Single-Session Brief Counseling in a High School

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Counseling designed to be time-limited is a valuable tool for counselors in school settings. Three approaches to brief counseling were investigated in this naturalistic study: problem-focused with task, problem-focused without task, and solution-focused with task. Quantitative and qualitative measures were used to explore aspects of single-session brief counseling. High school students made significant changes from the second-week follow-up to the sixth-week follow-up in alleviating their concerns and increasing the percentage of goal achieved. Students dramatically decreased the intensity of undesired feelings from before the counseling session through the second follow-up. Solution-focused counseling was as effective as the other two approaches, while taking less time.

School counselors have traditionally used psychodynamic, humanistic, and behavioral theories as conceptual frameworks to help students explore and understand their problems and achieve their goals (Corey, 1991; Cormier & Cormier, 1985). One assumption underlying these theories is that counselors and clients have generous amounts of time to work together. However, elementary and secondary school counselors are aware that the number of sessions they can meet with students is often quite limited because of the large number of students they are expected to serve (Amatea, 1989). School counselors need counseling approaches that are specifically time-limited and thus appropriate for the reality of the severe time constraints they encounter daily.

ASSUMPTIONS UNDERLYING BRIEF COUNSELING

Beginning in the 1970s with the writings of Watzlawick, Weakland, and Fisch (1974) and continuing into the present (Budman, Hoyt, & Friedman, 1992; Cade & O'Hanlon, 1993; de Shazer, 1985, 1988, 1990, 1991; Fisch, Weakland, & Segal, 1982; Furman & Ahola, 1992; Koss & Butcher, 1986; O'Hanlon & Weiner-Davis, 1989), counselors and therapists increasingly have focused on approaches, strategies, and techniques to speed up the process of client change. O'Hanlon and Wilk (1987) and Walter and Peller (1992) have conceptualized brief counseling as a model with various stages for assisting people with change rather than as a theory of how people change. (The term *brief counseling* is used through this article even though much of the literature uses the term *brief therapy*. In a school setting, the term *counseling* is more descriptive and less threatening than the term *therapy*). A brief counseling model includes several key assumptions about how people who experience problems can make meaningful changes within shorter periods of time than with traditional psychodynamic approaches. The first assumption is that the problem that clients present when they enter counseling *is* the problem. Time will not be devoted to searching for an underlying, deeper, and more fundamental problem (O'Hanlon & Weiner-Davis, 1989). If counselors act on this assumption, then they can quickly focus on topics clients are most eager to discuss—their own problems—and avoid efforts aimed at convincing clients that the issues are really deeper and hidden. To act on this assumption is not to deny that counselors need to be aware that clients may have multiple

concerns and that, although the presenting problem is important to the client, other problems may be equally or more important and will require attention later.

A second assumption common to authors writing about brief counseling is that clients often have the necessary resources to resolve their problems, but they often are not aware that they have these resources (Haley, 1973). This assumption allows counselors to trust their clients to recognize, with assistance, internal and external resources that can be used to solve their problems.

A third assumption is that a small therapeutic change may be all that is necessary to break clients' recurring patterns of thoughts, feelings, and behaviors (de Shazer, 1988). Free to act with more intention, clients can experiment with, acquire, and incorporate new responses to life (Ivey, Ivey, & Simek-Morgan, 1993). To achieve a small therapeutic change, counselors and clients can focus on small goals because it is assumed that a minimal change can lead to profound and meaningful changes resulting in clients' satisfaction (Fisch et al., 1982).

Together, these three assumptions serve as guides for counselors using brief counseling. The assumptions point to aspects of the clients' experiences that may be explored, tapped, and used when making mutually agreed upon changes. Additional assumptions of brief counseling, less pertinent to this study, are presented in the writings of O'Hanlon and Weiner-Davis (1989) and Walter and Peller (1992).

LENGTH OF BRIEF COUNSELING

Historically, brief counseling is not one approach to helping, but many, and despite the adjective brief, it is not always short-term. At one end of the continuum are some forms of psychodynamic *brief* counseling that can last 15 or more sessions (Bloom, 1992; Garfield, 1989; Strupp, 1990). In the middle range of the continuum, counselors at The Brief Therapy Center (Mental Research Institute [MRI], Palo Alto, CA) use a problem-solving approach in which sessions are limited to 10 (Fisch et al., 1982). The Brief Family Therapy Center in Milwaukee averages from 5 to 7 sessions (de Shazer, 1988).

