

The Relationship between Vicarious Trauma and Self-Efficacy among Trainee Counsellors At A Public University

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Abstract

An efficient counselling session depends on the counsellor's self-efficacy. The counsellor's self-assurance when conducting counselling sessions with clients has an impact on how well he uses counselling techniques. The stories that counsellors frequently hear, however, can also have a negative impact on their self-efficacy and result in less effective counselling. At a public university, a study was done to determine the extent of vicarious trauma, self-efficacy, and the relationship between the variables. In this descriptive-correlational study, random sampling was employed, and the data was analysed using correlation analysis. A total of 90 respondents were surveyed, a combination of six cohorts from two programmes (Bachelor of Education in Guidance and Counselling and Bachelor of Counselling). This study utilised established instruments such as (The Vicarious Traumatization Questionnaire, 2021; The Counselling Self-Evaluation Inventory, 1998). The study's findings indicate that trainee counsellors' vicarious trauma is mild, with an average of 1.72 and a standard deviation of 0.47. They also have a moderate level of self-efficacy, with a mean of 2.03 and a standard deviation of 0.18. Accordingly, the study's results indicate a substantial negative correlation between trainee counsellors' self-efficacy and vicarious trauma ($r = -0.245$). This means self-efficacy decreases as vicarious trauma increases. The analysis above leads to the conclusion that personal traits like vicarious trauma and counselling self-efficacy do have an interdependent relationship. In conclusion, trainee counsellors need to find assistance to help them heal and develop effective self-care during their years as trainees in order to maintain or grow their self-efficacy.

Keywords: Vicarious Trauma, Self-Efficacy, Trainee Counsellors

Introduction

According to Ruhaini's (2012) study, the development of trainee counsellors is important to ensure that they can fully fulfil their responsibilities as counsellors. Previous research shows that trainee counsellors who have low confidence in giving advice will experience anxiety, especially at the beginning of counselling training (Khattar & Gawali, 2014). When dealing with clients, counsellors face difficulties in handling counselling, especially trainee counsellors (Alis et al., 2017). However, there are other factors that contribute to the low self-efficacy of counsellors and affect the quality of counselling services, motivation, performance, and job satisfaction (Aliyev & Tunc, 2015). Research shows that the level of self-efficacy of trainee counsellors among undergraduate students is lower than the level of self-efficacy of trainee counsellors among master's and doctoral students (Haktanir, 2020). Research on 235 trainee counsellors conducted online shows that self-efficacy in handling counselling is influenced by supervisory working alliance, self-compassion, and anxiety in performing clinical tasks (Tsai, 2015). According to Seay (2015), among the development factors in self-development are self-differentiation and counselling experience. At the same time, it also influences the counsellor's self-efficacy. The self-efficacy of trainee counsellors can also be influenced by the client's condition, whether the client is challenging or not (Noor et al., 2018).

According to Sartor (2016), a career in counselling requires counsellors to help clients in building meaning, retelling, or facing traumatic situations so that counsellors can deal with vicarious trauma. Therefore, counsellors or social workers need to control empathy so as not to get too attached to the client's problems (self-care, vicarious traumatization, and burnout, 2022). This is because working with victims of disasters, victims of sexual abuse, and victims of war and violence will produce trauma thoughts if not treated (Mattison, 2012). Self-efficacy is important for the counsellor's health after a traumatic situation (Cieslak et al., 2013). Bandura (1997) explained that self-efficacy distinguishes individuals in terms of feelings, thoughts, and behaviour. Self-efficacy helps counsellors with basic helping skills, session assignments, dealing with challenging counselling situations, and presenting issues (Trinjhna & Gautam Gawali, 2014). Research shows that individuals exposed to vicarious trauma have low self-efficacy (Sartor, 2016). This study will examine the relationship between vicarious trauma and self-efficacy among trainee counsellors at a Public University. Next, research that focuses on this country will be able to assess the need to deal with trauma and give awareness to other individuals so that they can control this problem because there are many studies like this from abroad.

Literature Review

The term vicarious trauma was introduced in 1980 as a branch of PTSD (Mattison, 2012). Vicarious trauma symptoms are similar to PTSD but only affect the individual emotionally through the trauma of another person (Mattison, 2012). Figgley describes vicarious trauma as the accumulation of negative effects when working with traumatised individuals, resulting in disruption of the therapist's feelings, cognitive schemas and worldviews, memories, self-efficacy, and sense of security. Stamm (2010) defines vicarious trauma as a component of compassion fatigue and power fatigue. This is because vicarious trauma is the effect of being around psychological trauma experienced by other individuals.

