

**Client factors and working alliance: A preliminary study in  
Career Construction Counselling**

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Funding statement: This work was supported by the Portuguese Foundation for Science  
and Technology (grant number UIDB/04007/2020)

Data Availability Statement - The data that support the findings of this study are available  
from the corresponding author, [PC], upon reasonable request.

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**Abstract**

This study aims to identify the client factors that predict working alliance in career construction counselling. The sample included 49 Portuguese participants (34 females). A demographic questionnaire collected information about clients' gender, age and educational level. Distress was assessed using the Outcome Questionnaire-45. The strength of working alliance was measured by the Work Alliance Inventory-Short and Revised at the end of both the first and the last career counselling sessions. Multiple regression analyses were computed to test whether client characteristics (gender, age, educational level and distress) predicted the strength of the working alliance. Client distress and low educational level were found to be significant predictors of working alliance strength in both the first and last counselling sessions.

Keywords: Working alliance; Career Construction Counselling, Distress; Educational Level

## **Client factors and working alliance: A preliminary study in Career Construction Counselling**

Career Construction Counselling (CCC; Savickas, 2019a) is a narrative counselling approach that assists clients in revising their life story/career micronarrative in order to facilitate career decision-making. CCC takes place in three phases. In the first, counsellors invite clients to formulate their problem and explore their adaptability resources and they then apply the Career Construction Interview (CCI; Savickas, 2019). This semi-structured tool explores five topics about clients' life themes, that is, core life problems and the solutions sought for these issues (Csikszentmihalyi & Beattie, 1979). The topics are: (1) role models to evoke self-concept dialogues; (2) favourite tv programs, magazines and sites to reveal manifest interests; (3) a favourite story from a book or a movie to analyse how clients plan to resolve the career problem; (4) sayings or mottos to reflect on the advice that clients give themselves; and (5) early recollections to explore clients' perspective on current career issues. During the second phase, the answers to CCI are explored to foster the writing of a new career narrative and the elaboration of fresh career plans. The third phase consists of drawing up a step-by-step career plan and the evaluation of changes achieved (Cardoso et al., 2019). To facilitate client change, the counsellor takes on the role of co-constructor of meaning by trying to assume a participatory attitude in their experience, helping them to express freely the subjective career experiences, to explore the emergent representations and construct new meanings (Savickas, 2019a). This view of the CCC process makes the counselling relationship central to meaning making, since only a strong and secure counselling environment can enable the free exploration of clients' personal experiences and the adoption of new perspectives on self-experience and career challenges.

Despite its relevance to the CCC process, as far as we know, only one study (Taveira et al, 2017) to date has looked at the counsellor-client relationship during CCC. As part of a project investigating the evolution of this relationship during CCC and its determinants, in this research we examine various client factors and their relationship to the CCC working alliance strength. In so doing, this study contributes to both CCC theory and practice. The potential contributions can also extend to most current career counselling practices, emphasising the intersubjective process of career construction.

### **Client factors and working alliance in Career Construction Counselling**

Working alliance can be defined as mutual trust built up between client and counsellor throughout the intervention process. Its multidimensional nature is composed of the quality of the client-counsellor bond as well as agreement regarding counselling goals and tasks (Bordin, 1979). Based on a literature review, Whiston et al., (2016) estimated a correlation effect of .30 (medium effect) between working alliance and career counselling outcome, in line with psychotherapy research (Flückiger et al, 2018). Consistent findings (Whiston et al., 2016) demonstrating the contribution of working alliance to career counselling outcomes suggest that looking into client factors as they relate to working alliance is an important line of research.

