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## International Students' Perspectives of Helpful and Hindering Factors in the Initial Stages of a Therapeutic Relationship

### Perspectives des étudiants étrangers sur les facteurs améliorant ou entravant la phase initiale de la relation thérapeutique

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#### ABSTRACT

Using interpersonal process recall, 8 international student participants (6 men, 2 women) described what they thought was helpful or hindering to the therapeutic relationship during an analogue initial counselling session. A thematic qualitative analysis revealed that the participants found 5 counsellor qualities and techniques to be helpful to the therapeutic relationship: (a) active listening, (b) casualness, (c) direction, (d) enthusiasm, and (e) connection with client's culture. Three factors were identified as hindering to the therapeutic relationship: (a) language barriers, (b) fast pace, and (c) counsellor disengagement. Limitations and future directions are discussed.

#### RÉSUMÉ

En utilisant la méthode du rappel des processus interpersonnels, 8 étudiants étrangers (6 hommes, 2 femmes) ont décrit ce qu'ils pensaient être utile ou entravant pour l'alliance thérapeutique au cours d'une première séance de counseling analogique. Une analyse qualitative thématique a révélé que les participants ont trouvé 5 qualités et techniques du conseiller utiles à l'alliance thérapeutique : (a) l'écoute active, (b) la décontraction, (c) la direction, (d) l'enthousiasme, et (e) le rapport avec la culture du client. Trois facteurs ont été identifiés comme faisant obstacle à la relation thérapeutique : (a) les barrières linguistiques, (b) le rythme rapide, et (c) le désengagement de la part du conseiller. Les limites et orientations futures sont discutées.

During the course of their postsecondary education, many students are encouraged to study abroad in order to gain new cultural and life experiences (Clarke, Flaherty, Wright, & McMillen, 2009). These intercultural experiences can enhance their competitiveness in the job market, strengthen interpersonal skills, and provide new networking contacts (Kitsantas & Meyers, 2001). International students, defined as individuals studying in Canada on a valid study permit, are also seen as advantageous to the Canadian government because of the prospect of increasing employment opportunities, economic growth, and links

between Canadian and international markets (Government of Canada, 2014). In fact, Canadian federal government initiatives are in place to double the number of international students in Canada by 2022, with a goal of hosting more than 450,000 international students in Canada. While there are many benefits to studying abroad, many international students also encounter distinct challenges that are often overlooked and should be examined if this student population is to continue to increase.

According to Popadiuk and Arthur (2004), the challenges faced by the majority of postsecondary students, such as achieving academic success and meeting new friends, are typically exacerbated by additional challenges specific to living in a new country. For example, students in Canada are often expected to participate in class and engage in critical thinking (e.g., reflect on information provided in class and challenge or question points made). Because many international students come from cultures that do not espouse these expectations, these students may find it challenging to adapt to the Canadian student role.

Other cultural barriers can make it challenging to form new friendships. For example, some international students may misinterpret "I'll call you" as a sincere offer of friendship, rather than what may, in actuality, be merely a superficial exchange (Mori, 2000). As well, if international students are not proficient in English or French, language barriers may make it more challenging for these students to meet new friends and establish a social support system in Canada.

Given the distinct challenges to academic and personal success that international students may encounter, one might predict that international students would make use of available services such as campus-based counselling in an effort to cope with the challenges of cultural transition. Unfortunately, compared to majority students, international students are less likely to seek counselling and, if they do, they are more likely to discontinue counselling prematurely (Chen & Lewis, 2011; Keeling & Nielson, 2005; Kilinc & Granello, 2003).

One of the main concerns expressed by international students who sought counselling is a perceived lack of understanding by the counsellor due to language and cultural barriers (Chen & Lewis, 2011; Yoon & Jepsen, 2008). International students reported finding it challenging to accurately articulate their thoughts in English, and also believed their counsellors were judging their language ability. For example, one study reported that Asian international students expressed concern over making grammatical mistakes in front of their counsellors (Yoon & Jepsen, 2008). As well, since many individuals from collectivist cultures are not brought up to express their emotions, students from these cultures may not have the vocabulary to express their feelings in counselling (Seo, 2010). Other cultural barriers include counsellors' use of standard counselling techniques without cultural consideration, and the use of stereotyping in working with culturally diverse clients (Chen & Lewis, 2011; Nilsson, Berkel, Flores, & Lucas, 2004). These findings demonstrate that a number of factors can hinder the creation of a collaborative, professional relationship with international students.

