Cantonese versus Canadian Evaluation of Directive and Non-Directive Therapy

Peter H. Waxer
York University

Abstract

Cantonese and Canadian university students were asked to read transcripts of Carl Rogers and Albert Ellis counselling "Gloria" from the film "Three Approaches to Psychotherapy" and then rate these counsellors on the dimensions of directiveness, forcefulness, repetitiveness, sensitivity, politeness and willingness to see either Ellis or Rogers. Results indicated Canadians were more willing to see Rogers than were Chinese students, in spite of parallels between spoken Cantonese and Rogers' reiterative style. Chinese students were less condemning of Ellis' directive style than were Canadian students. These results are consistent with prior studies suggesting Asian clientele view counselling as a more directive, paternalistic and autocratic process, in contrast to North Americans who see counselling as a more explorative and democratic process.

In reviewing counselling and psychotherapy findings for Asian-Americans, Leong (1986) echoes other writers in pointing out the need to evaluate the appropriateness of Western therapy systems for Asian clientele (Sue, 1981; Sue & Morishima, 1982; Wong, 1981). Language, according to Leong (1986), may act as a barrier to effective counselling if either client or counsellor does not clearly understand their counselling partner. Cantonese and English differ in language used to communicate that the listener is understanding and, perhaps more importantly, paying attention to what is being said. Boyle & Ng Delbridge (1970) note

To let the other person know you’ve been paying attention in English, we have such phrases as “I see” and “Is that so?” . . . A favorite way to signal such information in Cantonese is for the listener to repeat the speaker’s last sentence or a portion of it. (p. 282)

Thus, in Cantonese, the repetition is not viewed as an irritating parroting of your conversational partner but rather as a sign of respectful attention and understanding. This invites the question of whether a
Western counsellor using such a speech pattern would facilitate counsel­ling interaction with Cantonese clientele. There is, of course, a Western therapy system that employs this device as an integral component of its therapeutic dialogue. Rogerian or client-centred therapy makes much use of reiteration or “reflection” (Rogers, 1965) in encouraging clients to focus on salient issues. This study explores whether Rogerian reiteration is perceived positively by Cantonese speakers, in view of its parallels with long-standing Cantonese speech patterns. Would the use of repetition strike a familiar chord with Cantonese clientele and therefore lend greater comfort to the therapeutic process? This question is considered in contrast to the second variable examined in this study, which concerns a client’s expectations regarding how directive therapy should be.

There now exists a substantial body of research suggesting that Asian clientele prefer and expect a more directive form of counselling than Westerners. For example, Arkoff, Thaver & Elking (1966) found that Asian students tended to view counselling as a directive, paternalistic and authoritarian process. Tan (1967) and Yuen & Tinsley (1981) have reported similar findings. In a parallel vein, Brown, Stein, Huang & Harris (1973) noted a higher intolerance of ambiguity among Asian-Americans, which Leong (1986) suggests might lead such clientele to prefer problem-solving therapy over insight-oriented therapy.

Given these findings, this study presents material of a directive therapist (i.e., Albert Ellis’ Rational Emotive Therapy) to explore whether Cantonese clientele prefer this approach over the possible facilitating effects of Rogerian reflection for a Cantonese speaker. This investigation therefore contrasts two forms of Western counselling that are frequently regarded as being at opposite ends of the continuum for directiveness versus indirectiveness, in an effort to see whether either system holds attractiveness for Chinese clientele.

METHOD

Transcript Materials

Cantonese and Canadian university students were asked to read and evaluate two abridged transcripts of Carl Rogers and Albert Ellis conducting therapy sessions. A major methodological concern of contrasting these two approaches was to achieve as much stimulus equivalency as possible in the two transcripts. Thus material was drawn from the classic psychology film series “Three Approaches to Psychotherapy” (Shostrom, 1965) in which both Rogers and Ellis are talking with the same individual, Gloria, regarding her post-divorce adjustment. A transcript format was used to present this therapy material in order to eliminate variations in non-verbal and paralinguistic cues between Rogers and Ellis. This format also provided a more coherent organization...
of therapy dialogue. The final transcripts read as a continuous conversation in contrast to the video presentation of the material which appeared as a much more disruptive collection of edited segments. Transcript segments of Rogers provided repeated examples of Rogerian reflection while the transcript of Albert Ellis contained many instances of his more directive confrontational style. Each transcript contained five pages of written text representing the counselling dialogue to be rated.