According to Bandura (1993), self-efficacy is an individual's confidence in their ability to complete a task. A person's performance is not limited to knowledge and skills but to confidence in one's abilities (Bandura, 1998). Bandura and Locke (2003) explained that the level of self-efficacy can predict individual behaviour. A high level of self-efficacy is very important when working with individuals who have experienced trauma because they are faced with the risk of continued cognitive impairment (Sartor, 2016). Thus, Garrido (2020) emphasises that there are several factors that influence the development of self-efficacy, such as personal performance, vicarious experience, social persuasion, emotional state, and psychology. Overall, self-efficacy is important for achieving life goals (Celestine, 2022).

Among the theories used in this study are Constructivist Self-Development Theory and Social Cognitive Theory. Constructivist Self Development Theory (CSDT) by McCann and Pearlman (1990) combines Object Relations Theory, Self-Psychology, and Social Cognitive Theory. According to this theory, a person's cognitive schema is formed by beliefs and expectations about oneself and others that can reflect identity, worldview, and psychological needs. Among the five psychological needs emphasised in this theory that can affect an individual's response to trauma are (a) safety needs, (b) self-esteem needs, (c) intimacy needs, (d) trust, and (e) need for control. Thus, stressful and traumatic events can interfere with the individual's development of reality and interfere with those needs. The impact of the event will affect a person's life experience through cultural and social aspects. Counsellors or therapists who work with victims of traumatic events are at risk of experiencing vicarious trauma and interfering with their needs. Meanwhile, awareness of the effects of trauma can modify certain aspects of oneself, such as aspects of the frame of reference for oneself, self-ability, ego resources, central psychological needs, perception, and memory systems.

Social Cognitive Theory, developed by Bandura (1977), explains how individuals shape and are shaped by the environment. A triadic reciprocal causal model is proposed to explain the dependent relationship between behaviour, internal factors, and the external environment. Bandura (1997) explained that self-efficacy, which is an individual's confidence in his abilities, will be influenced by three components in the model. Bandura (1977) emphasised four mechanisms for acquiring self-efficacy. The first is performance achievement, referring to the individual's ability to complete tasks. Under the counselling lens, the success of the counselling session can increase the counsellor's confidence in his abilities. Second, vicarious experience refers to the ability to see others face challenges without experiencing adverse effects on oneself. Next, this experience gives the observer the expectation of making efforts like the individual. Third, verbal persuasion involves positive encouragement and verbal support to strengthen the individual's confidence to achieve the goal of overcoming challenges. Lastly, emotional stimulation involves the use of physiological information to identify self-confidence.

In short, vicarious trauma affects each individual differently and, in turn, contributes to their self-efficacy. So, knowing the extent to which the level of vicarious trauma exists and the level of self-efficacy can help improve the quality of counselling services among trainee counsellors.

Purpose of Study

Among the objectives of this study is to investigate the relationship between vicarious trauma and self-efficacy among trainee counsellors at a Public University. This study will examine whether there is a relationship between the level of vicarious trauma experienced by trainee

counsellors and the level of self-efficacy they have. At the same time, understand the effect of vicarious trauma on the self-confidence and confidence of trainee counsellors in their own ability to solve problems.

Research Methodology

Population and Sample Size

In this study, the target population consisted of 168 Bachelor of Counselling and Bachelor of Guidance and Counselling Education students at a public university in Selangor. Sampling based on non-probability was chosen as a sampling technique, which means that researchers do random sampling (convenience sampling). The researcher selected the sample using Raosoft's online random number generator by entering the number 168 (population size) and got as many as 84 respondents as needed. The margin of error determined by the researcher is 5%. In this study, the researcher determined a confidence level of 80%. The determination of the sample size in this study is determined using G* Power software because it takes into account the objectives of the study involving inferential statistics. The required sample size for the study is 84 respondents. Researchers have determined the factors needed to perform this analysis, such as the alpha value, effect size, and power value. In order to avoid the error of rejecting the correct null hypothesis (Type I error), an alpha value of .05 has been set. Researchers set medium effect sizes at the .3 level for all analyses. The power value is set at .80, as suggested by Cohen (1992), to avoid the error of failing to reject a false null hypothesis (Type II error). Based on the following two methods, the appropriate sample size for a population of 168 people is 84 respondents. However, according to Lazar et al (2017), more sampling (oversampling) can increase validity, making the final total sample size 90 people.

Instruments

The questionnaire used in this study is divided into parts A, B, and C, as stated below.

Part A: Demographics of Respondents

The first purpose of this survey is to gather information or data about the background of the respondents. There are five basic items related to demographics: (i) age, (ii) gender, (iii) year of study, (iv) number of sessions conducted with clients outside of the counselling field, and (v) sources referred to by respondents when facing a crisis in life.