### *Therapeutic Relationship*

In an effort to decrease the number of international student clients quitting counselling prematurely, there needs to be a better understanding of what is and what is not effective in the creation of a therapeutic relationship with this population. The term *therapeutic relationship*, also referred to as the therapeutic alliance, is most commonly defined as “the quality and strength of the collaborative relationship between the client and therapist in therapy” (Horvath & Bedi, 2002, p. 41). A strong therapeutic relationship comprises a relational bond characterized by “feeling understood, supported, and provided with a sense of hope” (Horvath & Bedi, 2002, p. 60). In the early stages of counselling, the strength of the therapeutic relationship is central to the outcome of any type of counselling conducted (Horvath & Bedi, 2002; Horvath & Symonds, 1991; Martin, Garske, & Davis, 2000). For international students who prematurely quit counselling, this latter point is particularly relevant because a weak relational bond is often described as a major interference in counselling that may lead some clients to quit (Paulson, Everall, & Stuart, 2001).

Although numerous studies have examined the therapeutic relationship, there are few qualitative studies that examine the issue from the client’s perspective (Bedi, 2006). In this limited body of literature, factors identified as promoting the strength of the therapeutic relationship include the counsellor having helped the client think in new ways; the counsellor having shared something meaningful; and the counsellor having made use of tools and assignments (Fitzpatrick, Janzen, Chamodraka, & Park, 2006). Some of the factors identified as detracting from the therapeutic relationship include reserved or nongenuine client engagement, unwanted counsellor directiveness, and non-verbally communicated counsellor disengagement (Bedi, Cook, & Domene, 2012). Although these factors may reflect what North American clients view to be helpful or hindering to the therapeutic relationship, they may not reflect the experiences of international students. This possibility is supported by quantitative research findings revealing that factors such as counsellor directiveness, which are typically viewed as hindering to the therapeutic relationship, were actually viewed as helpful to the therapeutic relationship by clients from ethnic minorities (Bedi et al., 2012). Due to the lack of research emanating from the perspective of international students and cultural differences in what is perceived to be helpful versus hindering, it seems clear that there is a need for research that explores the therapeutic relationship specifically from the perspective of international students.

### *Present Study*

Addressing this deficit in the literature, the present study was designed to qualitatively explore international students’ perceptions of the process of forming a therapeutic relationship in the context of an analogue counselling session. The following research questions guided the study:

1. What do international students find helpful in creating a strong therapeutic relationship in an initial session with a counsellor?
2. What do international students find hindering in creating a strong initial therapeutic relationship with a counsellor?
3. How are photographs helpful or unhelpful in this therapeutic context?

## METHOD

### *Design*

The method used was one based on Kagan's (1980) video-assisted interpersonal process recall (IPR). IPR is a method that uses video recording as a way to closely examine both verbal and nonverbal components in an interpersonal interaction (Larsen, Flesaker, & Stege, 2008). This method was chosen because it allows the participant to vividly recall very specific moments during the counselling session. This provides the researcher the opportunity to learn what the participant was thinking and feeling at each moment during the counselling session.

To obtain a descriptive look at the rich data uncovered from the interviews, the researcher chose to analyze the data using an inductive thematic analysis grounded in a realist ontology. Inductive analysis with a realist ontological stance is a data-driven process of coding the data that provides a descriptive examination of international students' views of the therapeutic relationship. This makes the assumption that it is possible to examine this phenomenon objectively, and appropriate to minimize the preexisting perspectives and biases of the researcher during data collection and analysis (Socholotiuk, Domene, & Trenholm, in press). Thematic analysis in this study was based on Braun and Clarke's (2006) framework because it provides a step-by-step guide to accurately conducting the analysis and was also used in other IPR studies (Egeli, Brar, Larsen, & Yohani, 2014; Larsen & Stege, 2012).

### *Participants*

A keystone of process research is to examine the "microphenomena" of therapeutic practice (Macaskie, Lees, & Freshwater, 2015, p. 237). Consequently, emphasis is placed on obtaining rich, detailed accounts from participants, as opposed to interviewing a large number of participants. Eight participants took part in the present study, which is consistent with sample sizes of 3 to 11 participants found in other IPR studies (Larsen et al., 2008; Larsen & Stege, 2012). The participants consisted of 2 female and 6 male international students, aged 18 to 28, who had been in Canada between 0.5 and 4.5 years. Participants identified their home country as India ( $n = 4$ ), China ( $n = 1$ ), Mexico ( $n = 1$ ), Nigeria ( $n = 1$ ), and Saudi Arabia ( $n = 1$ ). Five participants were undergraduates and 3 were master's students. Their majors were engineering ( $n = 5$ ), computer science ( $n = 2$ ), and English ( $n = 1$ ). Participants reported that they were not receiving counselling at the time of their involvement in the research and did

not have an untreated diagnosed psychological disorder. Recruitment occurred through university e-mail discussion groups, posters around campus, and snowballing.

