

HOW DO GENERATION Z COLLEGE STUDENTS PERCEIVE PROCESS  
EXPECTATIONS WHEN SEEKING MENTAL HEALTH COUNSELING

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By

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COUNSELOR EDUCATION  
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HOW GENERATION Z COLLEGE STUDENTS PERCEIVE PROCESS EXPECTATIONS  
WHEN SEEKING MENTAL HEALTH COUNSELING (209 pp.)

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The purpose of this interpretive description study was to identify expectations for the process of mental health counseling for Generation Z college students who have sought counseling services at their college counseling center. In addition, how participants' identification with Generation Z and how that impacted their expectations for the process of mental health counseling were also explored. Data were collected from six participants from semi-structured interviews. The participants were all undergraduate and graduate students who had made an appointment for counseling services, but had not yet received services at the time of their interview. Data were analyzed using open, axial, and selective coding.

Two themes with multiple subthemes emerged from the data. The first theme was Counselors Build a Relationship to Provide Personalized Feedback. The subthemes of theme one were: (a) counselors ask probing questions, (b) care is personalized to the individual, and (c) counselors provide feedback that is impartial and objective. The second theme that emerged from the data was The Counselor and Client Play Collaborative Roles in the Therapeutic Relationship. The subthemes of theme two were: (a) client is active within the therapeutic relationship, and (b) counselors facilitate the therapeutic relationship. Implications for college mental health counselors, counselor supervision, outreach, and future research were discussed.

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## **CHAPTER I**

### **INTRODUCTION AND LITERATURE REVIEW**

College campuses today are filled mostly with students who are from Generation Z, also known as Centennials, Homeland Generation, and iGeneration (Seemiller & Grace, 2016). At the time of this dissertation, Generation Z is the newest generation to attend college and its members will be attending college for the next two decades. Generation Z college students were born between the years of 1995 and 2010 (Seemiller & Grace, 2016). College and graduate students who are a part of this generation are between the ages of 18 and 25 at the time of this study.

Generation Z is estimated to be larger than Baby Boomers, who were born between 1946 and 1964, at an estimated 69 million people (Parker & Igielnik, 2020; Seemiller & Grace, 2016). College enrollment has been increasing since the previous Millennial generation and has peaked at an all-time high with Generation Z (National Center for Education Statistics, 2017). In 1999 when the first class of Millennial students were going to college, the number of enrolled students was just under 15 million (14,849,691). When the first class of Generation Z students entered college in 2013, the number of enrolled students increased by 28% to nearly 17 million (16,911,481). In the spring of 2020, the year data for this study were collected, the majority of Generation Z students attended four-year public institutions (National Center for Education Statistics, 2021).

With the increase in student enrollment, there has also been an increase of college counseling services utilized by students (Center for Collegiate Mental Health [CCMH], 2015; LeViness et al., 2019). From the fall of 2009 to the spring of 2015 there has been a 5% enrollment increase, but a 30–40% increase in service utilization in college counseling centers

(CCMH, 2015). The Center for Collegiate Mental Health gathers and manages data from the clinical documentation and appointment software called Titanium. This increase in students seeking counseling services gives context to why college counseling centers across the country have needed to restructure the care they provide to students to meet this increased demand. From the fall of 2010 to the spring of 2016, rapid access services have increased by 28% to meet this demand, while routine treatment services have decreased by 7% (CCMH, 2016). Understanding the expectations Generation Z college students have about counseling services will help counselors structure care in ways that are congruent with these expectations or provide education to clients when expectations are significantly different from established models of care provided in college counseling centers.

As more and more Generation Z students enroll in colleges and universities across the country, increased resources, including counseling services, will be needed to help students be successful. Students are seeking mental health counseling services at their college counseling centers to help reduce stress, learn how to cope with psychological disorders, and facilitate change and growth (Reetz et al., 2015; CCMH, 2021). As college counseling centers are trying to meet this increase in students, they are often turning to services that are short-term and more solution-focused in nature through a stepped care model that provides a variety of services (AUCCD, 2021). This means that counselors are often charged with the task of building rapport and therapeutic relationships quickly. Knowing and understanding what expectations college students of Generation Z bring to the process of mental health counseling will help counselors be able to build rapport and meet student needs more efficiently and effectively.

