively reveals counselor's opinions about the counseling process or theories. For example, Farrell et al. (2013) highlighted issues using the Q-methodology approach around the professional role and application of EMDR, its teaching and learning experience, clinical supervision, the importance of the therapeutic relationship, cultural sensitivity, and application of EMDR in Pakistan. Kealy et al. (2017) used the Q-methodology to explore clinicians' perspectives regarding the optimal psychotherapy process in treating pathological narcissism, a syndrome of impaired self-regulation. It revealed four components representing clinicians' perspectives on ideal therapy processes for narcissistic and non-narcissistic patients. Kreft (2017) explored the CBT therapist's views on acceptability, experiences, and barriers using both Q-methodology among fifteen trainees. Results indicated that one factor was extracted, and a second specificity factor was also identified. Weber (2020) examined to explore counselor viewpoints on the current stage of their theoretical orientation formation and find common viewpoints among counselors with the Q-methodology technique and found five distinct typologies. These results emphasize the importance of using the Q-methodology in determining the opinions of psychological counselors regarding psychological counseling theories and how many groups the opinions are collected in.

Because Q-methodology research combines the strengths of both quantitative and qualitative research methods and, in this respect, tries to eliminate some of the disadvantages of these researches (Karasu & Peker, 2019). Quantitative research requires a more significant number of participants than Q-methodology. In addition, the data collected with scales can generally be obtained through the participants' responses to the items. However, the Q-methodology has advantages in allowing fewer participants to obtain in-depth information and includes the quantitative method in the process (Donner, 2001). Simons (2013) also underlines that the most important advantage of Q-methodology is that it minimizes the researcher's bias on the findings. With the Q-methodology, it is also possible to reveal the differences of opinion among the individuals since it determines how many groups they are divided into on a particular subject (Farrell et al., 2013; Kealy et al., 2017; Kreft, 2017). These research results demonstrated that counselors view the counseling theories and some pathological problems and their opinions group of them. A content analysis of the cognitive-behavioral approach in psychological counseling showed that the studies in this field were mainly conducted using quantitative and experimental methods (Bengisoy et al., 2019). However, it was thought that the attitudes of counselor candidates about cognitive behavioral therapy, a method that has been successfully used in the treatment of many problems, should be determined with the Q-method. By determining the negative attitudes of counselor candidates early, educators may be able to change these attitudes into positive ones. In addition, determining the main elements that emerge in counselor candidates' ideas about this approach may also shed light on the studies to be organized for attitude change. In addition, the fact that this research is methodologically different from other studies on the subject in the literature is another factor that increases the originality of the research. In this context, this study aims to examine the views of psychological counseling and guide senior students on using CBT within the scope of individual counseling practices by using the Q-methodology. In this context, this research seeks answers to the following questions:

1. Do the students have a common opinion on using CBT in individual counseling?
2. What do students think about the use of CBT in individual counseling?
3. Which elements come to the fore when using CBT in individual counseling?

## Method

### Research Model

This research was designed following the Q-methodology approach. It was discussed in detail by the physicist and psychologist William Stephenson in 1953 (Stephenson, 1953). This method aims to determine individuals' similar and different opinions about any subject and to reveal the extent to which a limited number of participant groups adopt views. Q-methodology combines the robust features of quantitative and qualitative methods. In this method, the researcher prepares sentences of positive, negative, and neutral statements about a subject based on theoretical approaches. Then, the participants place the degree of agreement with these sentences on a string. In this way, it is aimed to determine whether the participants' opinions on that subject are united in a common theme and if there is a common theme, it is desired to determine what it is. In this respect, Q-methodology research uses principal component analysis in factor analysis studies in quantitative research. It focuses on an in-depth examination of subjective thoughts and attitudes as in qualitative research (Watts & Stenner, 2012). However, when the principal component analysis is used in the Q-methodology, it is the participants themselves, not the items, which are grouped. In other words, since the general tendencies of the participants about a subject are determined, the factors that emerge as a result of the principal components analysis are the participants' grouped states.

Q-methodology research consists of a four-stage process: 1. Generating Q-sentences, 2. Designing the Q-sort, 3. Identifying the participants, 4. Analysis and evaluation of the results. Previous research results, theoretical approaches, and expert opinions are used in creating Q-statements. In this context, a positive statement must also be prepared with a negative while preparing statements. Because the participants will agree with a statement, they will also have the possibility to agree on the contrary. Then, there is a need to design a q string in which the prepared q sentences will be placed. This string must have a box where each sentence must be placed. The Q-string can be either forced or free. Regarding the number of participants, a large group is unnecessary, as in quantitative research (Watts & Stenner, 2012). It is reported that the number of people can be between 25-75 (Memiş, 2020; Skelcher et al., 2013). A formula determines the significance of factors in Q-methodology studies. In this formula, the number of expressions is decisive. Accordingly, the significance level was determined in this study according to the formula ( $\text{Sig.} = 2.58 \cdot (1/\sqrt{n}) = .61, n = 18$ ). It was set at .61 values with a factor loading of .61 and above were considered significant.