Client factors are those characteristics brought into counselling or psychotherapy that influence psychological interventions (Beutler & Consoli, 2003). These include demographic aspects (e.g., age, gender, race, SES), attitudes and expectations about the intervention (e.g., positive or negative), and level of distress (e.g., problem severity, problem complexity). The few studies investigating the relationship between client factors and working alliance in career counselling have focused merely on client distress and have reported somewhat inconsistent findings. Heppner and Hendricks (1995) found that working alliance was stronger with an undecided client who benefited from a

shorter intervention than that of an indecisive client experiencing additional complex issues underlying career decisions and who, therefore, would benefit from a longer intervention. Later, Rochlen et al.(2004) found no significant differences between “undecided/distressed” clients and “uncertain/minimal distress” ones regarding their perceived working alliance. Career issues may also involve maladaptive relational patterns (Savickas, 2019b; Solomone, 1982) that may explain the greater sensitivity of distressed clients to the quality of the working alliance. Overall, these results are inconsistent with the expectation that interventions with distressed clients imply a stronger therapeutic alliance, as they tend to be longer and more similar to psychotherapeutic interventions (Heppner & Hendricks, 1995; Salomone, 1982). This expectation is supported by psychotherapy research indicating, for example, that conditions such as baseline severity (Zilcha-Mano, & Errázuriz, 2015) or chronicity (Hendriksen et al., 2014) of psychopathology symptoms, as well as the presence of personality pathologies (Falkenstrom et al., 2013) or interpersonal problems (e.g., Ollila et al., 2016) are related to stronger working alliance. More recently, however, Kivlighan et al. (2019) concluded that early client distress was not related to working alliance. These inconsistent results may arise from the use of a variety of methods and designs, but also from the fact that other client variables, besides distress, may be influencing the strength of the therapeutic alliance.

In fact, demographic characteristics such as client gender, age and educational level have not been studied in relation to working alliance, despite their relevance for career development. What is worse, few researchers have examined the role of clients’ demographic factors in explaining career counselling or psychotherapy outcomes. From their literature review, Whiston and Rose (2015) concluded that men attach more stigma to career counselling than women do, and that younger people are more likely to use

such services. Perdrix et al., (2012) found that age was relevant in the effectiveness of long-term career counselling, since younger clients' career decision-making difficulties had decreased more significantly than those of older clients one year post intervention. To our knowledge, no study has yet investigated the role of educational level in career counselling effectiveness. However, Constantino et al. (2017) found that patients with higher educational levels and those reporting stronger early working alliance registered more rapid decreases in depression from psychotherapeutic processes. These findings were interpreted as resulting from higher educated patients' positive expectations regarding psychotherapy and/or the expectation of being "similar to and attuned with their highly educated therapist counterpart" (Constantino et al., 2017, p. 132). It was also speculated that lesser educated patients may have started with fewer specific expectations regarding the intervention, which might favour their reactance to early interpersonal experiences.

Massoudi et al., (2008) called for more research on the relation between client characteristics and working alliance in counselling. Thus, ours is a preliminary study analysing the role of client factors such as age, gender, educational level and distress in predicting the strength of working alliance in career construction counselling (Savickas, 2019b). Based on previous findings, we expected that gender (higher working alliance for women), low age, high educational level and high distress would explain the strength of working alliance.

## Method

### Participants

**Clients.** The sample included 49 Portuguese participants (15 men, 34 women) aged between 17 and 52 ( $M = 25.5$ ;  $SD = 8.80$ ). Among these, one (2%) had merely finished Year 9, 10 (20.4%) had concluded Year 10, nine (18.4%) had finished secondary school (grade 12), while 17 (34.7%) had a bachelor's degree, 5 (10.2%) had their master's, and six (12.3%) were doctoral students; one (2%) was a postdoctoral fellow. Participants' career concerns included the need: to clarify educational/occupational goals, to make sure they had made the right course choice, to construct alternative career plans to manage career barriers, or to transition to new jobs where they might find greater satisfaction.

**Counsellors.** Five psychologists participated in this study: two career counsellors working at university career services, each of whom had more than five years' experience; an educational psychologist working in a secondary school with 26 years' career counselling experience; and two psychotherapists in private practice, with two years' career counselling experience.

### Measures

**Demographic information.** A brief questionnaire collected data about age, gender, education and occupational status. Client career issues were addressed with the question, "What career concerns would you like to solve?"