### *Procedures*

*Analogue initial counselling session.* Each participant attended a discussion session led by a counsellor, which served as an analogue to an initial photo-assisted counselling session. Three female counsellors and one male counsellor took part in this study. All counsellors were Caucasian Canadians who were students in the final stages of completing their master's ( $n = 2$ ) and doctoral ( $n = 2$ ) degrees. The counsellors had an educational background in counselling ( $n = 3$ ) and clinical psychology ( $n = 1$ ). The counsellors received a 45-minute training session on aspects of the theory and techniques of incorporating photos into an initial counselling interview. They were trained to limit their role to rapport-building and information-gathering, and they were asked not to conduct any interventions, as participants had not consented to receive counselling in this study. As well, counsellors were provided with written guidelines that they could refer to during the session and were prompted to focus on alliance-building. Counsellors were also informed of their roles and provided written consent to participate in the study. Similarly, participants met with the principal investigator to be informed of their role and provide written consent immediately prior to the analogue session. Sessions ranged from 31 to 61 minutes, and all were video recorded.

*Data collection interview.* Approximately one to seven days after the session, in-depth, semistructured IPR interviews were conducted to gather information about participants' experiences in an analogue counselling session. These interviews, conducted by the principal researcher, were audio-recorded and lasted 1 to 1.5 hours. The interviews involved playing back the video recording of the discussion session, with the principal researcher and participant both pausing the video at key points to comment on the following: (a) What were you thinking at that moment? (b) What were you feeling at that moment? (c) What was your level of comfort? and (d) If your comfort level changed at any point throughout, how and when? All but one of the participants initiated pausing the video at times.

*Data analysis.* Audio-recordings were transcribed and coded using Braun and Clarke's (2006) procedures for thematic analysis. This process involved identifying and tabulating explicit, semantic content, with supporting quotations, that was deemed relevant to the topic of helpful and hindering factors of the therapeutic relationship. For each transcript, all codes were sorted into thematic categories based on similar manifest meaning, with each code placed in only one category. Afterwards, the principal researcher wrote a report for each participant, which outlined the corresponding themes that emerged in his or her interview, and explained each theme with the corresponding codes and quotes. Pseudonyms chosen by the participants were used throughout the reports.

Participants were emailed their individual report and asked to provide feedback on whether the descriptions fit their experience for member-checking purposes. Seven of the participants replied, with all of them stating that the content of the reports were accurate. Afterwards, overarching themes were created to reflect the common experiences of the participants in their counselling sessions. An additional inclusion criterion was imposed to reduce the likelihood of capturing experiences that are unique to a specific individual: In order for a theme to be included in the final list, it needed to be present in the report of more than one participant.

#### FINDINGS

The 8 participants described five themes reflecting the helpful factors of the therapeutic relationship and four themes reflecting the hindering factors of the therapeutic relationship that met the criterion of being present in at least two different participants' descriptions. These themes are presented in Table 1 and Table 2 respectively, along with the individual codes that contributed to each theme and the total number of participants who described experiences related to each theme.

Table 1.  
*Factors Identified as Helpful to the Therapeutic Relationship*

Themes ( <i>n</i> of participants)	Codes
Active listening ( <i>n</i> = 6)	<ol style="list-style-type: none"> <li>1. Patience</li> <li>2. Use of reflective skills</li> <li>3. Open body language</li> <li>4. Suggested words</li> </ol>
Casualness ( <i>n</i> = 7)	<ol style="list-style-type: none"> <li>1. Informal comments</li> <li>2. Self-disclosed</li> <li>3. Established a nonhierarchical relationship</li> <li>4. Moved around</li> <li>5. Flexible</li> <li>6. Mildness</li> <li>7. Was fun</li> </ol>
Direction ( <i>n</i> = 5)	<ol style="list-style-type: none"> <li>1. Asked direct questions</li> <li>2. Gave information</li> </ol>
Enthusiasm ( <i>n</i> = 6)	<ol style="list-style-type: none"> <li>1. Curiosity</li> <li>2. Acted surprised</li> <li>3. Friendliness</li> </ol>
Connected with the client's culture ( <i>n</i> = 2)	<ol style="list-style-type: none"> <li>1. When counsellors were perceived to be culturally knowledgeable</li> <li>2. When counsellors found ways to enhance cultural understanding through the use of analogies</li> </ol>

Table 2.  
*Factors Identified as Hindering to the Therapeutic Relationship*

Themes ( <i>n</i> of participants)	Codes
Language barriers ( <i>n</i> = 4)	<ol style="list-style-type: none"> <li>1. Participants' difficulty articulating their thoughts in English</li> <li>2. Understanding English words used by the counsellor</li> </ol>
Fast pace ( <i>n</i> = 3)	<ol style="list-style-type: none"> <li>1. When the counsellor prematurely switched topics</li> <li>2. When participants said they felt pressure to say something or to bring up a new topic</li> <li>3. When there were few pauses or silences</li> </ol>
Counsellor disengagement ( <i>n</i> = 2)	<ol style="list-style-type: none"> <li>1. Contrived reactions</li> <li>2. Inappropriate reactions</li> <li>3. Not using the client's vocabulary</li> <li>4. Showing discomfort</li> <li>5. Lack of eye contact</li> <li>6. Fidgeting</li> </ol>
Ineffective questioning ( <i>n</i> = 2)	<ol style="list-style-type: none"> <li>1. Broad, open questions</li> <li>2. Interrogation</li> </ol>

