REFLECTIVE COUNSELLING TECHNIQUE AND EMOTIONAL INTELLIGENCE TRAINING IN MANAGING EXPRESSED PERFORMANCE-ANXIETY OF TRAINEE COUNSELLORS IN SOUTH-SOUTH NIGERIA

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ABSTRACT*: This study investigated effects of emotional intelligence and self-efficacy training in enhancing counselling efficacy of undergraduate counselling practicum trainees in South-East Nigeria. The study adopted pre-test-post-test, control group quasi-experimental design with a 3x2x2 factorial matrix. Simple random sampling technique was used to select ninety (90) Guidance and Counselling practicum undergraduates from three tertiary institutions in South-East Nigeria. The participants were randomly assigned to groups. Participants in the two treatment groups were exposed to eight weeks of emotional intelligence and self-efficacy training. One instrument was used: The Counsellor Activity Self-Efficacy Scale (CASES) (α= 0.97). Three hypotheses were tested at 0.05 level of significance. Data were analysed using Analysis of Covariance. There was a significant main effect of treatment on counselling efficacy scores of undergraduate counselling practicum trainees $F_{(2,58)}=55.140$, $P<0.05$. Also, there was significant main effect of age on counselling efficacy scores of undergraduate counselling practicum trainees exposed to treatments ($F_{(1,77)} = 3.651$, $P < .05$). However, there was no significant main effect of gender on counselling efficacy scores of undergraduate counselling practicum trainees exposed to treatment ($F_{(1,77)} = 0.741$, $P > .05$). Emotional intelligence and self-efficacy training were effective in enhancing counselling efficacy of undergraduate counselling practicum trainees. Undergraduate counselling practicum trainees should be exposed to psychological intervention programmes such as emotional intelligence and self-efficacy training that would help enhance their counselling efficacy competence and capability to effectively dispense their professional service to humanity.*

KEYWORDS*: Counselling Efficacy, Emotional Intelligence, Practicum Trainee, Self-Efficacy, Undergraduates, and South-East.*

INTRODUCTION

Counselling relationship is often expected to be dispensed on the platform of care, understanding and unconditional positive regard for the client. Counsellors are professionals that have being privileged to be exposed to training that would help them develop their competence in understanding human behaviour and attitudinal disposition and help them self-rediscover their strength and weakness as to make appropriate adjustment to life challenges. Counsellors' encounter with client(s) is instituted, sustained and result driven using talking therapy. The effective use of this mechanism requires a counsellor to apply dynamism, be creative, emotionally stable; sensitive to understanding and interpreting environmental stimulus, intellectually sound and be pragmatic in applying principles of psychotherapeutic theories. The inability to meet up with these expectations could make trainee counsellors express some measure of anxiety during their encounter with clients. For example, the

inability of trainee counsellors to interpret clients expressed non-verbal behaviour such as sighing, looking down instead of looking straight to the face of the counsellor, biting of finger nails, sitting uncomfortable at the edge of the chair, nodding of head, shedding of tears, etc could make trainee counsellors to express anxiety, confusion and apprehension.

When trainee counsellors encounter situation(s) that could make them doubt their professional capability to support client(s) overcome their challenges, they could feel incompetent, discourage, disillusioned and anxious of overcoming their assumed professional deficiency. According to Thériault and Gaz-zola (2005, 2006, 2008) feeling of incompetence are the result of therapists' self-depreciating and subjective evaluations of their own performances as practitioners; although they generally elicit anxiety, they can also be used for growth. Practicum exercise requires trainee counsellors to have positive self-perception of their ability to deliver. Anusiem, Okoiye and Okwara-Kalu (2015) posited that trainee counsellor's high self-perception to resolve challenges is germane in enhancing the actualisation of an effective and successful counselling session. Student counsellors on practice need to develop capacity to manage their anxiety, express self-confidence, belief not only in themselves but also in their ability to resolve challenging task/situation and in their capability to apply the required therapeutic principles as a support mechanism that will help clients self-rediscover themselves and adjust to the reality of their life situation(s). This makes investigating the effects of reflective counselling technique and emotional intelligence training in managing expressed performance-anxiety of trainee counsellors in south-south Nigeria imperative.