Part B: Vicarious Traumatization Questionnaire

Data about the respondent's vicarious trauma was obtained using the Vicarious Traumatization Questionnaire in the Malay version developed by (Norhayati et al., 2021). This questionnaire consists of 38 items, which are divided into two parts: physiological (11 items) and psychological (27 items). The psychological section is further divided into four sub-sections, namely emotions (9 items), behaviour (7 items), cognitive (5 items), and life beliefs (6 items). This questionnaire uses a scale ranging from 0 (never) to 5 (always). The higher the score, the higher the level of vicarious trauma. Rasch analysis was used to measure validity and reliability. All 38 items show high reliability (.97) and separation (5.36), while good person reliability (.95) and person separation (4.58). The second level of analysis uses verification factors using structural equation modelling, and there are four items that are difficult for respondents to answer. The researcher confirmed the final model of confirmatory factor analysis, showing that 38 items have acceptable factor loading.

Part C: Counselling Self-Estimate Inventory

Respondents' self-efficacy information was obtained using the Counselling Self-Estimate Inventory by (Larson and Daniel, 1998). Self-efficacy in trainee counsellors is measured by their confidence in performing counselling-related behaviours or cognitive or affective activities. 37 items in this questionnaire are marked according to a scale of 1 (strongly disagree) to 6 (strongly agree). All items are divided into five categories: micro skills (12 items), process (10 items), difficult client behaviour (7 items), cultural competence (4 items), and value awareness (4 items). The overall reliability of the inventory is $\alpha = .93$, indicating that all items are reliable. The score range of this questionnaire is between 37 and 222; the higher the score, the higher the level of counselling efficiency.

Procedure

After the research proposal paper is approved by the supervisor, the researcher collects the necessary documents and sends them to the Ethics Committee for Research Involving Human Subjects (JKEUPM) for a more in-depth review before conducting the study. After obtaining approval from JKEUPM, the researcher distributes the questionnaire to the respondents. The questionnaire contains three parts, namely, respondent demographics, the Malay version of the Vicarious Traumatization Questionnaire, and the Counselling Self-Estimation Inventory that is physically distributed to respondents. This is to ensure that all respondents involved answer the questionnaire. The collected data was entered into SPSS software to analyse it.

Data Analysis

The questionnaire given to the study sample allows statistical data analysis to be done on the collected data. The collected data will be analysed based on research questions using the Statistical Package for the Social Sciences (SPSS) software. Next, the data will be analysed using two methods: descriptive statistics and inferential statistics. This data analysis process is generally more directed towards research questions and research hypotheses.

Findings

The level of vicarious trauma and Self-Efficacy among trainee counsellors

Based on Table 1, the analysis shows that 26 (28.9%) respondents showed a low level of vicarious trauma. In addition, 63 (70.0%) respondents showed a moderate level of vicarious trauma, and 1 (1.1%) respondent had a high level of vicarious trauma. For the self-efficacy variable, 87 (96.7%) respondents showed a moderate level of self-efficacy, and 1 (1.1%) respondent had a high level of self-efficacy.

Table 1

The level of Vicarious Trauma and Self-Efficacy

Variables	Level	Frequency	Percentage	Mean	Standard Deviation
Vicarious Trauma	Low	26	28.9%	1.72	0.47
	Moderate	63	70.0%		
	High	1	1.1%		

Self-Efficacy	Low	0	0.0%	2.03	0.18
	Moderate	87	96.7%		
	High	3	3.3%		

The Relationship between Vicarious Trauma and Self-Efficacy

Referring to Table 2 below, Spearman's Correlation analysis reveals that there is a negative relationship between vicarious trauma and self-efficacy among trainee counsellors at Public Universities ($r = -0.245$, $p < 0.01$). This value shows that the higher the vicarious trauma, the lower the self-efficacy, and vice versa. The findings of the study also show the moderate strength of the relationship between vicarious trauma and self-efficacy. According to Dancey and Reidy (2004), the value of the correlation coefficient r is between ± 0.20 and 0.29 , indicating weak relationship strength.

Table 2

The relationship between Vicarious Trauma and Self-Efficacy

Variables	Self-Efficacy
Vicarious Trauma	-0.245*

* $p < 0.01$

Discussion

In a study of trainee counsellors at a public university, it was found that 63 (70%) of them experienced vicarious trauma at a moderate level. Vicarious trauma refers to the negative effects experienced by individuals who work with traumatised individuals. The results of this study are in line with the findings by Aafjes-van Doorn et al (2020), who found vicarious trauma among trainee counsellors to be moderate. However, younger and less experienced individuals tend to experience higher levels of vicarious trauma. There is a difference with a study in the United Kingdom, where 70% of counsellors there are at high risk of secondary trauma (Sodeke-Gregson et al., 2017). This is due to previous traumatic experiences experienced by the counsellors. Training in social work is also associated with high levels of vicarious trauma and stress in industrial training settings.