A written transcript of the therapy dialogue in no sense captures the richness and complexity of a total therapeutic interaction. This is not the intention of this study. Rather, the design of this investigation focuses on linguistic style of a therapist as only one of many possible contributions to therapeutic facilitation. On establishing the exact impact, if any, of this one parameter, a fuller consideration of non-verbal, paralinguistic, environmental and other variables in the counselling context can be explored.

**Evaluation Scales**

Attached to the end of each transcript was a page of six bipolar semantic differential scales. Students were asked to rate on a ten-point scale if the therapist (Rogers or Ellis) was:

1) very indirect - very direct
2) not forceful - very forceful
3) not repetitive - very repetitive
4) not sensitive to client - very sensitive to client
5) not polite to client - very polite to client

The sixth scale asked students to indicate whether "they would be willing to discuss a problem with this therapist," indicating their intent on the scale: "not at all willing" ... "quite willing." Once again, a ten-point scale was employed, where a score of one indicated not at all willing and ten indicated quite willing.

Scale one focused on how direct raters perceived Rogers or Ellis to be; this scale therefore directly tapped the directiveness variable for client expectations. The second scale, focusing on forcefulness, attempted to examine the halo-effect dimensions cited in the literature as logically related to directiveness. Thus the forcefulness scale attempts to gauge the degree of paternalism, authoritarianism, and autocratic style of a therapist cited in prior investigations as preferred by Asian clientele. The repetitiveness scale focused on whether Cantonese raters perceived Rogers' reiterative style as repetitive, or as implied by Boyle & Ng Delbridge (1970) as a polite and sensitive way to indicate attention. The sensitivity and politeness scales were also employed for the reason just noted. They also provided a contrast between Canadian and Cantonese perceptions of "politeness," as in English conversational patterns,
someone who constantly repeats what you have just stated may not be perceived as sensitive or polite at all. The sixth scale of therapist choice was included to reflect whether Ellis or Rogers would be rated as the preferred therapist.

To complete the rating package, a cover sheet provided a preamble to the reading and ratings indicating that the material was directed towards better understanding of which therapeutic modalities would be considered attractive and of use by the respondents. All reference to either Dr. Ellis or Dr. Rogers was removed from the transcript material and participants were allowed as much time as they required to respond to the two sets of transcripts. No time limit was placed on the reading and rating of the dialogue. All raters were finished within one half hour. The majority of raters, both Canadian and Cantonese, finished in under 20 minutes.

Subjects

Posters and campus newspaper advertisements were used to solicit Cantonese speaking students at a major Canadian university. The advertisements were in English but stipulated that international students from Hong Kong whose first language was Cantonese were required to read and rate transcripts of counselling dialogues. All participants received $5.00 for their time and effort and all responses were anonymous. It was decided to solicit foreign Chinese students over Chinese-Canadian students in an effort to better isolate the repetitive linguistic feature of Cantonese. Chinese-Canadians who could understand Cantonese were considered more likely to have been exposed to the effects of acculturation and therefore might be less likely to employ the traditional Chinese linguistic conventions in their speech. A number of Cantonese students responded to the advertisement for the study (i.e., 56 males, 75 females). All such students who had more than an introductory psychology course were excluded from the study in order to eliminate a formal academic exposure to either Rogers’ or Ellis’ counselling approaches. In total, 30 male and 40 female Cantonese students were finally employed to rate the transcript material. All of these students were undergraduates, in their first to third year of university. In order to enroll at the university, all of the students were required to have passed a TOEFL (i.e., Test of English as a Foreign Language) examination. Ages of the Cantonese students ranged from 19 to 25 years old, with a median age of 21.8 years. The majority of these students held general arts majors. Ten of the males and 12 of the females were sophomores and had declared majors in business and economics. Five males and eight females were mathematics and computer science majors. None of these students had been in Canada more than three academic years.

Canadian students were solicited directly from first-year introductory psychology courses in order to expedite a more rapid data collection for
this section of the study. In order to eliminate participation by foreign students in this part of the sample, it was requested that only students who had received their primary education in Canada take part. Fifteen male and 30 female Canadian students came forth to participate in the study. Ages ranged from 18 to 24 for these students, with a median age of 20.3. As all of these students were in their first year of university, none had declared majors. These students were paid $5.00 for their effort and provided anonymous responses. All participants were given transcript materials as they presented themselves and were then taken to a study area in the university where they could fill out the rating materials on their own.

RESULTS

Students' responses to the six bipolar scales were statistically analyzed employing a 6×2×2×2 repeated measures MANOVA (i.e., six scale areas×rater's gender×rater's nationality×therapist). The results of this analysis indicated significant multivariate F-test equivalents for nationality (i.e., $F$ nationality [1, 672] = 8.23, $p < .001$) and significant differences between therapists (i.e., $F$ therapist [1, 672] = 15.72, $p < .001$). Next three-way ANOVAs (unequal n, harmonic mean solution) (Winer, 1967) were calculated and planned comparisons generated to examine differences arising in any of the six scales.