Counselling experience is unique, dynamic and challenging to comprehensively articulate by trainee counsellor. The inability of some trainee counsellors to professionally dispense their expertise in counselling relationship makes them express counselling anxiety. A trainee counsellor's predisposition toward expressing performance anxiety during their counselling encounter with clients is based both on fear of incompetence, apprehension and negative self-agitation which invariably impair their performance. Expressed performance anxiety by trainee counsellors is occasioned by nervousness, apprehension, and self-doubt that may or may not be associated with real-life stressors. When performance anxiety is reoccurring and overwhelmingly interferes with the daily function of a counsellor, the need for a psychotherapeutic intervention arises. A trainee counsellor expressing performance anxiety may feel tense, with uncomfortable physical sensations such as trembling, sweating, a racing heartbeat, nausea, and difficulty breathing while conducting a counselling session. The severe and sudden onset of such symptoms is often indicative of a panic attack.

Berger (2005) posited that performance anxiety is a very disruptive level of anxiety that can develop in any situation where you have to perform an activity. Performance anxiety occurs in both public and private contexts but, whatever the situation; the pattern of behaviour is usually the same. Trainee counsellors expressed performance anxiety is as a result of a combination of physiological over-arousal, tension and somatic symptoms, along with worry, dread, fear of failure, and catastrophizing, that occur before or during counselling situations with client(s). Counsellors expressed performance anxiety creates significant barriers to trainee counsellors learning and competence. Performance anxiety can have broader consequences, negatively affecting a trainee counsellors' social, emotional and behavioural development, as well as their feelings about themselves and professional competence (Vaez & Laflamme, 2008). When one experiences too much anxiety, however, it can result in

emotional or physical distress, difficulty concentrating, and emotional worry. Trainee counsellors' performance anxiety arises not because of intellectual problems or poor academic preparation, but because counselling situations create a sense of threat for those trainee counsellors experiencing performance anxiety; anxiety resulting from the sense of threat then disrupts attention and memory function (Sarason, Sarason & Pierce, 1995). A person's beliefs about their own competencies are a form of self-knowledge, which plays an important role in analyzing situations that might be threatening. When a person has feelings of low competence about their abilities they are likely to anticipate negative outcomes such as failure, under uncertain conditions. Thus, evaluative situations as experienced with counselling interactive session(s) are perceived as more threatening by trainee counsellors who have low competencies (Putwain, Woods & Symes, 2010).

According to Bolton (2005) self-reflection assists the therapist to be aware where their motives and actions stem from, in order to make them a more effective practitioner in dealing with unique people in unique scenarios. Self-reflection is a means of evaluating one's own role within a situation, taking personal beliefs, values and biases into account and why resulting opinions or actions were presented. The Professional Counsellor (2008) contended that reflective counselling practice is mindful practice and reflective counsellors are aware of their own strengths and limitations. They conduct counselling with purpose and intention. They monitor their own levels of stress and are mindful of personal matters that may interfere with their performance. Reflective counsellors take their time to evaluate and refine their performance after each counselling session and are committed to ongoing personal growth and professional development. Reflection therefore, requires thoughtful and honest recording, reporting and analysis of actual practice, philosophy, and experience. Understanding why an activity or practice was productive or non-productive in the therapeutic context is an important component in the progression from novice to master (The Professional Counsellor 2008).