### Ethical Approval

Before proceeding to the data collection phase of this study, ethical permission was obtained from the Atatürk University Educational Sciences Unit Ethics Committee on 30.03.2023, numbered 04/09.

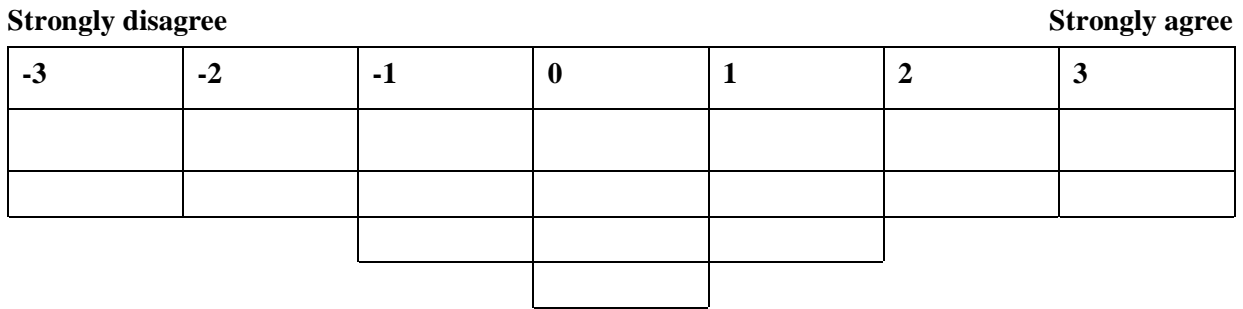
### Participants

A large participant group is not needed in Q-methodology research, as in quantitative analysis, since subjective perceptions are tried to be determined in these studies. (Watts & Stenner, 2012). This research was conducted on 33 undergraduate students who took the Guidance and Psychological Counseling Practicum-2 course in Atatürk University. We used a convenient sampling method to enable researchers to make the data collection process easy and economical (Özmen & Karamustafaoğlu, 2019). Fifty students took the Guidance and Psychological Counseling Practicum-2 course, but 33 students participated in the current research because of the voluntary participation and convenient sampling method. 24 female (%72.7) and 9 male (%27.3) students participated in the study. The mean age of the research sample is 22.6, and its standard deviation is 2.22.

### Q-Sort

In this research, the forced Q-sort was used. In this type, participants must place a statement in each box. This allows participants to crystallize their views. The Q-sort of this study is identified in the forced distribution grid from - 3 to +3. In the boxes between -3 and +3, the participants have to place 2, 2, 3, 4, 3, 2, and 2 sentences in order. The placement of the sentences within a degree is equal to that of each other. In other words, every expression below -3 has the same significance level. The Q-sort used in the research is given in Figure 1 below:

**Figure 1.** The Q-Sort of This Study



**Q-Statements**

We created Q-statements using theoretical explanations, research results, and expert opinions. In this context, we tried to include positive, negative, and neutral expressions for applying CBT in the context of the roles of the client and counselor, the number of sessions, the types of problems, and the techniques used in the individual counseling session structure. The Q-statements used in this study are given in Table 1:

**Table 1.** Q-Statements

Statement Number	Related Heading	Statements
1	Problem	CBT allows one to examine the client’s problems in detail in counseling with the individual.
2	Model	CBT helps the client to better understand the ABC model by focusing on thoughts.
3	Roles	In CBT, the client is as active as the counselor.
4	Model	By introducing the cognitive model to the client, they can establish the link between emotion, thought, and behavior.
5	Time	An average of 8-10 sessions of CBT is acceptable.
6	Model	The client does not need to understand the cognitive model to solve their problems.
7	Therapy type	CBT offers the counselor a real individual counseling practice experience compared to other therapy schools.
8	Therapy type	The structured content of CBT guides the counselor and the client.
9	Model	Too much emphasis on thoughts is a disadvantage in CBT.
10	Therapy type	The problems of the client cannot be discussed in detail with CBT.
11	Problem	CBT is a theoretical approach that should be adopted for a specific mental problem.
12	Problem	With CBT, only some types of problems, such as anxiety, stress, and depression, can be addressed.
13	Time	Since it is not clear how many sessions of CBT y will last, this situation becomes a disadvantage for the counselor and the client.
14	Problem	CBT can be progressed even if there is no mental problem.
15	Roles	In CBT, the client’s passive position relative to the counselor is a disadvantage.
16	Problem	With CBT, problems such as panic attacks, PTSD (post-traumatic stress disorder), grief, and personality disorders can also be addressed, as well as anxiety, stress, and depression.
17	Roles	CBT is a didactic therapy approach.
18	Therapy type	The fact that CBT is a structured therapy makes the process monotonous for the counselor and the client.