At the very brief end of the continuum, several authors have proposed counseling models that take but one session (Bloom, 1981; Hoyt, Rosenbaum, & Talmon, 1992; Littrell et al., 1992; O'Hanlon & Weiner-Davis, 1989). Talmon (1990) has provided empirical support for the effectiveness of single-session brief therapy in an outpa-

tient psychiatric setting. Brief counseling research projects directed by the senior author have provided evidence that single-session brief counseling is effective in a college setting with Hispanic-Americans students (Cruz & Littrell, 1995), and with students seeking tutoring services (Root & Littrell, 1995).

PROBLEM-FOCUSED VERSUS SOLUTION-FOCUSED BRIEF COUNSELING

Strategic brief therapy as originally conceptualized by Watzlawick et al. (1974) has been a problem-focused approach using four steps. In the first and second steps, the counselor spends time gaining understanding of the client's concern and exploring the client's attempted solutions. In the third step, the counselor and client work on a mutually agreed on goal that is specific and concrete. In the fourth step, the counselor assumes responsibility for choosing a task for the client to do. The task is designed to move the client in the direction of achieving a stated goal (de Shazer, 1985, 1988; Fisch et al., 1982).

Recently, a solution-focused approach to brief counseling has been advocated (de Shazer et al., 1986; Furman & Ahola, 1992; O'Hanlon & Weiner-Davis, 1989). With this approach, the counselor minimizes discussion of the problem situation, focuses on the client's goal, and designs a task to help the client reach the goal. In other words, a solution-focused approach minimizes or skips the first two steps of the problem-focused approach. There is to date but one family therapy study of the relative effectiveness of problem-focused versus solution-focused approaches (Adams, Piercy, & Jurich, 1991).

BRIEF COUNSELING WITH ADOLESCENTS

Most research on brief counseling has focused on adults in clinical settings (e.g., Budman & Gurman, 1988; Searight & Openlander, 1984; Talmon, 1990). Accounts of brief counseling with adolescents have been primarily anecdotal (e.g., Amatea, 1989; Chandler, 1983; Molnar & Lindquist, 1989). There have been no experimental studies of the effectiveness of brief counseling with adolescents in a school setting.

MEASURING CLIENT CHANGE

Weakland, Fisch, Watzlawick, and Bodin (1974) and de Shazer (1985) have used instruments designed to tap the variables believed to be important in brief counseling. Because the client is considered the person most knowledgeable about whether he or she has reached the goal, the focus is on the client's assessment. Brief counseling questionnaires have assessed clients' goal attainment in a straightforward manner. The instruments have content validity, but no measures of reliability have been presented.

RESEARCH QUESTIONS

The guiding question for the present study was, Is single-session brief counseling with two short follow-up sessions an effective and appropriate counseling model for school counselors? To answer the guiding question, five aspects of single-session brief counseling were explored:

1. *Types of students' concerns and their severity.* What are the types of concerns that are appropriate for single-session brief counseling? How severe are the concerns?

2. *Counseling approaches and outcomes.* What are the effects of different approaches to single-session brief counseling (i.e., problem-focused with task, problem-focused without task, and solution-focused with task) on (a) students' concerns, (b) students' achievement of their goals, and (c) changes in students' feelings, thoughts and actions?

3. *Concerns appropriate for brief counseling.* What student concerns are best addressed by a brief counseling approach?

4. *Goal setting.* What methods do counselors use to help students reach the goals that are set? What are the issues that pertain to these methods? What is the process of goal setting like? What are examples of goals that students set?

5. *Assigning tasks.* What issues arise when tasks are assigned?

Increasingly, brief counseling is cited as a means of assisting counselors who have heavy case loads. To date, little empirical evidence exists to support this recommendation. In addition, solution-focused counseling is a relatively new development in brief counseling, and studies are unavailable for assessing its impact on clients. Our study addresses these limitations and contributes to the brief counseling literature in two major ways. First, we conducted an empirical study of the effectiveness of brief counseling in a naturalistic setting with counselors who were seeing their typical number of clients. Second, we investigated the relative effectiveness of problem-focused versus solution-focused approaches to brief counseling.