Before now, diverse techniques have been used on trainee counsellors to help them overcome the challenge of performance anxiety that has impaired their ability to show case their professional expertise. For example, techniques such as counselling efficacy, assertiveness, cognitive behavioural therapy, etc, however, one of the most effective psychotherapeutic techniques is reflective technique (Beggs, Shields & Janiszewski, 2011; Pashaee, Taghipoor & Khoshkonesh, 2009; Rajabi, Abolghasemi & Abasi, 2012); this technique assists students in related emotional recognition. As cited in Farkhondeh, Rzieh, Arash, Mehrdad and Pouran (2013) the first and most fundamental theory of reflection is that of Deweys. He emphasized that the models function is to transform the conflict, doubtful, and vague situation to a clearer, and more coherent and harmonic condition. He believed that reflection encourages individuals to search and find principles that would solve their problems (Ash & Clayton, 2004).

Schendel (2010) affirmed that research suggests that many aspects of emotional intelligence, such as awareness of one's own and others emotions, and the regulation of both one's own and others emotions, are essential to therapeutic work (Louie, Coverdale, & Roberts, 2006). Emotions are thought to also contribute unique information about the surrounding environment which in turn, informs subsequent thoughts, actions, and feelings (Salovey, Bedell, Detweiler, & Mayer, 2000). According to Mayer and Salovey (1997), emotions can both inform and promote our intelligence through processes such as reflective regulation of

emotion, understanding and analyzing emotions, emotional facilitation of thought, and the perception, appraisal, and expression of emotion. In fact, these qualities constitute the four-branch ability model of emotional intelligence (Schendel, 2010). Research examining emotional intelligence indicates that it may benefit the training of psychologists and counsellors as it is correlated with effective coping strategies (Louie et al., 2006; Schendel, 2010) and psychological well-being (Ciarrochi & Godsell, 2006; Gohm, 2003).

Salovey and Mayer's conception of EI strives to define EI within the confines of the standard criteria for a new intelligence (Mayer, Salovey, Caruso & Sitarenios, 2001). Following their continuing research, their initial definition of EI was revised to "The ability to perceive emotion, integrate emotion to facilitate thought, understand emotions and to regulate emotions to promote personal growth. However, after pursuing further research, their definition of EI evolved into the capacity to reason about emotions, and of emotions, to enhance thinking. It includes the abilities to accurately perceive emotions, to access and generate emotions so as to assist thought, to understand emotions and emotional knowledge, and to reflectively regulate emotions so as to promote emotional and intellectual growth (Mayer, et al., 2001). This is consistent with the findings of Adigun and Okoiye (2012). They found that emotional intelligence therapeutic intervention training was effective in enhancing the job performance of non academic staff of Lagos state university Nigeria. This implies that the use of emotional intelligence therapeutic intervention programme proved to be effective in improving the non academic staffs of Lagos State University job competence and ability to adjust to the challenges of applying necessary developmental and technological changes to solving the challenges of their work environment which appear tasking to them before the training. The findings proved that if university workers expressing poor job performance are exposed to corrective interventions as measures to help them explore and maximally use their potentials, it could go a long way to help improve their levels of job performance and raise their self-confidence and belief that they have what it takes to contribute effectively to institutional growth and success. Therefore, this study investigated effects of reflective counselling technique and emotional intelligence training in managing expressed performance-anxiety of trainee counsellors in south-south Nigeria; while also considering the moderating effect of age and gender.

Hypotheses

There is no significant main effect of treatment in managing expressed performance-anxiety of trainee counsellors

There is no significant main effect of age on expressed performance-anxiety of trainee counsellors

There is no significant main effect of gender on expressed performance-anxiety of trainee counsellors

Research Design

A pre-test, post-test, control group quasi-experimental design of 3x2x2 factorial matrix was used for this study. The pre-test, post-test control group design was used in the study because the design has been recognized for its ability to establish causes and effects relationships due to intervention. It also shows the potential for controlling all threats to validity so that a cause and effect relationship may be established. The psychological treatment is denoted by alphabet A, as thus: Reflective Counselling Technique (A_1), Emotional Intelligence Training (A_2) and the Control Group (A_3) constituting the row of the treatment design. The column

denotes the moderating variables (Age and Gender) varying at two levels represented by B where B1 represents young (Male) level of age and B2 represents young (Female) level of age. Also, C1 represents young (Male) level of age and C2 represents young (Female) level of age respectively. This is highlighted below in table 1.

