Appendix A

Counselor as Client

Q1 Have you ever received counseling services as a client?

☐ Yes (1)
☐ No (2)

Q2 What were/are your reason(s) for not choosing to pursue counseling services?

Q3 Do you think that not having experience as a client has impacted your development as a counselor?

☐ Yes (1)
☐ No (2)

Q4 Please describe the impact:

Q5 Did you receive counseling services as a client prior to your enrollment in the MHC Program?

☐ Yes (1)
☐ No (2)

Q6 With regard to the counseling you received, was your experience (Check all that apply)

☐ Individual counseling (1)
☐ Group counseling (2)
☐ Family or couples counseling (3)
Q7 What were the credentials/training of the provider(s) of counseling services? (Check all that apply)

- Psychiatrist (1)
- Clinic or counseling psychologist (2)
- Clinical/masters social worker (3)
- Mental health or community counselor (4)
- Pastoral counselor (5)
- School counselor or school psychologist (6)
- CASAC (7)
- Other (please specify) (8)
- Unknown (9)

Q8 Did you receive counseling services as a client during your enrollment in the MHC Program?

- Yes (1)
- No (2)

Q9 Did you receive these services? (Check all that apply)

- On campus (at SJFC) (1)
- Off campus (2)

Q10 Was your experience? (Check all that apply)

- Individual counseling (1)
- Group counseling (2)
- Family or couples counseling (3)
Q12 What were the credentials/training of the provider(s) of counseling services? (Check all that apply)

- Psychiatrist (1)
- Clinic or counseling psychologist (2)
- Clinical/masters social worker (3)
- Mental health or community counselor (4)
- Pastoral counselor (5)
- School counselor or school psychologist (6)
- CASAC (7)
- Other (please specify) (8)
- Unknown (9)

Q11 Did you ever receive counseling services during childhood (ages 2-11)?

- Yes (1)
- No (2)

Q14 If yes, would you characterize your experience of these services as:

- Successful/helpful (1)
- Unsuccessful/not helpful (2)
- Other descriptor (10 words or less) (3) ____________________

Q15 Did you ever receive counseling services during adolescence (ages 12-18)?

- Yes (1)
- No (2)

Q17 If yes, would you characterize your experience of these services as:

- Successful/helpful (1)
- Unsuccessful/not helpful (2)
- Other descriptor (10 words or less) (3) ____________________
Q16 Type of counseling

<table>
<thead>
<tr>
<th>Counseling experience #1 (1)</th>
<th>Individual (1)</th>
<th>Group (2)</th>
<th>Family/Couples (3)</th>
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<tr>
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<tr>
<td>Counseling experience #2 (2)</td>
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<td>Counseling experience #3 (3)</td>
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Q19 Experience

<table>
<thead>
<tr>
<th>Counseling experience #1 (1)</th>
<th>Successful/helpful (1)</th>
<th>Unsuccessful/not helpful (2)</th>
<th>Damaging/very negative (3)</th>
<th>Other (4)</th>
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</table>

Q20 To what extent do you believe that your experience as a client has had an impact on your effectiveness as a professional counselor?

- A great deal in a positive manner (1)
- A moderate amount in a positive manner (2)
- A small amount in a positive manner (3)
- A small amount in a negative manner (4)
- A moderate amount in a negative manner (5)
- A great deal in a negative manner (6)
- Not at all (7)
Q21 Please describe the effect that your experience as a client has had on your effectiveness as a counselor.

Q22 Would you seek counseling services from someone who has not been a client in counseling themselves?

☐ Yes (1)
☐ No (2)

Q23 Is there anything else that you would like to share about this topic?