**Procedure**

After obtaining ethical permission to conduct the research, data collection tools were applied to the participants. For this purpose, the application was made to the students who voluntarily accepted to participate in the study among those taking the individual counseling practice course. During the data collection phase, the participants were briefly informed about the purpose of the study. It was stated that the data obtained from the participants would only be used for scientific purposes and that they could find it possible to answer the data collection tool whenever they wanted. Informed consent was obtained from the participants.

**Statistical Analysis**

Q-methodology research consists of a four-stage process: 1. Generating Q-sentences, 2. Designing the Q-sort, 3. Identifying the participants, 4. Analysis and evaluation of the results (Stone & Turale, 2015). Firstly, we generated the Q-statements regarding the related literature and research body. In the second stage, we determined the participants by selecting those taking the Individual Psychological Counseling Course-1, and then we collected the data. After the data collection phase, the answers received and the grades given by the students to the Q-statements were transferred to the PQ-Method program. After the analyses were performed, it was examined how many dimensions the participants’ responses to the 18 items related to CBT were

grouped. For this, .61 was taken as the cut-off point. We used .61 as a cut-off; since were 18 items in the Q-statement, the cut-off point was determined as .61 according to the proposed formula,  $Sig. = 2.58*(1/\sqrt{n}) = .61$ ,  $n=18$  (Demir & Kul, 2011). As a result, the items with the highest and lowest z-score values were ranked. The Z score and factor array values obtained after principal component analysis and factor rotation show the order in which most individuals in that factor choose an item. An increase in the Z score indicates a high preference level for an item in a factor. A z score approaching zero indicates that the participants prefer an item less. We used the z scores in the study because we intended to underly the highest and least preferred items. The study's qualitative data were analyzed in line with the answers given by the participants according to which item they placed at -3 or +3 in Q-sort. The item with the highest Z score indicates the item with which the participants agree at the highest level, while the item with the lowest Z score indicates the item with which they agree at the lowest level. The Z score was used in the study because there was a need to standardize the results obtained.

## Results

### Factor Loadings

In the study, principal component analysis and factor rotation method were used to examine whether the participants' agreement with the Q-statements regarding the use of CBT in individual counseling gathered on a common denominator, and the results are given in Table 2:

**Table 2.** Factor Loadings

Participant no	F1	F2	F3	F4	F5	F6	F7	F8
1	<b>0.8399X</b>	0.3292	-0.1957	0.0176	-0.0024	0.1190	-0.2505	-0.0649
2	<b>0.8610X</b>	-0.2167	0.1825	-0.0733	-0.1771	-0.1110	-0.0657	-0.1003
3	<b>0.7875X</b>	-0.2244	0.2966	-0.0284	-0.3213	-0.1148	-0.1868	-0.0673
4	0.5411	-0.0574	0.1831	-0.3591	<b>0.6693</b>	0.0467	0.0001	-0.2653
5	<b>0.7193X</b>	-0.4142	-0.1228	0.2086	0.1970	-0.1738	-0.1407	0.0472
6	<b>0.9064X</b>	-0.1133	0.2106	0.1873	-0.1264	0.0287	-0.0083	-0.1267
7	<b>0.7842X</b>	0.0178	0.4383	0.0990	-0.1173	0.3000	0.0236	-0.0104
8	<b>0.9064X</b>	-0.1133	0.2106	0.1873	-0.1264	0.0287	-0.0083	-0.1267
9	<b>0.9064X</b>	-0.1133	0.2106	0.1873	-0.1264	0.0287	-0.0083	-0.1267
10	0.4686	-0.2700	-0.1516	<b>0.5409</b>	0.4772	-0.0723	0.1133	0.2026
11	<b>0.7727X</b>	-0.3776	-0.3878	0.0844	0.0621	0.1270	-0.0930	-0.1030
12	<b>0.7952X</b>	-0.4743	0.1589	-0.0776	0.1241	-0.0723	-0.0008	0.0655
13	<b>0.8991X</b>	-0.0552	-0.1543	-0.0788	-0.2286	-0.0243	0.1635	-0.1066
14	<b>0.8808X</b>	-0.1781	-0.1232	-0.2343	0.0293	0.0979	0.0974	-0.0103
15	<b>0.7610X</b>	0.4023	-0.0233	0.1057	0.2546	-0.0558	0.2202	-0.1692
16	<b>0.8255X</b>	-0.3775	0.3078	0.0195	-0.0905	0.0069	0.0489	-0.0081
17	<b>0.8705X</b>	-0.2758	-0.0427	-0.3457	0.0071	-0.0463	0.0382	0.0063
18	<b>0.8019X</b>	-0.3444	-0.3282	-0.2017	0.0348	-0.1071	-0.0385	0.1585
19	<b>0.7818X</b>	0.4788	-0.1627	-0.2245	-0.0554	-0.1575	-0.0869	-0.0205
20	<b>0.7818X</b>	0.4788	-0.1627	-0.2245	-0.0554	-0.1575	-0.0869	-0.0205
21	<b>0.9131X</b>	-0.0712	-0.1631	-0.1712	0.0759	0.1155	0.1343	0.1667
22	<b>0.8689X</b>	-0.0430	-0.0019	-0.2943	-0.0080	-0.2341	-0.0972	-0.0521
23	0.6223	<b>0.6012</b>	0.3099	0.1385	0.0996	-0.1602	-0.1489	-0.0820
24	<b>0.7412X</b>	-0.0526	0.0806	0.3896	-0.1072	0.1478	0.1363	-0.1497
25	<b>0.8713X</b>	0.2223	0.1688	-0.2099	0.0696	-0.0170	0.0167	0.1866
26	0.6514	0.1475	-0.1740	-0.0434	-0.2396	0.0727	<b>0.6314</b>	-0.0071
27	<b>0.6457</b>	0.5397	0.3185	0.0940	0.0004	0.2729	-0.1717	0.1984
28	<b>0.7417X</b>	0.2521	-0.3251	0.2121	-0.2625	-0.2063	-0.1160	0.1800
29	0.4339	-0.0064	<b>0.6599</b>	-0.0202	0.1659	-0.2227	0.1093	0.4358
30	0.6261	-0.1410	-0.2372	-0.0514	0.0774	<b>0.5950</b>	-0.3150	0.1245
31	<b>0.6947X</b>	0.4274	-0.0685	0.1257	0.3886	0.0697	0.1140	-0.1334
32	<b>0.7993X</b>	0.2469	-0.2994	-0.0074	-0.1056	0.1863	0.1431	0.2521
33	<b>0.7199X</b>	0.0331	-0.4092	0.3543	0.0300	-0.3196	-0.1220	-0.0166
Eigenvalues	19.7698	2.9139	2.1772	1.4645	1.4186	1.0514	0.9188	0.7151
Expl. Var.	60	9	7	4	4	3	3	2