Summary of Design:
Pretest, Post test, Control group Experimental design
A$_1$: O$_1$ x O$_2$
A$_2$: O$_1$ X$_2$ O$_2$
A$_3$: O$_1$ C O$_2$
Where
O1= experimental and control pre-test evaluation
O2= experimental and control post-test evaluation
X= experimental treatment
C= no experimental treatment
The three groups were obtained by random assignment of equal number of participants into the groups (Table.1). The fact that the participants were randomly assigned to groups suggests that the control and treatment groups were similar at the beginning of the experiment.
TABLE 1

A 3x2x2 Factorial Matrix Design for the treatment in managing expressed performance-anxiety of trainee counsellors

Treatment		AGE			
		Male		**Female**	
		Young **20-25yrs**	**Old** **26-30yrs**	**Young** **20-25yrs**	**Old** **26-30yrs**
A1 Reflective Technique	**Counselling**	A1 B1n=11	A1 C1n=8	A1 B2n=4	A1C2n=7
A2 Emotional Training	**Intelligence**	A2 B1n=6	A2 C1n=10	A2 B2n=8	A2 C2n=6
A3 Control Group		A3 B1n=7	A3 C1n=7	A3 B2n=9	A3 C2n=7

Population
The population for this study comprised of five hundred and sixty-seven Guidance and Counselling undergraduates on practicum from three Universities in South-South Nigeria.

Sample and Sampling Techniques
The participants for this study were ninety (90) guidance and counselling practicum undergraduates from three Universities in South-South Nigeria purposively selected for this study. Participants were selected based on their recorded poor performance of 25% in their first practicum exercise.

Research Instrument
Expressed performance anxiety of trainee counsellors was measured using Liebowitz Social Anxiety Scale (LSAS) developed in 1987. Its purpose is to assess the range of social

interaction and performance situations feared by an individual in an interpersonal relationship. The scale is composed of 24 items divided into 2 subscales, 13 concerning performance anxiety, and 11 pertaining to social situations. The 24 items are first rated on a Likert Scale from 0 to 3 on fear felt during the situations, and then the same items are rated regarding avoidance of the situation. Scores between 35 and 50 indicate that performance anxiety is very probable. Scores in this range are typical of trainee dispositional anxiety during counselling relationship with client(s). Scores higher than 50 indicate that trainee expressed performance anxiety is highly probable. Scores in this range often are accompanied by great distress and difficulty during counselling relationship. The scale has an internal consistency of 94 and .92, respectively (Mennin, Fresco, Heimberg, Schneier, Davies & Liebowitz (2002)

Procedure
Permission to carry out this research was obtained from the school authorities and the consent of the participants was also sort for. The three institutions used were far apart to avoid possible contamination. Two of the institutions were used as the treatment groups, while one served as the control group. The treatment groups were trained while the control group were not but were given lectures on general issues. The researchers conducted therapeutic sessions with the two experimental groups for a period of 8weeks at one and half hours each. The participants and the researcher agreed on suitable days of the week when the therapeutic sessions would hold. The groups were subjected to pre-treatment and post treatment test.

Control of Extraneous Variables
 In controlling extraneous variables that possibly could affect the results of the study, null hypotheses were tested to guide against experimental biases. Thus, equal numbers of participants were randomly assigned to experimental and control groups. Step taken to control possible extraneous variables involved several stages of randomization. Expectedly, the administration of test and treatment took take care of extraneous variables. Therefore, the Rosenthal effect was controlled by keeping the control group busy with their usual daily school routine during the experimental sessions. Also, the method of data analysis employed, Analysis of Covariance (ANCOVA) was used to control extraneous variables beyond the reach of the design and other procedure of research.

METHOD OF DATA ANALYSIS

Data were analysed using ANCOVA (Analysis of Covariance) and Multiple Classification Analyses (MCA). Analysis of Covariance (ANCOVA) was used to compare the differential effectiveness of the independent variables. In order to know the direction of the difference and to ascertain the amount of variations due to each independent variable, a Multiple Classification Analysis (MCA) was carried out.