### *Factors Helpful to the Therapeutic Relationship*

Themes were categorized as factors viewed as helpful to the therapeutic relationship when participants described aspects of their experience that increased their level of comfort or helped them feel understood or supported. The following themes represented factors that participants indicated as helpful: (a) active listening, (b) casualness, (c) direction, (d) enthusiasm, and (e) connected with client's culture.

*Active listening.* The theme of active listening involved the counsellor making an effort to understand both the participant's explicit and implicit messages and was composed of four codes: patience (*n* = 3), the use of reflective skills (*n* = 4), open body language (*n* = 2), and suggested words (*n* = 4). One participant described how the counsellor suggested words that helped the participant more accurately describe her story, thus demonstrating that the counsellor was actively following her story: "I was, like, that's exactly the word I would use to describe my friend, [friend's name]: 'The connector'" (Anita, age 18).

*Casualness.* Casualness was defined by therapist behaviours or characteristics that were perceived by the participants as less formal than a traditional professional interview. The seven codes that characterized this theme were informal comments (*n* = 2), self-disclosure (*n* = 4), the establishment of a nonhierarchical relationship (*n* = 5), moved around (*n* = 1), flexibility (*n* = 1), mildness (*n* = 1), and being fun (*n* = 2). A casual counsellor was viewed as one who treated the session as a conversation, sharing thoughts and opinions, as opposed to simply questioning:

[The counsellor's] approach was good because [the counsellor] was trying to make me comfortable so that [the counsellor] could just steer it as a normal conversation as opposed to a straight one-on-one formal things where you're both formal and you can't speak your heart out. (Singh, age 24)

*Direction.* A counsellor who was directive was one who took an active role in the way the counselling session was progressing. This theme was defined by two different codes: asked direct questions ( $n = 2$ ) and gave information ( $n = 5$ ). One participant described how answering direct questions, such as closed questions, was a more comfortable experience because it was easier:

I think it makes you feel more comfortable and easier ... you don't have to make, like, think deep or do different things at the same time, try to remember, talk to put into words. It was just "yeah," "yes," "no." (Anita, age 18)

*Enthusiasm.* An enthusiastic counsellor was one who was very positive, energetic, and open to learning throughout the counselling process. This theme was defined by three codes: curiosity ( $n = 3$ ), acted surprised ( $n = 1$ ), and friendliness ( $n = 4$ ). The counsellor's surprised reaction was described by one participant: "Normally I don't talk about my pets to someone, so I was really happy how [the counsellor] reacted. [The counsellor] was happy at that moment. [The counsellor] was really surprised" (Ravi, age 23).

This surprised reaction was interpreted as the counsellor finding the participant's story surprising and interesting. This made the participant feel validated for sharing something personal about himself that he did not share with others. Another participant described how her counsellor was friendly by being fun and positive: "If someone was a bit more serious or direct would interview me instead, they probably would have gotten less; I wouldn't have been this comfortable talking" (Anita, age 18).

*Connected with the client's culture.* Counsellors demonstrated an ability to connect with the client's culture when they were able to find explicit ways to show participants that they understood an element of the client's culture. The feeling of connection occurred when the participants felt like the counsellor understood a piece of their cultural identity. This theme was defined by two codes: when counsellors were perceived to be culturally knowledgeable ( $n = 2$ ), and when counsellors found ways to connect with the client's culture through the use of analogies ( $n = 1$ ).

When the counsellor reported having travelled in a number of African countries, the participant from Nigeria said that it made him feel more confident that the counsellor would be able to understand his stories: "I felt like if I say something that happened in Africa, [the counsellor] would understand" (Kojo, age 23). As well, the counsellor demonstrated cultural knowledge by relaying an understanding of the way the school system works in the participant's home country. The participant reported that this made it less challenging to share his story with the counsellor: "See how [the counsellor]'s getting along with the conversation? Like [the counsellor] knows like the stuff like 'Junior 1' and yeah. It makes it easy" (Kojo, age 23).