METHOD

Students and Setting

The brief counseling research project was conducted at a large high school in an urban setting. The high school was representative of high schools in the upper midwest in terms of socioeconomic diversity and ethnic mix. An announcement soliciting objections to students participating in the study was conveyed to parents by an announcement about the project in a school newsletter; less than 1% of the parents indicated that they did not want their adolescent participating in the study. Because the students were seeking regular counseling services, the parental consent form was presented in this format. The Iowa State University Human Subjects in Research Committee approved this approach to informed consent.

Data for the counseling session and the two follow-up interviews were obtained for 61 students (29 female and 32 male) who voluntarily made appointments with their high school counselors to discuss problems. The majority of the students were freshman (38%) and sophomores (41%), with a smaller number being juniors (13%) and seniors (8%). The average age of students was 15.6 years (*SD* = 1.1). The sample included members of four ethnic and racial groups, proportionally representative of totals in the school: White-American, 89%; Hispanic-American, 5%; African-American, 3%; and Asian-American, 3%.

Training in Brief Counseling

One male and two female white counselors were trained in the methods of brief counseling. The three counselors, ages 40, 44, and 52 years, had 6, 13, and 29 years of experience, respectively. Over a period of 5 months, the researchers held monthly 2 hour training sessions with the high school counselors. The counselors were provided training notebooks with information about brief counseling, protocol sheets, and evaluation forms. During the monthly training sessions, the four steps in the brief counseling model were explained

and demonstrated. The counselors practiced the steps in role-play situations during the training and in sessions with their students between the training meetings. Practice sessions with students were audiotaped, and the researchers provided during supervision of the counseler both during the training sessions and with students. During the training period, the counselors learned the steps of the brief counseling model as well as how to record data. The counselors reported that it was quite easy to learn how to use the brief counseling model and that it fit nicely into what they already did while clarifying counseling and making it more streamlined. The emphasis on goal setting in the brief counseling model was cited as particularly useful to review and subsequently use.

Research Design

Research designs in real-life settings are often the product of negotiations between researchers and participants in a setting. Such was the case in our research. As researchers we wished to preserve, as much as possible, the spontaneity and realism of counseling in a high school setting so that external validity would remain high. Consequently, two decisions were made that preserved the naturalistic aspects of the high school experiment and avoided an analogue-type study.

The first decision was to respect the ethical choice of the counselors not to have a delayed-treatment control group. Although it would have been highly desirable from an experimental-design viewpoint to include such a group, the counselors seriously objected to this. They were unwilling to delay seeing students who sought their assistance.

The second decision was to have the student and counselor collaborate during all phases of the goal setting and goal assessment. During the latter, the students and counselors completed the evaluation forms together. We acknowledge that this procedure raises questions about the influence of the counselors on the students' ratings (e.g., students might skew their progress reports to please the counselors). We chose the joint evaluations for two reasons. First, the counselors in this field-based study requested immediate feedback about how helpful they were being to the student because they saw their relationship with the student transcending the experiment per se. Second, the mutual evaluation accurately reflects the information that a counselor might reasonably be expected to seek about the student's outcomes under nonexperimental conditions and within the context of a counseling relationship. As a reliability check on whether changes that students reported on the assessment forms corresponded to their reports to the counselors, the researchers collected qualitative data from a sample of students. In summary, both of these decisions reflect the difficulties and compromises necessary when conducting experimental research in a naturalistic setting.

Independent Variable

Students were randomly assigned to one of three groups: a problem-focused brief counseling approach with a task (Steps 1–4), a problem-focused brief counseling approach without task (Steps 1–3), and a solution-focused brief counseling approach with task (Steps 3–4). The problem-focused, single-session brief counseling was modeled on the four-step model proposed by Watzlawick et al. (1974) and expanded by Fisch et al. (1982). The four sequential steps were: (1) the counselor helped the student define a problem on which the student wanted to work; (2) the student's previously attempted solutions to the problem were delineated; (3) the counselor helped the student set a specific but minimal goal; and (4) the counselor as-

signed a simple intervention task to assist the client in reaching the goal (de Shazer, 1985, 1988). As part of the fourth step, the counselor assigned the student one of the following three tasks by saying: "Between now and when we meet for the follow-up interview in 2 weeks, I want you to (a) observe, so that you can describe to me, what happens in your life, family, relationship, school, etc., that you want to continue to have happen; (b) do something different, no matter how surprising, fun, enjoyable, or off-the-wall what you do might seem; or (c) pay attention to what you do when you overcome the urge to overeat, procrastinate, be depressed, etc." Students were informed that what they did could not be illegal, immoral, or harmful to themselves or others. On providing this qualification, the counselors observed that "knowing" smiles often illuminated students' faces.