Table 2 demonstrates that 33 participants are gathered under eight factors. To determine which participant was collected under which factor according to the answers given by the participants to the items, the significant factor's value was marked with an X, taking into account the significance values of the factor loads of the items. This marking is performed automatically by the PQ-Method program. However, it was determined that the factor loads of some participants' agreement with the statements exceeded the significance value of .61 and took place in more than one factor. It is suggested that if there is less than a .10 difference between the significance values in determining the factor loads. When the participants are loaded on more than one factor, the sign of significance cannot be put, and factor rotation can be used. Therefore, a 10-degree rotation was made between factor 1 and factor 4. Accordingly, it was determined that 27 participants were included in the first factor and one participant in the second, third, fourth, fifth, sixth, and seventh factors. The fact that 27 out of 33 participants, 82% of the group, gathered in the first factor shows that the opinions of the participant group about the use of CBT are collected on a common denominator. It is seen that the first factor, which includes 27 participants, explains 60% of the total variance.

After determining the common denominator of the participants' views, the Z scores of the items are examined to determine which sentence is considered and preferred more. For this reason, the values containing the Z scores, which show the degree of approach to the answers given by the 27 participants gathered under the first factor, are given in Table 3:

**Table 3.** Z Scores of Statements, Order of Importance of Statements, and Factor Arrays

Order of importance	Statements	Number of Statements	Z Scores	Factor Arrays
1	By introducing the cognitive model to the client, they can establish the link between emotion, thought, and behavior.	6	1.855	3
2	The problems of the client cannot be discussed in detail with CBT.	10	1.380	3
3	Too much emphasis on thoughts is a disadvantage in CBT.	9	0.949	2
4	With CBT, only some types of problems, such as anxiety, stress, and depression, can be addressed.	12	0.946	2
5	CBT is a theoretical approach that should be adopted for a specific mental problem.	14	0.777	1
6	Since it is not clear how many sessions of CBT will last, this situation becomes a disadvantage for the counselor and the client.	13	0.600	1
7	In CBT, the client's passive position relative to the counselor is a disadvantage.	15	0.542	1
8	The fact that CBT is a structured therapy makes the process monotonous for the counselor and the client.	18	0.515	0
9	CBT can be progressed even if there is no mental problem.	11	-0.004	0
10	CBT is a didactic therapy approach.	17	-0.051	0
11	CBT offers the counselor a real individual counseling practice experience compared to other therapy schools.	7	-0.243	0
12	In CBT, the client is as active as the counselor.	3	-0.429	-1
13	The structured content of CBT guides the counselor and the client.	8	-0.879	-1
14	With CBT, problems such as panic attacks, PTSD (post-traumatic stress disorder), grief, and personality disorders can also be addressed, as well as anxiety, stress, and depression.	16	-0.913	-1
15	An average of 8-10 sessions of CBT is acceptable.	5	-1.017	-2
16	The client does not need to understand the cognitive model to solve their problems.	4	-1.180	-2
17	In CBT, it is not mandatory to introduce the ABC model to the client.	2	-1.356	-3
18	CBT allows one to examine the client's problems in detail in counseling with the individual.	1	-1.491	-3