Table 1 summarizes the significant ANOVA results. Students' ratings of therapists' directiveness produced a significant gender×therapist (directiveness) interaction. Planned comparison indicated that both Chinese and Canadian females found Ellis significantly more directive than Rogers (i.e., 14.22–11.06, $F$ = 6.11, $p < .001$). No significant differences between Rogers and Ellis were found for either Chinese or Canadian males. It appears that the sensitive nature of Gloria's presenting problems (i.e., sexuality and divorce) might have made the women in this study more attentive to levels of therapist directiveness. However, there is no formal basis in the design of this study to argue this as a conclusive causal relation.

Students' ratings of therapists' forcefulness yielded a significant main effect; both Chinese and Canadians saw Ellis as more forceful than Rogers (i.e., 14.22–11.06, $F$ = 6.11, $p < .001$). No significant differences between Rogers and Ellis were found for either Chinese or Canadian males. Whether this linguistic-based difference generated a difference in therapist preference is, however, more clearly indicated in the remaining scale ratings.

There was a significant counsellor×ethnicity effect for the students' ratings of counsellors' repetitiveness. Both Canadian men and women rated Rogers as more repetitive than Ellis. Chinese students, however, did not see Rogers as more repetitive than Ellis. Whether this linguistic-based difference generated a difference in therapist preference is, however, more clearly indicated in the remaining scale ratings.

The ANOVA for sensitivity ratings indicated a significant main effect for therapist and three interaction effects: Nationality×Therapist, Na-
tionality x Gender and Therapist x Gender. Thus both Chinese and Canadians saw Ellis as less sensitive than Rogers. Planned comparison indicated in greater detail the nature of the ANOVA interaction effects. Focusing first on Ellis, Chinese raters were less condemning of Ellis’ directive style. Canadians found Ellis significantly less sensitive to the client than did Chinese raters (i.e., 15.21-9.20, \( F = 12.01, \ p < .001 \)). Comparison of ratings for Rogers produced parallel findings. Canadians rated Rogers as much more sensitive than did Chinese students (i.e., 15.87-12.65, \( F = 7.20, \ p < .001 \)). Gender differences failed to reach significance in comparative analyses.

Analyses of ratings for politeness indicated a main effect for therapist; both Chinese and Canadians saw Rogers as more polite than Ellis. However, planned comparison suggested that Canadian ratings contributed more to the experimental variance. In examining Chinese and Canadian ratings of Rogers, results indicate that Canadians saw Rogers as more polite than did Chinese (i.e., 17.07-13.98, \( F = 4.21, \ p < .025 \)). When Canadian and Chinese ratings for Ellis were compared, findings paralleled those seen in ratings for sensitivity; Canadians rated Ellis significantly less polite than did Chinese raters (i.e., 14.05-9.21, \( F = 10.11, \ p < .001 \)), who were less condemning of Ellis.

The last set of ratings asked the students to choose between Ellis and Rogers, indicating which counsellor they were more willing to see. ANOVA results showed a significant nationality x therapist preference interaction. Planned comparisons indicated that Canadians were much more willing to see Rogers than Ellis (i.e., 17.47-8.89, \( F = 20.91, \ dfs 1, 222, \ p < .001 \)), while the Cantonese students preferred Ellis over Rogers (i.e., 15.03-9.31, \( F = 8.09, \ dfs 1, 222, \ p < .001 \)).