The problem-focused approach without task, which formed a modified control group, was identical to the first approach except that the fourth step, assigning a task, was omitted. Students were told that setting a goal is often all that is needed in motivating a person to reach a goal. Although the goal setting (Step 3) of the problem-focused and solution-focused approaches was retained, no task was assigned by the counselor, as in the other two approaches.

The third approach to brief counseling was solution-focused. This approach was an abbreviated form of the first approach in that the third and fourth steps were retained, but the first two steps were eliminated or severely curtailed. Counselors began this form of brief counseling by focusing on helping the student set a goal. Next they assigned a task to help the student reach his or her goal. As was expected, some students wanted to discuss their problem (a Step 1 action). In these cases, the counselors guided the students back to goal setting as quickly as possible while still retaining rapport. The three brief counseling approaches all shared one step of the model in that each student set a goal. To have a treatment condition without goal setting would have rendered it impossible to determine students' progress toward their goals.

The problem-focused approach with task and the solution-focused approach with task were chosen as the most representative forms of problem- versus solution-focused approaches to brief counseling. Both of these approaches include a task to help the student achieve a goal. The third approach, problem-focused without a task, was included to serve as a control that helped assess the impact of the task.

Dependent Variables

Follow-up evaluations of the students' success in reaching their goals were conducted at 2- and 6-week intervals. These intervals allowed time for the students to make initial changes followed by time to determine whether these changes were maintained. In addition, the intervals fit the busy schedules of counselors and students. The research team modified instruments developed by Weakland, Fisch, Watzlawick, and Bodin (1974) and de Shazer (1985) for this purpose. The revised instrument was used to determine whether students differed in reaching the goals they set depending on the brief counseling approach to which they were assigned. The counselors judged that the instrument had content validity in that the questions were appropriate for measuring what they were intended to measure with this particular adolescent population. The reliability of students' responses was assessed through interviews by the senior researcher with 10 randomly chosen students (Ary, Jacobs, & Razavieh, 1990). Their reported changes were consistent with their evaluation forms and with the counselors' clinical assessments.

Three specific dependent variables were assessed in a quantitative manner. First, students answered the following: "During the counseling session you talked about a concern in the area of *(student's*

concern listed). Compared with the time of the first session, is the concern that you talked about . . . ?" The Likert-type rating scale ranged from (1) *much worse than before* to (7) *much better than before.*

Second, students answered, "During the counseling session you set a goal to _(student's goal listed)_. What percentage of the goal have you currently reached?" The percentages ranged from 0% to 100% at intervals of 10.

Finally, students answered, "The first time you answered the following questions, you listed some feeling words that described your feelings/emotions about a problem. Rate how intense these feelings are now. How strong are these feelings?" The Likert-type rating scale ranged from (1), *very weak, to* (7) *very strong.* The rating for each student was the mean of the feeling words they had listed earlier. Most students had three words. The student's earlier feeling words were provided at the follow-up sessions.

To understand the experience of brief counseling from the counselors' and students' perspectives, three qualitative measures were used. First, the senior author conducted interviews with the counselors during and after the research project. Counselors provided information about their experiences in using brief counseling during informal interviews and during training sessions that were audiotaped. Second, the senior author conducted structured interviews with 10 randomly selected students following the second follow-up session. Students shared perceptions of their brief counseling experiences. Third, during the two follow-up sessions, counselors collected phrases in the students' own words in answer to three questions that focused on the students actions, thoughts, and feelings. The basic question was, "What specifically are you currently *doing (thinking, feeling)* differently than you did when we first met?"