Table 3 demonstrates that the items the participants evaluate most positively and the statement with the highest Z score are "By introducing the cognitive model to the client, they can establish the link between emotion, thought and behavior." Table 3 also demonstrates that the item with the most negative and the lowest Z score is "CBT allows to examine the client's problems in detail in counseling with the individual." This results show that the participants believe that the client's understanding of the cognitive model helps them understand the

link of thought, emotion, and behavior and is effective in the progress of the counseling process. At the same time, they think that the client's problems are not examined in detail with CBT. These results show that the participants consider it a disadvantage that the number of sessions in cognitive behavioral therapy is not precise, the counselor is more active than the client, has a didactic aspect of the counseling process, and is a structured therapy type. In the current study, the participants should evaluate 18 items with positive, negative, and neutral content. Considering the order of importance and z scores, factor arrays show a similar distribution. These findings indicate that cognitive behavioral therapy has negative attitudes towards some aspects, such as the high number of sessions, the unclear process, the structured content, and the less active the client.

### Qualitative Findings

In Q-methodology research, participants must explain why they wrote the items in -3 and +3 while placing them in the Q-sort. Accordingly, the opinions of the participants, including their approaches to the most and least preferred items, are as follows:

#### Participants' Reasons for Giving -3 to Statements

##### Participant 1

*"I added statement 6 because the basis of the process is how thoughts affect behavior. Unless the cognitive model is explained, this link may not be understood by the client." (Statement 6)*

*"I added statement 15 because the client is active. In most of the process, the client's awareness and search for alternative ways are provided by being active." (Statement 15)*

##### Participant 11

*"The reason why I wrote the 6th statement is related to the fact that I think structuring in CBT is important. Because I think that it is necessary to understand the model in a process that appeals to cognition." (Statement 6)*

*"I write the 18th statement because I think that although CBT is a structured therapy, it has a certain flexibility." (Statement 18)*

##### Participant 16

*"The clients need to understand the cognitive model so that they can make sense of the process and do what needs to be done according to the cognitive model." (Statement 6)*

*"In CBT, the client's problems are detailed in the context of emotion, behavior, and thought." (Statement 10)*

#### Participants' Reasons for Giving +3 to Statements

##### Participant 1

*"I added 2nd statement. Because the ABC model used in cognitive behavioral therapy helps the client to distinguish and be aware of their emotions, thoughts, and behaviors, in this way, it becomes easier for us to see the client's automatic thoughts and alternative thoughts that they can create against them." (Statement 2)*

*"I added 4th statement. Because the methods and models used in cognitive behavioral therapy enable the counselor to be aware of their feelings, thoughts, and behaviors and to establish a connection between them." (Statement 4)*

##### Participant 11

*"The reason for writing the 6th statement is that I think that progress is made with homework in CBT, and since we aim at behavioral change by increasing the client's cognitive awareness, they should be able to learn to be their therapist and be active." (Statement 6)*

*"I wrote the 17th statement because I think that psychoeducation is frequently used in CBT and that it is an important feature of the client's orientation, guiding and instructive dimension." (Statement 17)*



### *Participant 16*

*“The 4th statement manages to solve the problem by establishing the bond of emotion, thought, and behavior with the client. Thanks to the structured content, it is clear what will be done in which session.” (Statement 4)*

*“The fact that the process is structured prevents certain interventions from being made at certain times, thus preventing the case of being early or late.” (Statement 8)*

## **Discussion**

This study revealed that the opinions of counselor candidates about the use of CBT in counseling were gathered under a single factor. It was observed that 27 of the participants found the use of CBT effective in psychological counseling and had similar attitudes. These findings show that the participant group found CBT beneficial and had a typical attitude toward using it in individual counseling. However, participants had a negative attitude towards some elements, such as the number of CBT sessions, the role of the client-counselor, structured content, and the need to be short-lived. In CBT, it is recommended to use the cognitive model, which helps the sessions to continue and helps clients better understand the logic of the process (Beck & Beck, 2011). In studies using cognitive behavioral therapy, it is seen that counselors describe the cognitive model to the client in the first stages and establish its connection with the problem (Ateş & Arcan, 2018; Bilge et al., 2020; Dinç & Erden-Çınar, 2018; Örum, 2021). In the current study, the participants stated that the client’s understanding of the cognitive model is practical in continuing the counseling process and is effective in the client’s better understanding of the process.

The findings showed that the high number of sessions and the inability to give clear information about the number of sessions to the client at the first stage were also factors that the participants negatively evaluated. This finding suggests that, since the participant group had the opportunity to work more in the school environment after graduation, they may have adopted short-term and solution-oriented approaches rather than long-term therapy approaches, considering the student density and problem types at school. It may have been effective in their negative attitude towards CBT, which is relatively long-lasting. Öz-Soysal et al. (2016) conducted a qualitative study on psychological counselors, it was seen that school counselors mostly preferred CBT and short-term and solution-oriented approaches, and they thought that the short-term approach was more functional in the school environment. In the current study, the participants considered an average of 8-10 sessions acceptable but still thought it an advantage to be shorter.