RESULTS

Hypothesis One: There is no significant main effect of treatment in managing expressed performance-anxiety of trainee counsellors. To test this hypothesis, Analysis of Covariance (ANCOVA) was employed to analyse the post test scores of participants on expressed performance anxiety, using the pre-test scores as covariates to find out if post experimental

differences were significant. The result obtained was tested at 0.05 significant levels as presented in tables 2 and 3.

Table 2: Summary of Analysis of Covariance (ANCOVA) of pre-post test interactive effects of expressed performance anxiety scores of trainee counsellors in the Treatment Groups, Age and Gender

Source	Sum of Squares	DF	Mean Square	F	Sig.	Remark
Covariates	2112.029	1	2112.029	61.60	.000	
Main effects	3251.206	2	1625.603	47.41	.000	
Treatment Groups	3218.112	2	1609.056	46.93	.000	Sig.
Age	119.183	1	119.183	3.476	.006	Sig.
Gender	18.268	1	18.268	.533	.411	n.a.
Explained	4752.240	12	396.020	11.550	.000	
Residual	2640.211	77	34.288			
Total	7392.451	89	83.061			

The result in table2 showed that there was significant main effect of treatment in the pre-post-performance anxiety scores of trainee counsellors in the experimental and control groups ($F(2,77) = 47.41$, $P < .05$). This means that there was a significant main effect of treatment in the mean post-test performance anxiety scores of participants exposed to treatment and the control group. This implies that trainee counsellors in the experimental groups benefited from the treatment package as the therapeutic intervention programme was able to make them develop capacity to manage their anxiety better than trainee counsellors in the control group who were not exposed to any treatment package. Therefore, the hypothesis is rejected. In order to find out the magnitude of groups mean scores, Table 3 is presented.

Table 3: Multiple Classification Analysis (MCA) showing the direction of the results in the pre-post counselling efficacy Scores of undergraduate counselling practicum trainees in the Treatment Groups, Age and Gender

Variable + Category	N	Unadjusted variation	Adjusted Mean Score	Eta	Adjusted for independent + covariates deviation	Beta
Grand Mean = 24.35						

Treatment Groups:						
Reflective Technique	30	-3.12	21.23		-2.14	
Emotional Intelligence	30	-2.15	22.20		-2.25	
Control	30	6.36	30.71		6.19	
				.61		.64
Gender:						
Male	49	.42	24.77		-.64	
Female	41	.44	24.79		.69	
				.18		.18
Age:						
Young (20-25yrs)	45	-.63	23.72		-.36	
Old (26-30yrs)	45	.44	24.79		.23	
				.36		
Multiple R-squared						.661
Multiple R						.742

The MCA as observed in Table 3 showed the performance of all the groups in counselling efficacy. The control group had the highest adjusted post-test mean score g ($\bar{x}$=33.08), followed by self-efficacy group ($\bar{x}$=33.08) and emotional intelligence group ($\bar{x}$=21.17). Also, as regards gender, the difference was not significant as thus, male ($\bar{x}$=26.04) and female ($\bar{x}$=26.09). However, age has significant moderating effect between young (18-25yrs) ($\bar{x}$=22.05).and old participants (26-33yr) ($\bar{x}$=22.88).

Hypothesis Two There is no significant main effect of age on counselling efficacy of undergraduate counselling practicum trainees? Table 2 showed that there was significant main effect of age in the pre-post counselling efficacy Scores of undergraduate counselling practicum trainees between young and old (F (1,77) = 3.651, P < .05). This implies that based on the effect of the treatment, the older participants expressed more confidence in their ability and capability to manage their counselling experience and challenges and thus, express low anxiety than the younger participants. Therefore the null hypothesis is rejected. The MCA in table 3 showed that the mean score for young participants (18-25yrs) ($\bar{x}$=26.05) and old participants (26-33yr) ($\bar{x}$=22.88). This shows that younger participants had adjusted counselling efficacy post-test mean scores ($\bar{x}$=26.05) that was higher than the grand mean ($\bar{x}$=25.59). This implies that the younger undergraduate counselling practicum trainees had

lows counselling efficacy.