The focus of this study was on the role expectations play in the counseling experience, including experience in and relationships built through the counseling process. Process expectations are the expectations clients have regarding the procedures of counseling, the role of the client and the counselor, and the therapeutic relationship (Constantino, 2012). Preliminary research has found that clients often start counseling with expectations regarding the process and roles of the client and counselor (Arnkoff et al., 2002; Delsignore & Schnyder, 2007; Dew & Bickman, 2005; Henshaw et al., 2020).

It is estimated that 40.5% of students who seek counseling services have not done so prior to coming to college (CCMH, 2020). This estimate points to a need for mental health counselors to both explore with and educate their clients on what they can expect during the process of counseling to provide informed consent, build rapport, and foster the therapeutic relationship. Identifying and understanding the expectations of today's college students is particularly important for an experience where the relationship is foundational, such as the therapeutic relationship (Friedlander et al., 2011; Horvath et al., 2011).

The therapeutic relationship is foundational to the counseling process and can impact the outcome of counseling services (Friedlander et al., 2011; Horvath et al., 2011). Positive expectations can produce positive experiences during and outcomes from mental health counseling (DeFife & Hilsenroth, 2011). Positive outcome expectations are strong predictors of clients' willingness to seek counseling services, positive attitudes when counseling services are sought, and positive outcomes from counseling services (Norberg et al., 2011; Swift et al., 2012; Vogel et al., 2008; Vogel et al., 2005).

In turn, lower outcome expectations come from the belief that counseling will result in neutral or negative changes in mental health (Norberg et al., 2011; Vogel et al., 2005). For example, if students seek counseling services to have the counselor tell them how to solve a specific problem, their expectations regarding the role of counselors would be challenged when the counselor explains the role of the counselor is to work with students to solve their concerns. Therefore, the beliefs and expectations clients bring into counseling can impact both their experience during and outcomes from mental health counseling services.

When clients have positive expectations regarding the outcome of counseling at the start of services, they tend to develop positive therapeutic relationships with their counselors throughout their time in treatment (Swift et al., 2012; Vogel et al., 2005). This positive therapeutic relationship makes it more likely that clients will have positive outcomes from counseling services (Westra et al., 2011). This makes it critical for counselors to have a discussion with clients to assess what expectations clients have regarding the process of counseling. During these discussions counselors can provide support for expectations that are congruent with the process of counseling and provide education for expectations that are not. When the first couple of appointments hold this level of importance, it is critical to know what kinds of expectations clients from Generation Z bring to the process of counseling. These expectations help counselors build a positive therapeutic relationship that will contribute to Generation Z clients feeling as though counseling was a positive experience that helped them meet their goals.

In addition to the increase in need for college mental health counseling services, counselors have also had to adjust to the particular culture and needs of a new generation of



college students. College counseling centers have had to figure out how to increase their knowledge of technology and social media to stay relevant to Generation Z students and make the counseling center appear more accessible (Farrer et al., 2013). The culture and needs of Generation Z are currently being identified and defined, as this is the newest generation to be attending college at the time of this study. Given that Generation Z is the newest generation to be studied, there is still much to know about how they perceive the process of counseling. Therefore, the purpose of this study was to identify and explore the expectations of Generation Z college students who have sought counseling services before their first appointment.

What defines and shapes a generation are the social, political, and economic events that happen when they are young and coming into adulthood (Seemiller & Grace, 2016). What is unique about Generation Z is that they experienced a global pandemic, as well as political unrest from racial injustices all within the same several month time span. The changes brought on by the Covid-19 pandemic, as well as the protests for civil rights and racial injustice will likely be some of the defining events of Generation Z. Participants spoke of these events and the impact they had on their lives and the way they viewed Generation Z. One of the ways this has impacted participants is through their reports of their generation not being afraid to take charge for what was right by working on issues that they care about. Due to the intensity of these events and the impact on mental health and well-being, it is possible that participants expected to be able to talk about these events with their counselors (Sweet & Avadhanam, 2023). This anomalous moment frames the study, but should not invalidate the insights gained.