Self-efficacy refers to an individual's confidence in his abilities and skills to perform tasks successfully. In this study, the focus is on the self-efficacy of trainee counsellors in conducting counselling sessions in various aspects. The results of the study show that as many as 95.8% of trainee counsellors at Public Universities have a moderate level of self-efficacy, with 69 people in this study reaching that level. This finding is different from a previous study by Noor et al (2018), which showed a high level of self-efficacy among counsellors in secondary schools, which may be due to gender factors and work experience. Another study by Mullen et al (2015) found a high level of self-efficacy among trainee counsellors. However, in this study, the moderate level of self-efficacy can be related to their lack of experience and student status, especially in the master's programme, as well as their young age. They are still in the learning process and do not have work experience.

In addition, this study found that trainee counsellors who experience a high level of vicarious trauma tend to have a low level of self-efficacy and are different from those who experience a low level of vicarious trauma and have a high level of self-efficacy. The findings of the study show a weak but significant relationship between the two factors. This finding is in line with the research of Sartor (2016), who found a negative and significant relationship between vicarious trauma and self-efficacy, where individuals with a high level of vicarious trauma tend to have a low level of self-efficacy. Other research also shows that health workers who face high stress when interacting with COVID-19 patients experience difficulties in decision-making, controlling emotions, and loss of self-efficacy, as well as secondary trauma (Vagni et al., 2020). Finally, a study on 185 counselling teachers measured secondary exposure to trauma and its relationship with self-efficacy, work burnout, secondary trauma, and job satisfaction. Rumsey (2017) found that self-efficacy and secondary trauma have a significant relationship with each other.

The results of the study of the relationship between vicarious trauma and self-efficacy show the importance of the theory presented. Vicarious trauma can be seen in Constructivist Self-Development Theory, where cognitive schema changes occur as a result of interaction with the client's story and the counsellor's personal character. In general, vicarious trauma experiences are normal adaptations faced by counsellors to the client's trauma story (Trippany et al., 2004). This irrational perception develops as a form of protection against traumatic emotional experiences, so it is important for counsellors to have good self-resilience to reduce vicarious trauma.

Further, Social Cognitive Theory explains the self-efficacy component of the study. Self-efficacy is determined by performance achievement, vicarious experience, verbal praise, and emotional response. If these factors interfere with a counsellor's ability to conduct counselling sessions, the level of self-efficacy will decrease. The findings of the study show that the higher the level of vicarious trauma, the lower the level of self-efficacy of the individual. The environment and the individual influence each other. Thus, the traumatic narration heard can influence the daily lives of other individuals.

The results of this study are important in understanding the impact of vicarious trauma on the self-efficacy of a counsellor, where the higher the level of vicarious trauma, the lower the level of a person's self-efficacy. Organisations and charities can provide a platform to help counsellors cope with the effects of secondary trauma in their work as well as design effective treatments to improve the quality of counselling services. The variables examined in this study increase awareness of the importance of counselling services as well as expand understanding about who should go for counselling for their own benefits. Ironically, trainee counsellors may not have much experience attending counselling as clients, for whatever reasons. Nevertheless, the trainee counsellors are in an environment where they might be at greater risk for experiencing vicarious trauma due to the nature of giving emotional support to clients who have endured emotional, physical, and psychological trauma. Therefore, this finding highlights the reason why counselling is not just for clients but also for future counsellors. Moreover, trainee counsellors with unfinished business due to vicarious trauma might be more vulnerable and hinder their own psychological recovery (Jimenez et al., 2021).

In addition, these findings also imply that counsellor educators and supervisors need to adopt a supportive teaching and learning as well as supervision strategies. Through supportive environment, trainee counsellor might be able to experience positive post traumatic growth. The faculties also may need to promote self-care practices to the trainee counsellors. Lu et al

(2017) found that as a result of exposure to trauma cases, participating counselling students expressed better self-efficacy, the significance of self-care, and greater motivation for learning. Trainee counsellors who experienced post traumatic growth will be able to talk about their developed viewpoints, their appreciation of life, and their empathy (Foreman et al., 2020). This growth will stimulate their motivation to learn more to become a competent professional counsellor. However, this study focus is limited to the understand the association between vicarious trauma and self-efficacy. Thus, this study recommends the future study to examine the nature of relationship between vicarious trauma, self-efficacy, self-care practices and motivation.

Conclusion

In this study, vicarious trauma and trainee counsellor self-efficacy have a significant relationship. Counsellors who experience high levels of vicarious trauma tend to have low levels of self-efficacy. Constructive Self-Development Theory and Social Cognitive Theory provide an understanding of vicarious trauma variables. Organisations and charities can provide support and treatment to help counsellors overcome secondary trauma and improve the quality of counselling services. Counselling services such as group counselling are important for counsellors to deal with secondary trauma and work effectively. Good responsiveness and external support are needed by counsellors to help others well.

Conflict of interest

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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