Hypothesis Three There is no significant main effect of gender on counselling efficacy of undergraduate counselling practicum trainees? Table 2 showed that there was no significant main effect of gender in the pre-post counselling efficacy scores of undergraduate counselling practicum trainees between male and female respondents (F(1,77) = 0.741, P > .05). Therefore the null hypothesis is accepted. The MCA table 3 showed that the mean score for male is ($\bar{x}$=26.04) while that of female is ($\bar{x}$=26.09). This shows that the impact of gender on counselling efficacy of undergraduate practicum trainee is not significant. This is attained by adding the grand mean to the unadjusted variation figure of male and female undergraduate practicum trainee participants.

DISCUSSION OF FINDINGS

Hypothesis One

The hypothesis states that there is no significant main effect of treatment on counselling efficacy of undergraduate counselling practicum trainees. The result of the findings revealed that there was significant main effect of treatment in the post-test counselling efficacy scores of undergraduate counselling practicum trainees in the experimental and control groups. Therefore, the hypothesis is rejected. This implies that the two therapeutic techniques proved to be effective in enhancing the counselling efficacy competence of undergraduate counselling trainees. The post test scores on counselling efficacy of participants in the experimental groups showed that the treatment gain was effective. However, the high scores attain by participants in the control group as observed in the post test mean score could be adjudged to the fact that they were not exposed to any treatment package. The findings proved that if students are expose to psychological measures that could help them self manage anxiety, self doubt and complexity experienced during counselling exercises, they could be more dynamic in using diverse therapeutic technique during counselling, be determined, confidence, relaxed, coordinated and motivated to succeed. The results of the findings also revealed that undergraduate counselling trainee in emotional intelligence group performed better than their counterparts in self-efficacy group. This can be explained in terms of the effectiveness of each of the training programme in enhancing counselling efficacy of undergraduate counselling trainee. This could be attributed to the manner of the utilization of diverse techniques such as homework, revision, discussion and question used in the delivery of each training programme. Based on their uniqueness, these training programmes are expected to produce varying degree of effectiveness in enhancing the counselling efficacy of undergraduate counselling practicum trainees. Thus the development and expression of counselling efficacy is germane in enhancing the actualisation of an effective and successful counselling session. Student counsellors on practice require this competence that will enable them express self-confidence; belief not only in themselves but also in their ability to resolve challenging task/situation and in their capability to apply the required therapeutic principles as a support mechanism that will help clients self-rediscover themselves and adjust to the reality of their life situation(s). Bandura (1977) self-efficacy theory projects this context. This theory emphasises the fact that self-efficacious individual's belief in their ability and capabilities and are persistent in resolving challenging task. Maldonado (2008) reports that expressed counselling efficacy enhance counsellor's positive performance. Counsellors come in contact with individuals with diverse mental and psycho-social behaviour. This makes professional counselling a career that is emotionally, physically, psychologically, socially, spiritually and intellectually demanding and ethically all involving, Therefore, a counsellor needs to be self-efficacious and emotionally stable to be functional, proficient, effective and result oriented

Hypothesis Two

This hypothesis states that there is no significant main effect of age on counselling efficacy of undergraduate counselling practicum trainees. The result of the study revealed that there was significant difference in the main effect of age in the post-test counselling efficacy Scores of undergraduate counselling practicum trainees between young (18-25yrs) and old (26-33yrs) participants. Therefore the null hypothesis is rejected. This implies that age had significant effect in the counselling efficacy scores difference between young and old undergraduate