DISCUSSION

Results of this investigation are consistent with the existing body of research literature for Asian clients in therapy. Collectively, Chinese students’ responses support the argument in the literature that Asian students tend to view counselling as a directive, paternalistic and authoritarian process (Leong, 1986). Ratings suggest that the Chinese students were much less condemning of Ellis than were Canadian students. Chinese students shared the same perception of Ellis as Canadians, that Ellis was more direct and forceful, less sensitive and polite than Rogers. Nevertheless, Chinese students did not rate Ellis as harshly as Canadians did for these attributes. Given the argument that the Chinese student sees counselling as a much more didactic exercise than do Westerners, it is easier to understand why directness and forcefulness would not necessarily be seen as discourteous and impolite by Chinese in this context.
<table>
<thead>
<tr>
<th>Scale Area</th>
<th>Therapist</th>
<th>Nationality</th>
<th>Significant Difference$^1$ for:</th>
<th>Therapist x Nationality</th>
<th>Therapist x Gender</th>
<th>Nationality x Gender</th>
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</thead>
<tbody>
<tr>
<td>1. Directiveness</td>
<td></td>
<td></td>
<td>$F=62.94$</td>
<td></td>
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<td>2. Forcefulness</td>
<td></td>
<td></td>
<td>$F=15.08$</td>
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<td>3. Repetitiveness</td>
<td></td>
<td></td>
<td>$F=50.22$</td>
<td></td>
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<tr>
<td>4. Sensitivity</td>
<td></td>
<td></td>
<td>$F=19.41$</td>
<td>$F=11.45$</td>
<td></td>
<td>$F=20.81$</td>
</tr>
<tr>
<td>5. Politeness</td>
<td></td>
<td></td>
<td>$F=31.47$</td>
<td></td>
<td></td>
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<tr>
<td>6. Preference for a Specific Therapist</td>
<td></td>
<td></td>
<td>$F=31.47$</td>
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$^1$ All $F$ values at $p < .001$, dfs 1, 222.
Regarding the linguistic feature of repetition in Cantonese, results of this study support the implication of Boyle & Ng Delbridge (1970) that Cantonese speakers will not be put off by this speech pattern. Ratings by the Chinese students showed that they did not view Rogers as repetitious as Canadians saw him. However, this linguistic device used to communicate courteous attention did not enhance Rogers’ client-centred approach in the ratings of Chinese students. They were less willing to see him than they were to see Ellis. It is suggested here that the autocratic atmosphere associated with counselling by Chinese students effectively nullifies any effect of the linguistic feature. Although repetition may be a refined nicety of polite Cantonese conversation, a counsellor granted higher authority and status by the Chinese client is not given any more respect for the use of reiteration. Previous literature suggests that Asian clients grant a therapist much higher status than their Western counterparts, due to the strong cultural values of respect for authority, traditions and learning (Arkoff, 1959; Fenz & Arkoff, 1962; Gaw, 1982; Sue & Kirk, 1972; Vernon, 1982). On the ten point scale used to rate preferred therapist Canadians rated Rogers at 8.16, Ellis at 3.5. In contrast, Chinese students ranked Ellis at 7.22 and Rogers at 4.19, indicating their preference for the more directive therapist.

In conclusion, this study does not provide a simplistic answer that the conversational style alone of any one therapeutic approach holds the key to extending therapy to the Asian client. Rather, it echoes the pattern of prior research in showing a greater acceptance by the Asian client of directive, didactic therapy approaches. Leong (1986) notes the need for research of this kind to employ samples with greater diversity. Much of existing research is based on responses from Chinese and Anglo-Americans residing in Hawaii or California. This study employed Canadian students and students from Hong Kong.

It is relevant to note that the Canadians responded in a fashion parallel to their American cousins. The response of the Hong Kong Cantonese likewise paralleled previously cited patterns for Asian-Americans. Lum (1982), Sue, Wagner, Ja, Margulis & Lew (1976) argue that there is a considerable overlap between Asians and Asian-Americans in their perceptions of mental illness. This current study suggests that a similar overlap might exist for attitudes towards therapists’ styles. The parallel findings for Asian students in this study and Asian-American subjects in other investigations supports the consistency of the Asian cultural values regarding authority and status in both communities.

There is, of course, much more to the therapeutic experience than the style of the spoken word as perceived in a written transcript. The nonverbal, paralinguistic and environmental parameters of the counselling interaction must all be considered in a final evaluation of counselling approaches. Even in restricting the focus of study to the rather narrow limits of written transcripts, there is the issue of whether the adjectives
used in the rating scales (i.e., directive, sensitive, etc.) have the same meaning for English speaking Cantonese as they do for English speaking Canadians.

Despite these limitations, it is relevant that the Cantonese and Canadian raters of this study generated responses consistent with existing literature. The differences have obvious implications for shaping therapy approaches for Asian clientele. A directive advice-giving approach in counselling is suggested by the results of this study as more appropriate for this population. The client-centred approach that Rogers (1965) himself defines as a more explorative and democratic process has been seen to generate a less positive reception. As such, it is not recommended as the therapeutic modality of choice for the counsellor of Asian clientele.

References


About the Author

Peter Waxer is currently Coordinator of intern training at York University's Counselling and Development Centre. He is also a cross appointed Associate Professor to the Department of Psychology. Dr. Waxer continues his interest into cross-cultural counselling and non-verbal behaviour research.

Address correspondence to: Dr. P. H. Waxer, Room 126, Behavioural Sciences Building, York University, 4700 Keele Street, North York, Ontario, M3J 1P8.