Procedure

After the counselors completed their training in brief counseling, they began counseling students as part of the experiment. Immediately before to the beginning of the counseling sessions, the counselors had students complete data forms. Students supplied basic demographic information, wrote a sentence or two describing the concern with which they wanted the counselor to help them, rated how much the concern bothered them, listed three feelings associated with the concern, and rated the intensity of each of these feelings.

While students were completing forms, the counselors consulted protocol sheets designed by the researchers to determine which of the three brief counseling approaches the students would receive. The choices, corresponding to the independent variable in the research, were (a) problem-focused single-session counseling with task, Counseling Steps 1–4; (b) problem-focused single-session counseling without task, Counseling Steps 1–3; or (c) solution-focused single-session counseling with task, Steps 3–4. The counselors were free to deviate from the protocol if a student's concern was clearly inappropriate for the assigned treatment approach or for single-session brief counseling. Two students with medical or severe psychological problems, (i.e., physical abuse and rather disturbed thought processes) were referred to appropriate professional helpers. Students were informed that the counseling sessions were voluntary and confidential. Counseling sessions averaged approximately 40 minutes but ranged from 20 to 50 minutes.

During the counseling sessions the counselors recorded the goals toward which the students were working. At the first follow-up meeting, scheduled approximately 2 weeks after the initial meeting, the student talked about 15–20 minutes with the counselor. At the second follow-up of approximately 5 minutes, the counselor discussed with the student the student's progress. During the follow-up sessions,

counselors and students jointly recorded the students' ratings on the dependent measures and discussed the students' movement in the direction of their goals.

Research Design and Data Analysis

To answer the research questions, quantitative and qualitative measures were used. An experimental design was selected to assess quantitatively the effects of brief counseling on various dependent measures. In addition, a qualitative methodology was used during semistructured interviews with students and counselors so as to understand their perceptions and experiences of brief counseling and to assess the reliability of students' evaluations of change (Lincoln & Guba, 1985; Marshall & Rossman, 1989).

A posttest-only, modified control-group design with completely randomized assignment to approaches was used. Two 3 x 2 (Treatment x Time) analysis of variance (ANOVAs) and one 3 x 3 (Treatment x Time) ANOVA with repeated measures were used to analyze the quantitative data. The level of significance for analyses was set at .05. Qualitative data were gleaned from counselor and student interviews and the research questionnaires.

RESULTS

Types and Severity of Concerns

What types of concerns do students choose to discuss when they know the counseling will be very time-limited and how severe are these problems? Students' concerns were classified by the researchers into four types of concerns: academic, 67%; personal, 18%; relationship, 10%; and career, 5%.

Students answered the question, "In general, how much does this concern bother you?" Students' mean rating of problem severity was 5.8 (*SD* = 1.2, mode = 7) on a 7 point scale that ranged from 1 = *very little* to 7 = *very much.* This was interpreted to mean that students were discussing concerns they perceived as bothering them considerably.

Counseling Outcomes

How effective were the three counseling approaches in (a) alleviating students' concerns, (b) helping students reach their goals, and (c) modifying the intensity of students' feelings?

Alleviating students' concerns. Overall, students at the first follow-up interview indicated that the concerns that they had talked about at the counseling session were better than before. As shown in Table 1, the means of students' concerns ranged from 4.35 to 4.89 on the 7-point scale at the first follow-up (1 = *much worse than before*; 7 = *much better than before*) with respect to counseling approaches. A score of 4 would indicate that the concern was the same as before. Continued positive changes that were statistically significant occurred between the first follow-up at 2 weeks and the second follow-up at 6 weeks, $F(1, 58) = 4.00, p = .05$. Concern scores ranged from 4.91 to 5.25 at the second follow-up.

The three brief counseling approaches did not differentially alleviate students' concerns, $F(2, 58) = .19, p = .83$. In other words, each approach worked about as well as the others with regard to alleviation of students' concerns. It is interesting to note that the group that was problem-focused without task (Steps 1–3) began as less effective than the other two counseling approaches but surpassed them at the second follow-up. Across all three approaches at the first follow-up, 54% of the students reported their concern as improved since the

TABLE 1
Means and Standard Deviations of Changes in Students' Concerns, Percentage of Goal Attained, and Intensity of Students' Feelings for Three Brief Counseling Approaches