Another participant said that the counsellor overcame cultural barriers by formulating an analogy to communicate cultural understanding to the participant. This meant that the counsellor did not necessarily have any preexisting cultural knowledge about the client, but was able to find an alternative way to understand a part of the client's culture. The participant was explaining the intricacies of putting on a turban, and the counsellor came up with the analogy of putting on a tie:

It would have been hard if [the counsellor] didn't, for example if [the counsellor] doesn't come up with that tie analogy, so I would have to like show something else, or like that. Or put some extra emphasis to explain what [the counsellor] like, [the counsellor] was wise enough to like bring something out and it was like easy for me to tell. (Singh, age 24)

### *Factors Hindering to the Therapeutic Relationship*

When participants described aspects of their counsellors' personal qualities or techniques that decreased their level of comfort or hindered their ability to feel understood or supported, that experience was identified as hindering the therapeutic relationship. These descriptions were categorized into four themes reflecting different kinds of hindrances: (a) language barriers, (b) fast pace, (c) counsellor disengagement, and (d) ineffective questioning.

*Language barriers.* Language barriers were defined as obstacles to being able to comfortably communicate verbally and feel understood by the counsellor, due to both the participants' lack of proficiency in English and the counsellors' failure to adequately accommodate for the participants' ability levels. Two codes contributed to this theme: participants' difficulty articulating their thoughts in English ( $n = 4$ ) and understanding English words used by the counsellor ( $n = 1$ ). One participant explained how challenging it was to explain something a first time, and then have to find a way to explain it differently because the counsellor did not understand it the first time. In this case, the participant found it challenging to speak because of his own lack of proficiency in English, as well as the counsellor's inability to assist in making it an easier process:

See, I get more confusing how to explain it more. At the first time I explain it, not probably in sequence sentences, now I stick with the single words. So when I, when someone doesn't understand me with my full explanation when I came back to the explanation again, I'm really sure that it's going to be more difficult to explain. (Joyous, age 26)

Another participant described the frustration she experienced when she could not easily articulate her thoughts in English.

Yeah, like when I usually talk, I'm usually like "I'm so bad at talking" 'cause I have to think really hard about what I want to say. Like I'll think about it, and then I'll say it all wrong. It's completely disconnected. So like I get stuck with the language, and so that was also an issue. I had to keep thinking like "I

have to say this” and for me the sentence, say it. And then I get stuck with the words, which is worse. Because then it messes my sentence. (Liliana, age 22)

*Fast pace.* When a session was viewed as being conducted at a fast pace, participants felt as if the counsellor was rushing them through the session. A session conducted at a fast pace was defined by three codes: when the counsellor prematurely switched topics ( $n = 2$ ), when participants said they felt pressure to say something or to bring up a new topic ( $n = 1$ ), and when there were few pauses or silences ( $n = 1$ ).

One participant described how the counsellor switched topics while she was still reflecting on the previous topic, explaining that she felt inhibited from adequately reflecting on the previous topic:

It was unexpected because we were talking about the picture and all of a sudden [the counsellor] asked me how it was going—it was a different topic. All of a sudden we're talking about something else, so I was very caught off hand or something, you know, maybe that was running in my head, “Whoa whoa, we're talking about something different.” (Anita, age 18)

*Counsellor disengagement.* The theme of counsellor disengagement was evident when the counsellor was not perceived to be fully involved in the conversation and when the participant felt a slight disconnect from the counsellor. This theme was constructed from six codes: contrived reactions ( $n = 1$ ), inappropriate reactions ( $n = 1$ ), not using the client's vocabulary ( $n = 1$ ), showing discomfort ( $n = 2$ ), lack of eye contact ( $n = 1$ ), and fidgeting ( $n = 1$ ). One of the participants connected not making eye contact with not feeling understood:

Sometimes I don't know whether [the counsellor] is understanding what I'm talking about or not, because sometimes I noticed where [the counsellor]'s staring at some other place, not at my eyes. But [the counsellor] may not understand my talking. (Yong, age 28)

Another participant expressed that the counsellor could have showed more engagement and interest if the counsellor used their vocabulary:

*Researcher:* So if [the counsellor] called it, so at this point, you're changing your language for [the counsellor], you're saying “soccer” because you know that [the counsellor] calls it “soccer.” What would it, how do you think that would have felt if [the counsellor] called it “football” and was using your language instead?

*Participant:* It would make me more comfortable you would say. (Bhagat, age 27)

*Researcher:* Yeah, so if [the counsellor] made the effort to kind of use your language, just simple things like “football,” you would have felt more comfortable?

*Participant:* Yeah.

*Ineffective questioning.* Ineffective questioning occurred when the counsellor asked questions in a way that made the participant feel either confused or anxious.

Two codes contributed to this theme: broad, open questions ( $n = 2$ ) and interrogation ( $n = 1$ ). One participant described how it was challenging to answer the counsellor's questions because they were broad and not specific enough, which made it difficult to choose what he wanted to answer:

*Participant:* Yeah, that was a really hard question. It depends on what you're looking at. If you're looking at the environment and how the place is, I don't really miss it. If you're talking about like, because Nigeria is not like here, in Nigeria it's like every, it's not safe. People are always running around, trying to hide somewhere because there's always shootings, stuff, yeah. (Joyous, age 26)

*Researcher:* Okay. If [the counsellor] was a little bit more specific in the questions ... asked, it would have been more helpful.