**Working Alliance Inventory--Short and Revised (WAI-SR, Hatcher & Gillaspay, 2006).** Twelve items assessed clients' perception of working alliance according to three dimensions (Bordin, 1979): (a) Goals - agreement about intervention goals (WAI-G), (b) Tasks – agreement about counselling tasks (WAI-T), and (c) Bonds

- the bond between the client and counsellor (WAI-B). Cronbach alphas for each subscale have been found to range from .85 to .90 and for the scale as a whole have been between .91 and .92 (Hatcher & Gillapsy, 2006). In the Portuguese version (Ramos, 2008), clients rated their perception of working alliance quality on a 5-point scale ranging from 1 (rarely) to 5 (always). Internal consistency was found to be .85 for the total score (Ramos, 2008). In the present study, Cronbach alpha values at T1 were .81 for the total scale and .65, .74, and .68 for the subscales of WAI-G, WAI-T and WAI-B, respectively. At T2 Cronbach alphas were .88 for the total score and .60 (WAI-G), .70 (WAI-T) and .86 (WAI-B).

**Outcome Questionnaire-45** (OQ-45.2; Lambert et al., 1996, 2004). Client distress was assessed using a 45 item, five-point scale ranging from 0 to 4. Extensive research has revealed the good psychometric qualities (reliability and validity) of this measure (Lambert et al., 2004). The Portuguese version (Machado & Fassnacht, 2014) used has adequate psychometric properties for the total score ( $\alpha = .90$ ). A suggested cut-off of .62 was used for the Portuguese version in this study. Reliability coefficient in this study was  $\alpha = .91$  (T1).

## **Procedures**

**Recruitment.** Initially, the study was approved by the ethics committee of the University of Minho (CEICSH 108/2019). Following permission from the secondary school administration, an educational psychologist invited secondary students who needed career counselling to participate in the research. University participants were recruited on a university career counselling website. Finally, adults were found via Facebook. All participants were informed of the nature of the study and the confidentiality of their answers, and all provided their informed consent. Parents' informed consent was also obtained for the secondary school participants.

**Data collection and intervention.** The demographic information and the OQ-45 were administered one week prior to the intervention. Working alliance was then assessed at the end of the first (T1) and last (T2) career counselling sessions. Participants received between three to five ( $M = 3.42$ ;  $SD = .69$ ) weekly 50-minute Career Construction Counselling sessions (CCC; Savickas, 2019a). The intervention followed the three previously described phases of CCC (Savickas, 2019a).

### Results

Participants were classified according to their clinical distress levels at precounselling (T1). The Portuguese OQ-45 identified that 19 (38.8%) precounselling participants scored in the functional range, whereas 30 (61.2%) were found to be non-functional. Descriptive statistics and correlations were computed for predictors (client gender, age, education level and distress) and working alliance at T1 and T2 (Table 1). With the exception of gender, client factors related significantly to the different measures of working alliance.

[Insert Table 1]

Using multiple regression, we examined the relationship between client factors and working alliance, specifically whether said characteristics statistically predicted the strength of working alliance at both T1 and T2, as assessed both globally and via the three WAI subscales of goals, tasks and bond. Predictors investigated were participant gender, age, educational level, and the presence of significant distress (scoring equal or above the cut-off). Variables were standardised before running the analyses. Bootstrapping (with 1,000 samples to build 95% confidence intervals) was used to test significance levels. Neither the eigenvalues, condition index, variance inflation factor, nor the tolerance values indicated any hint of multicollinearity.

The results showed that low educational level ( $B = -.34$ ,  $SE = .19$ ,  $p < .10$ , 95%  $CI [-0.677, -0.20]$ ) and scoring equal or above the distress cut-off ( $B = .35$ ,  $SE = .13$ ,  $p < .05$ ; 95%  $CI [0.115, 0.555]$ ), but neither gender nor age, statistically predicted working alliance strength according to the WAI-total score at T1 ( $R^2 = .36$ ,  $F = 6.08$ ,  $p < .001$ ). Findings also suggested that low educational level ( $B = -.48$ ,  $SE = .16$ ,  $p < .01$ , 95%  $CI [-0.792, -0.202]$ ) and distress at or above the cut-off ( $B = .35$ ,  $SE = .13$ ,  $p < .05$ ; 95%  $CI [0.002, 0.481]$ ), but neither gender nor age, statistically predicted the working alliance strength assessed by the WAI-G at T1 ( $R^2 = .33$ ,  $F = 6.81$ ,  $p < .001$ ). Moreover, distress levels at or above the cut-off ( $B = .25$ ,  $SE = .14$ ,  $p < .10$ ; 95%  $CI [0.007, 0.459]$ ), but not educational level, gender or age, statistically predicted the WAI-T working alliance strength at T1 ( $R^2 = .26$ ,  $F = 3.82$ ,  $p < .01$ ). Distress at or above the cut-off ( $B = .39$ ,  $SE = .14$ ,  $p < .05$ ; 95%  $CI [0.132, 0.612]$ ) statistically predicted the T1 WAI-B working alliance strength ( $R^2 = .27$ ,  $F = 3.97$ ,  $p < .01$ ), while educational level, gender and age did not.