Dependent variable/brief counseling approach	n	Counseling session		2-week follow-up		6-week follow-up	
		M	SD	M	SD	M	SD
Changes in students' concerns [a]							
Problem-focused with task (Steps 1–4)	19	NA	NA	4.89	1.10	5.05	1.03
Problem-focused without task (Steps 1–3)	20	NA	NA	4.35	1.23	5.25	1.16
Solution-focused with task (Steps 3–4)	22	NA	NA	4.86	1.13	4.91	1.19
Percentage of goal attained [b]							
Problem-focused with task (Steps 1–4)	19	NA	NA	63.68	31.26	73.95	22.52
Problem-focused without task (Steps 1–3)	20	NA	NA	52.25	27.55	62.00	26.91
Solution-focused with task (Steps 3–4)	21	NA	NA	68.09	24.21	76.91	18.61
Intensity of students' feelings [c]							
Problem-focused with task (Steps 1–4)	18	5.82	(1.10)	4.43	1.81	3.88	1.67
Problem-focused without task (Steps 1–3)	20	5.40	(.95)	3.70	1.42	3.33	1.27
Solution-focused with task (Steps 3–4)	22	5.65	(.94)	3.64	2.13	3.27	2.01

[a] *1 = much worse than before, 7 = much better than before.* [b] *Percentage ratings.* [c] *1 = very weak, 7 = very strong.*

time of the counseling session, 38% the same, and 5% worse. At the second follow-up, 69% of the students reported their concern as better, 23% the same, and 5% worse.

Goal attainment. All three brief counseling approaches were successful in moving students in the direction of their goals. Students significantly increased the percentage of their goals achieved from the first to second follow-up, $F(1, 57) = 8.46$, $p = .005$, across all three counseling approaches. The means of the percentage of goals reached with respect to the counseling approaches are shown in Table 1. The three approaches did not differ significantly in the percentage of goals achieved, $F(2, 57) = 2.71$, $p = .07$. Although not statistically significant, the mean percentage for the solution-focused brief counseling approach was the largest of the three, but at the same time, it accounted for the smallest difference of gain from the first to second follow-up (see Table 1). Across all three approaches at the first follow-up, 75% of the students had reached 50% or more of their goal, whereas at the second follow-up, 90% had reached 50% or more of their goal.

Modifying the intensity of student's feelings, thoughts, and actions. Students listed unpleasant or negative feelings associated with the concerns they wanted to discuss. Typical words used to describe their feelings about the problem were *worried, confused, nervous, frustrated, mad, scared, angry, upset, shocked, moody, depressed, weary, and stressed.* Students dramatically decreased the intensity of these undesired feelings from before to the counseling session through the second follow-up, $F(2, 112) = 63.81$, $p < .0001$. The mean ratings of student feelings with respect to the counseling approaches are shown in Table 1. Again, there were no significant differences among the three counseling approaches in the intensity of feelings students reported associated with their concerns, $F(2, 56) = 1.05$, $p = .36$, in that all three approaches did not differ among themselves at the counseling session or at the two follow-up sessions.

The senior author conducted evaluation interviews with 10 randomly selected students after the second follow-up session. These interviews served as a check on the data collected on the jointly completed assessment forms. The evaluations forms that the students completed and their verbal reports to their counselors and the senior author all essentially agreed on the changes that the students had experienced.

During interviews with the senior author, students stated the following about feelings that were different from when they first met the counselor: "I feel happier, better, more confident," "I'm happier," "relaxed, relieved," "I feel better about myself." The positive feelings tended to be more general than the typical words students first used to describe their feelings about the problem.

Four of the 10 students specifically mentioned that they were now thinking about their concerns in a different way. Typical student observations were "I see the course as being more important for my future," "I'm thinking I can do it," "I see the class as something I can pass," and "I'm thinking more logically now. I'm accepting what I couldn't before."

In addition to changes in feelings and thinking, typical statements about currently doing things differently from when they began counseling included: "I do go in for some extra help after school," "I'm trying harder—I tell her I need to talk to her," "I am applying myself (i.e., completing applications, generating lists)," "coming to school," "my attention in class has gone from 50% to 90%," "continuing to ask questions in class whenever I don't understand something," and "I'm smiling and ignoring people who make fun of me."