Another result of the current study indicated that the participants thought that the clients’ problems were not discussed in detail with cognitive behavioral therapy and that they were only functional in issues such as depression, stress, and anxiety. This situation has contradictory aspects to CBT theoretical knowledge. At the same time, the participants thought focusing too much on the clients’ thoughts with CBT was a disadvantage. However, cognitive and behavioral interventions can be used with CBT (Beck & Beck, 2011; Murdock, 2004). However, the participants may have considered this situation a disadvantage. Since cognitive interventions are usually the first element in structuring counseling sessions, they are handled over a relatively long time and are more resistant to change. While for behavioral interventions, the client can practice after the session, for cognitive interventions, a large part of the session may require a very intense session process and concentration to identify cognitions, examine them with evidence, rebut thoughts and create alternatives. In studies where cognitive behavioral therapy was used to improve various problems, psychological counselors emphasized the application process of cognitive techniques in sessions and gave behavioral techniques homework between sessions (Bilge et al., 2020; Örum, 2021). It may have been considered a very tiring process for psychological counselors. Therefore, the participants may have regarded too much emphasis on ideas as a disadvantage.

As a result of the research, it was seen that another important factor by the participants was the roles of counselor and client. Since CBT is a structured and didactic approach (Türkçapar, 2018), it is an element that

requires the counselor to use his teaching identity. Ertekin et al. (2014) examined the myths and misconceptions about cognitive behavioral therapy among psychiatrists and psychiatry assistants. As a result of this research, 35 out of 140 participants revealed that they believed CBT was educational and that the therapist informed the patient in a didactic manner and taught him to think better. Wilcockson (2022) indicated that as psychological counselors find the structured aspect of CBT appropriate, the classification of personalization analysis for the client is revealed. Although it is known that CBT has a general framework, it should be changed according to the client's characteristics. This may mean being too directive for a psychological counselor who plans to progress more relationship, individual or solution-oriented. Therefore, the client's belief that they should be more active may have caused them to have a negative attitude.

Results also indicated that participants were less likely to prefer some items. Participants' attitudes were neutral on two items: "*CBT can be progressed even if there is no mental problem.*" and "*CBT is a didactic therapy approach.*" This result obtained in the research is an expected result. Because in the CBT approach, the counseling process is carried out within the context of a specific psychological problem. However, the participants were less likely to agree with the item "*CBT can be progressed even if there is no mental problem.*" and that the counseling process would continue even if there were no significant psychological problems. This result shows that most of the participants think that there should be a significant psychological problem, such as depression, anxiety, or eating disorder, in the progression of the process, similar to the CBT theoretical approach.

Similarly, the z score of the participants who preferred "*CBT is a didactic therapy approach.*" is close to zero. This result indicates that the participants found the role of the counselor in the CBT approach less instructive. Although psychological counselors actively use the role of the instructor in the use of some techniques or psychoeducation stages in the CBT approach, they also assume different roles in the process. In this respect, the participants may have thought that the CBT approach is not only a didactic approach and that the counselor has different roles in the process.

### **Conclusion and Recommendations**

As a result of this research, which aimed to determine the opinions of counselor candidates on using the cognitive-behavioral approach in individual counseling with Q-methodology, it was determined that the participants' views were united on a common denominator. Accordingly, the findings show that the participants have some negative attitudes about the high number of sessions, the structured content, and the roles of the client-counselor. Therefore, it can be said that the participants need training and intervention studies to change these negative attitudes. Although CBT is a psychological counseling approach with proven effectiveness in many mental problems, its long duration, structured content, and roles have some disadvantages. Since most of the students who graduated from the field of guidance and psychological counseling in Turkey prefer to work in a school environment, individual counseling sessions with different theoretical orientations may be effective in improving their attitudes toward these psychological counselors, both during in-service training and during their undergraduate education. However, psychological counselors may encounter not only educational problems but also individuals with mental problems such as depression, anxiety, stress, and PTSD in the school environment. Therefore, practices can be carried out so that clients can develop positive attitudes about the use and necessity of CBT, which has proven effective in solving such problems.

### **Limitations**

There are some limitations of this study, in which it was revealed that counselor candidates' views on cognitive-behavioral approach are united on a common denominator:

The number of female participants in this study is higher than that of male participants. Although this research does not focus on examining the differentiation of attitudes according to gender, a more balanced distribution can be achieved in future studies, and how attitudes differ by gender can be examined.

Since this study's findings show that counselors have negative attitudes toward issues such as the long application period of CBT and the relatively less active client, training programs can be given to counselor candidates to help them develop positive attitudes.