Low educational level ( $B = -.32$ ,  $SE = .16$ ,  $p < .05$ , 95%  $CI [-0.654, -0.107]$ ) and scoring equal to or above the distress cut-off ( $B = .31$ ,  $SE = .13$ ,  $p < .05$ ; 95%  $CI [0.053, 0.547]$ ) statistically predicted the T2 working alliance strength; gender and age, however, did not. Additionally, findings indicated that low educational level ( $B = -.37$ ,  $SE = .14$ ,  $p < .01$ , 95%  $CI [-0.674, -0.154]$ ), lower age ( $B = -.29$ ,  $SE = .17$ ,  $p < .05$ ; 95%  $CI [-0.626, 0.086]$ ), but not gender or scoring at or above the distress cut-off, statistically predicted the working alliance strength assessed by the WAI-G at T2 ( $R^2 = .35$ ,  $F = 5.84$ ,  $p < .001$ ). Results suggested that none of the client variables statistically predicted T2 WAI-T working alliance ( $R^2 = .13$ ,  $F = 1.60$ ,  $ns$ ). Finally, low education level ( $B = -.34$ ,  $SE = .15$ ,  $p < .05$ , 95%  $CI [-0.654, -0.126]$ ) and scores equal to or above the distress cut-off ( $B = .41$ ,  $SE = .14$ ,  $p < .005$ ; 95%  $CI [0.149, 0.6136]$ ) were found to

statistically predict the working alliance strength assessed by the T2 WAI-B ( $R^2 = .27$ ,  $F = 3.97$ ,  $p < .01$ ) ( $R^2 = .34$ ,  $F = 5.73$ ,  $p < .001$ ), but gender and age were not.

### **Discussion**

In this study we examined whether and to what extent client age, gender, educational level and level of distress predicted working alliance strength in CCC. Distress was found to be the main predictor of working alliance in both the first and last career counselling sessions. Low educational level was also a significant predictor of working alliance strength. These results do not align with previous ones (Heppner & Hendricks, 1995; Rochlen et al., , 2004) in which no significant relationship between client distress and career counselling working alliance was found. However, our findings are consistent with psychotherapy results suggesting that the outcome and working alliance relationship might be moderated by the presence of and baseline severity of distress (Zilcha-Mano, & Errázuriz, 2015; Falkenstrom et al., 2013; Hendriksen et al., 2014).

The fact that higher distress levels predicted working alliance strength may be explained by the sensitivity and investment of these clients in interpersonal relationship with counsellors. In other words, psychosocial difficulties underlying clients' career issues may lead them into a more robust working alliance. Experiencing security and acceptance during career counselling, in contrast to previous relational experiences, might contribute to their investment in this new interpersonal relation and therein boost the working alliance strength.

Low participant educational level was also a significant predictor of working alliance strength at both assessment moments, a result inconsistent with psychotherapy findings (Constantino et al. 2017). However, as in the study of Constantino et al, participants' expectations regarding career counseling can explain the present results. In Portugal, career interventions are more frequently sought out by junior and secondary

school students. Thus, low educational level (and younger) participants may have expectations about the process that foster working alliance strength. This hypothesis is supported by simultaneously considering two of our results: regardless of client distress, at T2, low educational level and younger age predicted the counselling goal agreement aspect of working alliance; the correlation between age and educational level is significant and positive.