Concerns for Which Brief Counseling Is Applicable

The types of concerns expressed by the 10 students were representative of the concerns expressed by the sample in the study as a whole. Four students expressed academic concerns: two students had difficulty with algebra, one with biology, and one with concentrating in classes. Five students identified personal–social concerns. Two students expressed concerns in getting along with peers, two students experienced problems getting along with their parents, and one student reported difficulties understanding boy–girl relationships. A career concern related to future schooling was expressed by one student who needed additional financial resources. The researchers and the counselors viewed the concerns expressed by the students as typical of concerns that students expressed to the counselors.

With what types of students' problems did brief counseling work best? The counselors had personal conclusions based on their clinical judgments. They believed that single-session counseling was desirable for students' concerns that were developmental in nature

and that as counselors they were most effective using brief counseling for developmental concerns. The counselors found brief counseling appropriate for issues related to academic achievement such as test taking, time management, attending to task, and concerns about grades. Brief counseling also seemed to be an effective approach for dealing with behavioral problems and interpersonal relationships (e.g., friendships and family relationships). Several counselors used the brief counseling approaches with students who were involved in career decision making.

The counselors concluded that single-session brief counseling is not appropriate for all types of students' concerns, nor is it intended to be. They were in agreement that single-session counseling is inappropriate for crisis situations, such as potential suicide or physical abuse. However, the counselors reported that they found themselves using elements of brief counseling when students presented these types of issues.

Goal Setting

All the counselors found that, in general, the action-oriented approach of brief counseling helped the students become more actively involved in the counseling process and that students began to generalize the process to other decision-making situations. The counselors reported that a few students had difficulty in establishing a goal over which they had control and that was both positive and measurable. However, the counselors found that most students responded very favorably to the goal-setting step of brief counseling. As one counselor said, "The process enables students to identify if they are indeed wanting to change or stay the same. It is okay at times to just be a 'shopper' and not want to change." The counselors appeared adept in determining when the short-term model was or was not appropriate. As one remarked, "Sometimes listening/supportive counseling, not single-session brief counseling, is exactly what the student needs."

Interviews with randomly selected students after the second follow-up provide more detail about the types of goals students set. Three students with problems in specific classes set goals of seeking extra help from their teachers, whereas one student who had problems concentrating in school set a goal to focus more on what the teachers were saying. A student needing additional financial resources set a goal to seek quite actively more information concerning financial aid. For the students concerned with personal–social issues, small but meaningful goals were set that involved focusing on other people's thoughts and feelings, becoming more assertive in dealing with peers, and working on what they could do to improve communications.

During training the counselors were quite skeptical of the solution-focused brief counseling approach because they felt they were missing "important" information. The counselors noted, however, that during Step 3, the goal-setting step, the students often conveyed this information to them as they discussed their goals.

The empowering of students was perceived by the counselors as the most important feature of the brief counseling model. They perceived this in relationship to goal setting (Step 3) and the assigning of tasks (Step 4). Empowerment often came as students took small but meaningful steps in the direction of their goals. Students experienced success in goal attainment and, because of the built-in follow-up sessions, counselors were informed as to the students' success in reaching their goals. The counselors found that the goal-setting step was very useful for many students. Students were perceived by the counselors as more independent, possibly because they, the counselors, were working less hard at being responsible for the content of students' "solutions" and were instead more focused on the process of counseling.

Assigning Tasks

During the training sessions the counselors were not initially comfortable with step 4, assigning a task to achieve the goal, possibly because the task was rather vague. However, when the counselors gave students the generic task of "do something differently" in the fourth step, the counselors observed that the task gave students "permission" to try new behaviors, (e.g., spending more time on task in class and study hall, applying new study skills, doing assignments and other required course work, getting extra help from teachers). In other words, new behaviors were substituted for old habits.

The counselors found that the students were often very good at brainstorming new ideas (i.e., identifying internal and environmental resources) with which they could reach their goals. Even in the field of occupational choice, the goals and tasks encouraged exploration of activities to gather data upon which to make decisions.