*Participant:* Do you miss your family? Do you miss your friends? Yeah. Do you miss the food? Yes.

Another participant described how the beginning of the session was uncomfortable when it followed a strictly question-answer format, because it felt formal and there was not much time for reflection:

I thought it was going to be harder, as the beginning, sort of like when I had to think of an answer, and then there's going to be another question and I'm going to have to answer back, and maybe have like a limit to what I say. (Liliana, 22)

## DISCUSSION

The thematic analysis revealed a number of themes reflecting what international students perceive to be as helpful or hindering factors related to the therapeutic relationship during an analogue of an initial counselling session. Many of these themes were similar to existing research about the therapeutic alliance conducted with majority students, while others demonstrate the unique counselling needs of international students. These similarities to and differences from the existing literature will now be discussed.

### *Factors Helpful to the Therapeutic Relationship*

*Active listening.* Confirming the importance of active listening as a foundational skill in counselling international students, it was described as a helpful factor by 6 out of the 8 participants in this study. Active listening is typically defined by the following skills: attentive body language (appropriate body language and gestures, eye contact, facial expressions, body movement), following skills (infrequent, timely, and considered questions; attentive silence), and reflecting skills (paraphrasing, reflecting, summarizing) (Robertson, 2005). In the present study, participants expressed increased comfort in opening up and sharing about themselves when the counsellors demonstrated, both verbally and nonverbally, that they were paying attention to what the participants were saying and that they understood the participant. Counsellors' demonstration of accurate understand-

ing through reflecting skills should be particularly helpful in creating a stronger therapeutic relationship with international students, in light of the language barriers that have been identified as a concern in both the present study and previous research (Chen & Lewis, 2011; Popadiuk & Arthur, 2004; Yoon & Jepsen, 2008). According to Henkelman and Paulson (2006), "counsellors need to constantly check for understandings, and should not trust assumptions which are likely to be inaccurate" (p. 141).

Intriguingly, these international students perceived patience to be an integral part of active listening. This finding raises an important cultural element in understanding the nature of active listening, because patience is not typically emphasized in the North American literature on active listening. For these participants, patience as a listening skill meant following the clients' rhythm and giving them enough time to adequately articulate their thoughts. Emphasizing the importance of this finding, Mori (2000) explained that "counselors can put the students at ease by accommodating their culturally derived, unique communication styles respecting their way of interacting, length of silence and conversational turns, and degree of explicitness and openness" (p. 141).

*Casualness.* Casualness was a helpful factor expressed by 7 of the 8 participants. This preference for disclosing to someone who adopts a casual, informal stance is consistent with the literature on international students' preferred social supports. Yoon and Jepsen (2008) noted that international students were more likely to seek help from informal sources, such as friends and family, as opposed to making an appointment with a counsellor. The participants in this study expressed how comfortable they felt when the counsellor treated the session like a "normal conversation" and "not like an interview," which is in all likelihood how their preferred social support sources would interact with them.

Pedersen (1991) asserted that international students may be more comfortable with a counsellor who is more casual because

counseling international students frequently occurs in an informal setting, such as a hallway, home, or street corner, and frequently depends on an informal method, such as a presentation, discussion, or daily encounter, which might not be perceived as counselling according to standardized models. (pp. 28–29)

Counsellors who incorporate some degree of casualness into their counselling sessions may find it easier to create a strong connection with their international student clients.

*Direction.* The themes revealed that 6 of the 8 participants expressed that it was helpful when the counsellors were directive in their approach. Participants' preference for a directive style of counselling is consistent with other studies examining international students' preferred styles of counselling (Mori, 2000; Yoon & Jepsen, 2008). Mori (2000) explained that international students expect and prefer counsellors who provide concrete, tangible help as opposed to nondirective counselling. Nondirective counselling, according to Pedersen (1991), emphasizes "client verbalization and client responsibility" (p. 27); this type of counselling

more closely adopts western values, such as having unique personal attitudes and opinions, which may not resonate with individuals from nonwestern countries (Seo, 2010). The present study not only supports the findings of previous studies about the importance of direction, but suggests additional reasons why international students may prefer and desire directive counselling: in order to better receive information and, perhaps more interestingly, to overcome language barriers. Participants in this study reported feeling more comfortable with closed questions because these required less verbose answers than open questions, which was particularly important in light of their difficulties in expressing themselves in English.