counselling trainee's participants for the intervention programme. Table 2 revealed that older participants perform better in the treatment programme as reflected in their post-test counselling efficacy scores than the younger participants. This implies that age influenced the ability of the participants to benefit from the treatment programme. This result could be premised on the possible reason that due to the efficacy of the treatment programme, participants were able to mirror deep down into their person, evaluate their foremost professional conduct, appraised their strength and weakness and then resolve to overcome their challenges by being confident in their ability and capability to succeed in their professional counselling task. This development is in line with Larson (1998) report that demographic factors such as age and gender was found to have relationship with counsellors counselling efficacy. Also, a research report by Evans, Forney, Guido, Patton and Renn (2010) notes that undergraduate's counsellor trainees in diverse age group (young adult, middle age, adults and older adults) express divergent concern about life expectations, challenges, professional developmental focus and this has implication on their counselling efficacy. Thus, Shallcross (2009) stated that individuals below 30 years are concern about their identity as an individual as well as a group member, while individuals that are 30-50 years crave for autonomy and individuals of 50 years and above are concern about establishing group identity. These developmental task and experiences impacts positively or negatively on counsellors' trainees' sense of self and counselling efficacy. For example, there concerns reflect intimate relationship for young adults, professional establishment for the middle-aged and significant changes in thought patterns for older adult (Shallcross, 2009).

Hypothesis Three
This hypothesis states that there is no significant main effect of gender on counselling efficacy of undergraduate counselling practicum trainees. The result showed that there was no significant main effect of gender in the post-test counselling efficacy scores of undergraduate counselling practicum trainees between male and female participants. Therefore, the hypothesis is accepted. This implies that the issue of gender identity did not influence the counselling efficacy scores of participants. In the light of this therefore, this development could be premised on the fact that since undergraduate counselling practicum trainees share same or similar professional challenges that impair their performance, they equally tend to express same sense of helplessness, confusion and dismay while practicing. Thus, besides the age factor, Wester and Vogel (2002) urge counsellor educators to consider the impact of gender role conflict (GRC) on counselling self-efficacy, particularly that of male counsellor trainees. Even if trainees are not affected by their personal gender role socialization, their clients' perceptions of counselling quality based on gender role orientation and sex (Beckenbach, Patrick & Sells, 2009) may impact trainees' development of counselling self-efficacy. Further research on the relationship between gender and counselling self-efficacy is warranted (Lam, et al., 2013). However, counselling efficacy competence can be enhanced through appropriate therapeutic intervention programmes such as emotional intelligence and self-efficacy training. In support, is Bagheri, Wan-Jaafar and Baba (2012) report that to be successful, counsellors need to posse strong confidence in their capability and persistence to successfully accomplish counselling task. Thus, a positive self-efficacy mental frame is an important criteria that would determine the success of a professional counsellor in practice.

IMPLICATION OF FINDINGS

The findings of this research provides reasonable information that can be applied in counselling and vocational psychology as it reflects the need to give undergraduate counselling practicum training programme the attention it deserves. This is based on the consideration of the fact that counselling practicum is viewed as the focal point for the integration and synthesis of creativity, innovative ideas, knowledge and experience in a bid to resolve an unresolved issue that is causing a state of maladjustment in a troubled individual or group of individuals. Practicum experience has increasingly being viewed as the major vehicle for Counsellors training. Thus, it remains essential that careful consideration be given to adequate prerequisite preparation to ensure adequate and reasonable professional competency on the part of the Counsellor (Okoiye, 2011).

RECOMMENDATION

Undergraduate counselling practicum trainees should be exposed to psychological intervention programmes such as emotional intelligence and self-efficacy training that would help enhance their counselling efficacy competence and capability to effectively dispense their professional service to humanity.
Institutions where counsellors are being trained should ensure they are exposed to diverse therapeutic theories whose application would enable them function efficiently.
Institutions should ensure counsellor trainees are given enough time to engage in practicum and also given the necessary support to excel.

CONCLUSION

Counselling is a dynamic profession that requires competence. This makes it imperative for trainees to be equipped with knowledge of skills, techniques and theories that would enhance their competence and counselling efficacy for success.

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