The case of Lisa (pseudonym) illustrates how students became involved in setting goals to take a specific action and how the generic task of "do something different" was useful in helping students reach their goals. Lisa worked 30 hours per week outside of school and was experiencing difficulty in algebra. Through single-session brief counseling she was able to shift her focus from the class being the problem to how she could take steps to change her situation. In one session Lisa was able to define a small yet meaningful goal of doing 15 more minutes per day of studying algebra. To help her reach her goal, Lisa was assigned the task of "do something different." Not only did Lisa's grade in algebra improve, she subsequently on her own generalized the strategy to her other classes, and all her grades went up.

DISCUSSION

Quantitative and qualitative measures were used in the collection of data during the brief counseling project conducted with students at a public high school. The results provide evidence of the strengths and drawbacks of single-session brief counseling, the conditions under which brief counseling is effective and when it is not, and the experiences of counselors and their students in effecting change with a single-session brief counseling approach.

The findings from this study indicate that brief counseling provided a vehicle for students to use to reduce their concerns about problem situations, move closer to their goals, and diminish uncomfortable feelings about their problems. Several findings deserve closer examination. First, all three brief counseling approaches were successful in helping students move in the direction of their goals and in reducing uncomfortable feelings associated with their problems. The success is particularly striking when these effects were associated with only a single counseling session and two very time-limited follow-up sessions.

The three brief-counseling approaches (i.e., problem-focused with task, problem-focused without task, and solution-focused with task) did not differ among themselves in their effectiveness in alleviating students' concerns, moving them toward their goals, and decreasing the intensity of undesired feelings related to their concerns. This finding throws into question the claim of those who believe that a solution-focused approach is more effective than a problem-focused approach, at least when it comes to counseling that is of single-session dura-

tion. However, the time spent by counselors with students was shorter with the solution-focused approach than with the two problem-focused approaches. The solution-focused approach thus has the advantage of producing comparable results, but in less time. This would seem to be an important consideration for busy counselors.

Advantages and Disadvantages of Brief Counseling

For several reasons, brief counseling is a desirable alternative for students with developmental concerns, (e.g., academic issues, peer conflicts, stress, and procrastination). First, given the large number of students assigned to each counselor in this study, the single-session brief-counseling approach allowed the counselors to use their time efficiently when seeing students for individual counseling.

Second, the counselors realized that it was highly desirable to have in their repertoires a single-session brief-counseling model. They had used other counseling models and had felt frustrated when students terminated after one session, often even prior to the student setting a goal. The counselors recognized that the brief counseling model was not restricted to one session. When necessary for the student, the counselor could increase the number of sessions, while still retaining the structure of the brief counseling model. The counselors quickly recognized that the experimental restriction to a single session with two follow-up interviews was done in order to determine how minimal counseling could be while still retaining its effectiveness.

Finally, time-limited counseling offered many students what they wanted—a brief number of sessions with concrete interventions. For half the students interviewed, the single session was quite sufficient; however, the other half expressed the desire for additional counseling sessions concerning their situations. Single-session brief counseling was sufficient for some, but only a beginning for others. The counselors and the researchers in our study kept reminding each other that the single-session model was but one tool in the counselors' repertoires and that the students and their needs must dictate the counseling approach, not the reverse.

There are several disadvantages to using brief counseling in a school setting. First, counselors need to ensure that they do not prematurely focus on one concern to the exclusion of other more serious concerns, such as physical abuse, that students may need more time to reveal. One trap in using brief counseling, as in any type of counseling, is to focus too quickly on the initial problem presented by the client and thereby cut off the client's discussion of other potentially more troublesome issues.

Second, simply because the stages of the problem-focused and solution-focused approaches are relatively straightsforward does not mean that conducting brief counseling is necessarily easy. For example, considerable counseling skills are required to help students set small and meaningful goals. In addition, assigning tasks to help students move in the direction of their goal also requires skill and sensitivity on the part of counselors. Ethically, counselors need to be aware of their own strengths and weaknesses, be knowledgeable about the clients they work with, and have the skills to help them reach their goals (Pedersen, 1988).

Third, brief counseling is but one tool in counselors' repertoires. As such, it is not suitable for a number of types of problems (e.g., potential suicide, child abuse, and severe eating disorders, Talmon, 1990). Counselors must be aware when the tool of brief counseling is appropriate and when it is not. In this study, the counselors and their students found that in numerous situations brief counseling can be useful in helping students to move in the direction of achieving their goals and that the movement toward goals can occur with relative speed.

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