*Enthusiasm.* Five of the 8 participants expressed that it was helpful to have a counsellor who was not only friendly and supportive, but also curious and who reacted with surprise. Although other studies have found being friendly, warm, and positive to be helpful factors in the therapeutic relationship (Bachelor, 1995; Bedi, Davis, & Williams, 2005), there are few that identified the theme of enthusiasm specifically. Duff and Bedi (2010) reported that “asking questions” and giving “encouraging comments” were counsellor behaviours that their adult participants found helpful to the therapeutic alliance (p. 99). In another study examining the therapeutic relationship between clients and speech-language pathologists, the findings revealed that “effective clinicians were also seen displaying ‘enthusiasm’ and are able to promote ‘successful change’ through an ‘eagerness to help’” (Plexico, Manning, & DiLollo, 2010, p. 340). The latter statement reflects the sense of therapist engagement that participants in the present study felt when the counsellor was enthusiastic. This study’s findings suggest that the same enthusiastic attitude that has been found to be important to relationship formation in previous research extends to international student clients.

*Connected with the client’s culture.* Two of the 8 participants made direct statements about how their counsellors’ abilities to overcome cultural barriers permitted a strong therapeutic relationship. Both participants stated that it was helpful that the counsellors expressed cultural knowledge, such as knowledge about the geography and educational system of their home countries. For example, making comparisons with North American cultural norms demonstrated a clear effort to understand the client’s culture. The importance of counsellors’ abilities to overcome cultural barriers is consistent with previous research. Najmi (2013) found that international student participants reported a stronger therapeutic alliance with counsellors who expressed cultural awareness. Collins and Arthur (2007) argued that when counsellors display cultural competencies through knowledge of self and other cultures, more effective counselling could ensue.

In the present study, a participant felt more understood when one of the counsellors simply mentioned having travelled to the participant’s continent. Specifically, he said that knowing that the counsellor had done so allowed him to talk about his culture without feeling like he had to explain extra details to ensure understanding. The counsellor’s judgement to use self-disclosure in this situation was effective. According to Collins and Arthur (2007), the “ability to assess when to apply particular knowledge or skills” (p. 41) is a quality needed to determine

when to effectively and ethically apply one's learned cultural knowledge. The present study provides some support for the idea that cultural knowledge of self and others, as well as the appropriate judgement on when to disclose, can be effective for therapeutic relationship formation with international students.

### *Factors Hindering to the Therapeutic Relationship*

*Language barriers.* Language barriers, or the inability to comfortably communicate in English to the counsellor, were perceived by 3 of the 8 participants as challenging their ability to feel confident and understood in the counselling session. This is a relatively low percentage, given that a language barrier is one of the most consistently identified barriers to counselling with international students (Luzio-Lockett, 1998; Mori, 2000; Pedersen, 1991; Yoon & Jepsen, 2008). Although none of the participants in this study had English as their mother tongue, the results may reflect similar findings by Swagler and Ellis (2003): "individual differences in adjustment might be better predicted by *confidence* in using language skills already acquired rather than actual language ability" (p. 423; emphasis in original).

It appears that these 3 participants did not feel sufficiently at ease to communicate effectively with the counsellor. This coincides with research conducted by Yoon and Jepsen (2008) where the majority of Asian international student participants in their study were concerned about being able to communicate effectively in counselling. This hindering factor is concerning because several studies have shown that language barriers are a major deterrent to seeking counselling support (Mori, 2000; Pedersen, 1991; Yoon & Jepsen, 2008). This study appears to confirm that language barriers continue to be an issue for international students, although it may only be a concern for a minority of international students.

*Fast pace.* The themes also identified that 3 of the 8 participants found it was unhelpful when the counsellor conducted the counselling session at a fast pace. Participants stated that in these cases there were very few pauses in the conversation and it felt like the counsellors were rushing through each conversation topic. Regardless of whether or not they are working with international students, counsellors ought to avoid rushing to a response or further questioning, because silence can enable deep client self-reflection (Meier & Davis, 2008). When the counsellors proceeded at a fast pace, participants reported that any pause felt awkward and that they felt obligated to think of something to say. This kind of pressure to keep talking inhibits the reflection needed to accurately articulate thoughts and feelings, leading ultimately to more superficial discussions. One of the participants reported that he wanted to continue discussing a certain topic, but because the counsellor kept "going from one conversation to another, there wasn't much time to actually say more stuff" (Kojo, age 23). These findings suggest that, like majority students, international students prefer that counsellors facilitate conversations in a way that maintains a moderate pace while providing the holding space for participants to reflect and articulate their thoughts without feeling the need to rush.