### **Purpose and Rationale**

In 2015, the number of students who enrolled in colleges and universities across the country increased by 5% (CCMH, 2020). This modest 5% increase in student enrollment contributed to a significant 30%–40% increase in students who sought mental health counseling services at their college counseling centers (CCMH, 2015). Students who seek services can have perceptions of what mental health counseling will be like, whether these perceptions are accurate or not (DeFife & Hilsenroth, 2011). These perceptions may be influenced by many factors, including the time and generation in which college students grew up. The research on process expectations has been deemed as outdated and mainly consists of population samples of people who are not seeking mental health counseling services (Greenberg et al., 2006). Therefore, the current study helps to fill this gap in the literature by providing a study that was conducted on participants who sought counseling services at their college counseling center.

Expectations can significantly influence the counseling experience and outcome, making education about the process of counseling and the therapeutic relationship paramount to the success of counseling services (Seligman et al., 2009). Providing information to counter negative expectations and confirm positive expectations could help clients to feel more comfortable in the relationships they form with their counselors, which may ultimately help them to succeed in counseling. The success students get from meeting their counseling goals can help them to be successful in their academic and personal lives, which can contribute to retention in college (Gorman et al., 2021). Therefore, the goal of this study was to identify the process expectations of Generation Z clients who have sought mental health counseling services at a college counseling center.

The results of this study will help inform mental health counselors on the expectations Generation Z has for roles within counseling and the therapeutic relationship. Understanding the expectations Generation Z students have for the process of counseling will help counselors have a better understanding for how to clarify expectations in ways that are applicable to Generation Z both inside of counseling sessions and during outreach presentations across campus. Outreach is considered such an important activity for college counseling centers on college campuses, that it is evaluated in accreditation standards for the International Association of Counseling Services (Gibbons et al., 2019). In the most recent International Association of Counseling Services (IACS) standards for university and college counseling services (2023) outreach interventions need to offer programming that can meet the developmental needs of students for the purpose of increasing the benefits of their time spent in college. When college counselors can enhance their advocacy and outreach efforts with research on expectations for the process of counseling that is developmentally appropriate, this will not only meet accreditation standards, but also provide students with the knowledge they need to make decisions about whether to seek counseling services.

### **Research Question**

Based on this line of reasoning, the goal of this research is to identify expectations regarding the process of mental health counseling for Generation Z college students. In order to accomplish this goal, the following research question is presented: How do Generation Z college students perceive process expectations when seeking mental health counseling?

### Definition of Terms

The terms defined in this section highlight terms found in the literature. Terms related to how expectations are formed are included. Process expectations for mental health counseling services has a variety of terms that are included in this section. In addition, terms related to Generation Z are defined.

*Expectancies* are the “anticipatory belief that clients bring to treatment and can encompass beliefs about procedures, outcomes, therapists, or any other factor of the interventions and its delivery” (Nock & Kazdin, 2001, p. 155).

*Generation Z* is defined as people who are born between the years of 1995 and 2010 (Seemiller & Grace, 2016).

*Outcome expectations* are the beliefs clients have related to how effective the process and treatment of counseling will be in order to alleviate their symptoms and resolve their concerns (Constantino, 2012, p. 128).

*Process expectations* are the expectations clients have regarding the procedures of counseling, the role of the client and the counselor, the therapeutic relationship, and how long counseling will take to alleviate symptoms and resolve concerns (Constantino, 2012).

*Response expectancy* is the “the anticipation of one’s own automatic reactions to various situations and behaviors” (Kirsch, 1997, p. 69).

*Role expectancies* are the patterns of behavior viewed as appropriate or expected of a person who occupies a particular position . . . clients have role expectations both of themselves and of the therapist” (Arnkoff et al., 2002, p. 336).

*Therapeutic relationship* is a “collaborative relationship between clients and therapists, with regards to the tasks and goals of treatment” (Tambling, 2012, p. 405).