### **Limitations and research implications**

The present study has some limitations. Firstly, the sample size was relatively small, which has implications for the power of the analyses. Secondly, only selected client factors were investigated. Thirdly, session numbers were reduced, which may explain why T1 and T2 working alliance strength predictions were so similar. Based on our data together with career counselling research showing the increase in working alliance throughout the intervention (Heppner et al., 1998; Multon et al., 2001), it can be expected that longer interventions may lead to greater differences in working alliance from T1 to T2. Thus, the fourth limitation of the study resulted from not taking into account the effect of process variables in the working alliance, namely, the length of the intervention.

The preliminary nature of this study suggests the need of additional research to replicate the relation between client distress and working alliance using larger samples and a greater number of client factors. Future investigations should also consider the relationships between the strength of working alliance and process outcomes.

Qualitative research would also deepen our understanding of this relationship, particularly regarding significant working alliance events with distressed clients during career counselling. Finally, our findings also suggest the importance of more research into the relation between client career counselling expectations and working alliance.

### **Implications for practice**

Despite being just one first step towards understanding the role of client factors in working alliance, this study has some practical implications. Our results suggest the importance of counsellors' attention to client distress patterns and to adjusting the process to address clients' working alliance needs. Thus, from the very start of the intervention, counsellors should take into account interpersonal markers like dependency and avoid controlling the client's career decisions (Savickas, 2019b). With distressed clients, the rigidity of interpersonal functioning facilitates the emergence of such markers which might be used to adjust the intervention to clients' needs and thereby strengthen the working alliance. Counsellors should also explore client expectations regarding career counselling while formulating their career problems. For example, asking clients "How can *we* solve the problems you talked about?" opens the opportunity to explain career goals and tasks in close association with clients' unique issues, which is relevant to fostering working alliance strength. Moreover, the use of the word "we" implicitly defines the process as a collaborative one where both counsellor and client agree to work together on the target career issues.

### **Conclusion**

In career counselling the growing focus on processes of meaning construction has fostered research on the role played by the working alliance in these practices. Despite such interest, there are few studies analysing the relationship between both counsellors and clients' factors and the quality of the working alliance. By showing that clients' distress and low educational level predict the strength of the working alliance, this study goes further in the research on the process of career counselling. More research in this area will be relevant for an updated view of career counselling as an intersubjective

process, that is, a relational process where meanings are constructed in the context of the interaction between counsellors and clients.

Data Availability Statement - The data that support the findings of this study are available from the corresponding author, upon reasonable request.

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Table 1 Means, Standard Deviations, and Pearson Correlations in time 1 and time 2

Variables	<i>M</i>	<i>SD</i>	1	2	3	4	5	6	7	8	9	10	11
1. Gender			-										
2. Age	25.45	8.80	.07	-									
3. Educational level	13.94	2.39	.13	.35*	-								
4. Distress			-.11	-.07	-.06	-							
Time 1													
5. WAI	40.88	9.43	-.10	-.34*	-.42**	.39**	-						
6. WAI-Goals	14.06	3.49	-.17	-.29*	-.54**	.31*	.88**	-					
7. WAI-Tasks	13.27	3.39	-.04	-.41**	-.26	.29*	.86**	.68**	-				
8. WAI-Bond	13.55	3.97	-.06	-.20	-.30*	.42**	.87**	.64**	.59**	-			
Time 2													
9. WAI	46.90	10.06	-.06	-.33*	-.39**	.35*	.84**	.68**	.66**	.83**	-		
10. WAI-Goals	16.55	2.78	-.12	-.42**	-.47**	.25	.79**	.72**	.63**	.70**	.92**	-	
11. WAI-Tasks	16.25	2.96	-.07	-.31*	-.20	.14	.63**	.45**	.65**	.55**	.83**	.77**	-
12. WAI-Bond	14.10	5.44	-.00	-.23	-.37**	.44**	.80**	.65**	.54**	.88**	.93**	.77**	.60**

Note: WAI = Working Alliance Inventory; WAI-Goals = WAI subscale of goals; WAI-Tasks = WAI subscale of tasks; WAI-Bond = WAI subscale of bond

\* $p < .05$ . \*\* $p < .01$ .