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## References

- Ateş, N., & Arcan, K. (2018). Panik bozuklukta bilişsel davranışçı terapi: bir olgu sunumu (Cognitive behavioral therapy in panic disorder: a case study). *AYNA Klinik Psikoloji Dergisi*, 5(3), 61-78. <https://doi.org/10.31682/ayna.468240>
- Beck, J. S., & Beck, A. T. (2011). *Cognitive behavior therapy*. Guilford Publication.
- Bengisoy, A., Özdemir, M. B., Erkıvanç, F., Şahin, S., & İskifoğlu, T. Ç. (2019). Bilişsel davranışçı terapi kullanılarak yapılan araştırma makalelerinin içerik analizi 1997-2018 (The content analysis of the research articles about cognitivebehavioural therapy between 1997-2018). *Turkish Psychological Counseling and Guidance Journal*, 9(54), 745-793.
- Bilge, Y., Gül, E., & Birçek, N. I. (2020). Bir sosyal fobi vakasında bilişsel davranışçı terapi ve sanal gerçeklik kombinasyonu (Cognitive behavioral therapy and virtual reality combination in a case of social phobia). *Bilişsel Davranışçı Psikoterapi ve Araştırmalar Dergisi*, 9(2), 158-165.
- Blom, K., Tillgren, H. T., Wiklund, T., Danlycke, E., Forssén, M., Söderström, A., Johansson, R., Hesser, H., Jernelöv, S., & Lindefors, N. (2015). Internet-vs. group-delivered cognitive behavior therapy for insomnia: a randomized controlled non-inferiority trial. *Behaviour Research and Therapy*, 70, 47-55. <https://doi.org/10.1016/j.brat.2015.05.002>
- Conte, H. R., Plutchik, R., Picard, S., & Karasu, T. B. (1991). Can personality traits predict psychotherapy outcome? *Comprehensive Psychiatry*, 32(1), 66-72. [https://doi.org/10.1016/0010-440X\(91\)90071-J](https://doi.org/10.1016/0010-440X(91)90071-J)
- Corey, G. (2015). *Theory and practice of group counseling*. Cengage Learning.
- Demir, F. & Kul, M. (2011). Modern bir araştırma yöntemi Q Metodu (A modern research method Q Method). Adalet Yayınevi.
- Dinç, S., & Erden-Çınar, S. (2019). Bilişsel davranışçı yaklaşıma dayalı grupla psikolojik danışma uygulamasının üniversite öğrencilerinin gelecek kaygıları ve yetkinlik inançları üzerine etkisi (The effect of cognitive behavioural group counselling on future anxiety and competence belief of university students). *E-Uluslararası Eğitim Araştırmaları Dergisi*, 10(3), 15-28.
- Donner, J. C. (2001). Using Q-sorts in participatory processes: An introduction to the methodology. *Social Development Papers*, 36, 24-49.
- El Alaoui, S., Hedman, E., Kaldö, V., Hesser, H., Kraepelien, M., Andersson, E., Rück, C., Andersson, G., Ljótsson, B., & Lindefors, N. (2015). Effectiveness of Internet-based cognitive-behavior therapy for social anxiety disorder in clinical psychiatry. *Journal of Consulting and Clinical Psychology*, 83(5), 902-914. <https://doi.org/10.1037/a0039198>
- Ertekin, E., Ergun, B. M., & Sungur, M. Z. (2015). Psikiyatristler ve psikiyatri asistanlarında bilişsel-davranışçı terapi hakkında mitler ve yanlış bilinenler (Misconceptions and myths about cognitive-

behavioral therapy among psychiatrists and psychiatry residents). *Anatolian Journal of Psychiatry/Anadolu Psikiyatri Dergisi*, 16(1), 60-64.