*Counsellor disengagement.* The themes revealed that 3 of the 8 participants reported that counsellors being disengaged from the process was hindering to the

therapeutic relationship. Participants felt as if counsellors lacked genuine interest in the conversation when they behaved in ways that reflected disengagement, such as not making eye contact. Counsellor disengagement has been found to be a hindering factor in other studies examining the therapeutic relationship. In Bedi et al. (2012), university student participants stated that “counselor disengagement communicated nonverbally,” such as “lack of enough eye contact” and “fidgeting,” were hindering factors to the therapeutic relationship in sessions with a master’s-level counselling trainee (p. 354). As well, Duff and Bedi (2010) found that counsellor behaviours such as sitting still and looking at the client contribute to a stronger therapeutic alliance. The present study reveals that, like clients from the majority culture, international student clients also find that behaviours related to counsellor engagement are important for creating a strong therapeutic relationship.

*Ineffective questioning.* Two of the 8 participants reported that ineffective questioning strategies, such as interrogating and asking broad questions, hindered the therapeutic alliance. Other studies have reported similar findings related to interrogation, such as “counselor being too directive” and “counselor just keeps pushing and pushing” (Paulson et al., 2001, p. 57). Interestingly, a search of the literature revealed no studies reporting broad questions as a hindering factor. In this study, “broad questions” referred to questions that were both open and unfocused. A number of studies (Atkinson & Matsushita, 1991; Li & Kim, 2004) have shown that international students, particularly Asian international students, preferred directive styles of counselling, which involves focused questioning and the intent of reaching a goal. The results of this study may demonstrate that, like clients from the majority culture, international students find interrogative and “pushy” counselling behaviours as hindering, but questioning styles that involve some direction and focus are also necessary for alliance development with international students, and are especially appreciated by them.

#### LIMITATIONS AND FUTURE DIRECTIONS

There are a number of limitations to consider when interpreting the findings of this study. Because the study was designed to explore international students’ experiences in only a single counselling session, it is possible that alternative helpful or hindering factors may have emerged if participants were able to meet with the counsellor on more than one occasion. This possibility is particularly likely, given the established understanding that therapeutic relationships change over the course of counselling. Thus, this study may be more reflective of themes that are relevant to initial alliance formation, rather than alliance formation throughout counselling. As well, because this was an analogue study, participants were not actual counselling clients. While these participants still shared something personal about themselves, they did not approach the session as a client seeking assistance for a specific issue as a typical client would. If the study involved international student clients instead of analogue clients, the results may have varied. Additionally, while all of the participants were international students, the group comprised

individuals from very distinct cultural backgrounds (e.g., Chinese culture and African culture). The results may have been different if the participants were all from the same cultural background.

Moreover, sample characteristics may have also impacted the findings. Participants in this study covered almost the full range of current definitions of emerging adulthood; that is, the developmental period between 18 and 29 years of age (Arnett, Žukauskienė, & Sugimura, 2014; Nelson & Luster, 2016). Depending on their place in completing the transition, different emerging adults in the sample may have had different perceptions on what they believe are helpful or hindering counselling factors. For example, younger emerging adults may perceive the counsellor as an authority figure because of differences in age and experience (Thompson, Bender, Lantry, & Flynn, 2007). Conversely, a 28-year-old graduate student may perceive fewer differences in power, expertise, or credentials (Mori, 2000), which is likely to have an effect on their perceptions of the therapeutic relationship.

Similarly, in light of the research revealing that level of acculturation is often associated with the length of time that an international student resides in the host country (Popadiuk & Arthur, 2004), participants' length of stay in Canada (0.5 year versus 4.5 years) may have also had an influence. A participant who has been in Canada for many years may have adopted more of the Canadian perspectives and attitudes toward interpersonal relationships and the therapeutic relationship, whereas a participant who has only been in Canada for less than a year may approach the therapeutic relationship in much the same way they approach interpersonal relationships in their home country (Chen & Lewis, 2011). These forms of variability may have contributed to the wide range of incidents that were found; a study with an equivalent sample size that placed greater restriction on age or length of time in Canada may have resulted in different findings.

To determine whether these helpful or hindering factors would reflect the experience of international student clients in other contexts, replication studies would be helpful to determine what additional helping and hindering themes may also exist. As well, since some IPR studies involve gathering data from both the client's and the counsellor's perspectives (Larsen et al., 2008), future studies may want to also address the counsellor perspective in order to determine whether they would identify the same or similar helpful or hindering factors as their clients. Finally, future studies could also look at the therapeutic relationship of international students from the same cultural backgrounds (e.g., Chinese participants only) in order to gain a more nuanced understanding in variations among different international student groups.

#### CONCLUSION

This exploratory qualitative study utilized IPR and thematic analysis to examine the experiences of eight international students from collectivist cultures, focusing specifically on what they perceived to be helpful or hindering to their ability to feel

comfortable, supported, and understood during an analogue counselling session. The findings of this study suggest that it is possible to form strong therapeutic relationships with international students, but achieving this requires a number of special considerations from the therapist regarding the way they conduct counselling, such as finding ways to connect with the client's culture and being mindful to avoid conducting the counselling session at a fast pace.

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