- Karasu, M., & Peker, M. (2019). Q yöntemi: Tarihi, kuramı ve uygulaması (Q method: History, theory and application). *Türk Psikoloji Yazıları*, 22(43), 28-39. <https://doi.org/10.31828/tpy1301996120181122m000003>
- Kealy, D., Goodman, G., Rasmussen, B., Weideman, R., & Ogrodniczuk, J. S. (2017). Therapists' perspectives on optimal treatment for pathological narcissism. *Personality Disorders: Theory, Research, and Treatment*, 8(1), 35-45. <https://doi.org/10.1037/per0000164>
- Kreft, J. (2017). *An exploration of trainee high-intensity therapist's views of self-disclosure in clinical supervision using q-methodology and semi-structured interviews*. [Masters dissertation, University of Chester]. University of Chester Repository.
- Lambert, M. J., & Ogles, B. (2004). The efficacy and effectiveness of psychotherapy. In MJ Lambert (Ed.) *Bergin and Garfields handbook of psychotherapy and behavior change* (pp. 139-193). Wiley.
- López-López, J. A., Davies, S. R., Caldwell, D. M., Churchill, R., Peters, T. J., Tallon, D., Dawson, S., Wu, Q., Li, J., & Taylor, A. (2019). The process and delivery of CBT for depression in adults: a systematic review and network meta-analysis. *Psychological Medicine*, 49(12), 1937-1947. <https://doi.org/10.1017/S003329171900120X>
- Memiş, L. (2020). Kentsel aktörlerin sürdürülebilirlik algıları: q-metodoloji yöntemiyle bir araştırma (Sustainability perceptions of urban actors: a research with Q-Methodology method). *Afyon Kocatepe Üniversitesi Sosyal Bilimler Dergisi*, 22(1), 244-260.
- Murdock, N. L. (2004). *Theories of counseling and psychotherapy: A case approach*. Pearson Education.
- O'Donohue, W. T., & Fisher, J. E. (2009). *General principles and empirically supported techniques of cognitive behavior therapy*. John Wiley & Sons, Inc.
- Oud, M., De Winter, L., Vermeulen-Smit, E., Boddien, D., Nauta, M., Stone, L., Van Den Heuvel, M., Al Taher, R., De Graaf, I., & Kendall, T. (2019). Effectiveness of CBT for children and adolescents with depression: A systematic review and meta-regression analysis. *European Psychiatry*, 57, 33-45. <https://doi.org/10.1016/j.eurpsy.2018.12.008>
- Örüm, M. H. (2021). Obsesif-kompulsif bozukluğun ruminasyon ve temizlik alt boyutlarındaki bilişsel hataların bilişsel davranışçı tedavi ile değişimlerinin karşılaştırılması (Comparison of alterations of cognitive errors in rumination and cleaning dimensions of obsessive-compulsive disorder with cognitive behavioral treatment). *Kırıkkale Üniversitesi Tıp Fakültesi Dergisi*, 23(3), 635-644.
- Özmen, H., & Karamustafaoglu, O. (2019). *Eğitimde araştırma yöntemleri (Research methods in education)*. Pegem Akademi.
- Öz-Soysal, F. S., Uz-Baş, A., & Aysan, F. (2016). Okul psikolojik danışmanlarının psikolojik danışma yaklaşımlarına ilişkin görüşleri (Views of school counselors on psychological counseling). *Türk Psikolojik Danışma ve Rehberlik Dergisi*, 6(46), 53-69.
- PQ Method. (2023). Retrieved March 11, 2023, from <http://schmolck.org/qmethod/>
- Sandell, R., Blomberg, J., Lazar, A., Carlsson, J., Broberg, J., & Schubert, J. (2000). Varieties of long-term outcome among patients in psychoanalysis and long-term psychotherapy: A review of findings in the stockho. *International Journal of Psycho-Analysis*, 81(5), 921-942.
- Sandell, R., Lazar, A., Grant, J., Carlsson, J., Schubert, J., & Broberg, J. (2007). Therapist attitudes and patient outcomes: II. therapist attitudes influence change during treatment. *Psychotherapy Research*, 17(2), 196-204. <https://doi.org/10.1080/10503300600608439>
- Sharf, R. S. (2015). *Theories of psychotherapy & counseling: Concepts and cases*. Cengage Learning.

- Simon, N., McGillivray, L., Roberts, N. P., Barawi, K., Lewis, C. E., & Bisson, J. I. (2019). Acceptability of internet-based cognitive behavioural therapy (i-CBT) for post-traumatic stress disorder (PTSD): a systematic review. *European Journal of Psychotraumatology*, *10*(1), 1646092. <https://doi.org/10.1080/20008198.2019.1646092>
- Skelcher, C., Sullivan, H., Jeffares, S. (2013). Governing subjectivities: a Q methodology study. In: *Hybrid governance in european cities. understanding governance series*. Palgrave Macmillan, London. [https://doi.org/10.1057/9781137314789\\_5](https://doi.org/10.1057/9781137314789_5)
- Springer, K. S., Levy, H. C., & Tolin, D. F. (2018). Remission in CBT for adult anxiety disorders: A meta-analysis. *Clinical Psychology Review*, *61*, 1-8. <https://doi.org/10.1016/j.cpr.2018.03.002>
- Stephenson, W. (1953). *The study of behavior; Q-technique and its methodology*. University of Chicago Press.
- Stenner, P., & Watts, S. (2012). *Doing Q methodological research: Theory, method & interpretation*. Sage Publications Ltd
- Stone, T., & Turale, S. (2015). Q methodology: An introduction. *Pacific Rim International Journal of Nursing Research*, *19*(3), 183-186.
- Türkçapar, M. H. (2018). *Bilişsel davranışçı terapi temel ilkeler ve uygulama (Basic principles and practice of cognitive behavioral therapy)*. Epsilon Yayınevi.
- Watts, S., & Stenner, P. (2007). Q methodology: the inverted factor technique. *The Irish Journal of Psychology*, *28*(1-2), 63-76. <https://doi.org/10.1080/03033910.2007.10446249>
- Weber, B. W. (2020). *Counselor viewpoints on the formation of theoretical orientation*. Kansas State University. (Publication No. 28154971) Proquest dissertations & theses global.
- Wilcockson, M. (2022). Conflicts of identity—How counsellors practice CBT 5 years post qualification. *Sciences*, *11*(2), 42-50. <https://doi.org/10.11648/j.pbs.20221102.11>