### **Review of the Literature**

In mental health counseling, expectations often accompany clients into counseling and shape their experiences (DeFife & Hilsenroth, 2011; Kirsch, 1990). Thus, this review of the extant literature examined relevant works and identified the places where further study would be beneficial. The review began with an explanation of the theoretical framework underlying this study, specifically focused on the research surrounding expectancy theory to understand how expectations are formed. To continue with the theoretical framework that informed this study, the theories of Erikson’s psychosocial development and emerging adulthood developmental theory were reviewed to understand the developmental context and tasks of the population in this study. Next, the review presented an overview of research related to what is already known and unknown about expectations regarding the procedures of counseling services, the role of the client and counselor, the therapeutic relationship. The purpose of this review was to identify and understand what elements make up expectations regarding the process of mental health counseling. This information was used to inform and compare the process expectations of Generation Z participants as gathered from this study. Literature referencing Generation Z expectations for the process of mental health counseling related to gender, race, and ethnicity was also reviewed. Finally, the Generation Z population was introduced to give context to what makes this generation unique; including various influences, such as social and political events, as well as technology and communication. Following a description of Generation Z and characteristics of this population was a review of the mental health concerns that are commonly

present in this generation to give context to why this generation of college students is seeking counseling services.

### **Theoretical Foundations**

Three theoretical foundations were used to provide structure and support for the phenomena being studied (Ravitch & Raggan, 2011). Response expectancy theory was important to this study because it explained how expectations are formed and influence experience, such as the anticipated experience of being a client in mental health counseling (Kirsch, 1999). Erikson's psychosocial development theory was important to this study because it highlighted tasks that were central to the stage of development for college-aged students and how these tasks related to why students may seek mental health counseling services. The theory of emerging adulthood was important to this study because it highlighted the continuum of developmental growth for people between the ages of 18 and 29 (Arnett, 2000). A review of these theories are presented below.

#### ***Response Expectancy Theory***

Response Expectancy Theory (RET) is a theory that explains how peoples' expectations influence their experiences (Kirsch, 1997). Expectations are formed by the response one has towards a particular situation or behavior and the anticipated outcomes for that particular situation or behavior (Kirsch, 1997). For example, college students who seek counseling services may expect that going to counseling will reduce their psychological distress. Having positive expectation for counseling influences the behaviors of seeking out and going to counseling services. What makes response expectancies different from other types of expectations related to an outcome is that they often originate from how a person expects to respond (Kirsch et al., 1990). Expectations are influenced by the knowledge or beliefs people have about the activities

they are thinking about doing, such as attending counseling sessions (Kirsch, 1985). If college students were given a positive recommendation to seek counseling services from friends, they would expect to have a positive experience in getting the support they need.

Response expectancies are critical to determining behaviors and influencing experiences in two ways. The first way response expectancies determine behavior is by their influence on beliefs regarding the outcome of a behavior. For example, people are more likely to engage in behaviors that they expect will result in positive outcomes. The second way is when people have strong feelings about how they expect to respond to certain situations, their feelings often self-confirm their responses (Kirsch, 1990). For example, students experiencing psychological distress will contact counseling services for an appointment because they have the expectation that counseling services will help to alleviate their psychological distress. After several sessions, clients experience an alleviation of the distress that brought them into counseling. Thus, it is the case that in RET, peoples' behaviors are motivated by non-volitional responses that are valued positively, such as seeking counseling services with the expectation that it will alleviate distress (Kirsch, 1990). Non-volitional responses are defined as responses that occur automatically, such as emotional reactions (Kirsch, 1985). In a study on college-aged students expectations and predictors of coping styles found that participants who expected that they would be able to modify their mood, were better able to cope with mood dysregulation (Kirsch et al., 1990). RET asserts that response expectancies are often "self-confirming" because experiences depend on what people expect to experience, such as the expectation that people can change their moods through positive coping behaviors (Kirsch, 1990, p. 10).

Response expectancy theory explains how expectations form, influence experiences, and motivate behaviors. RET informed this investigation by explaining how expectations are formed and how they can influence the beliefs and expectations people have about the process of mental health counseling. Understanding what expectations clients have about the process of counseling help clinicians understand how best to build the therapeutic relationship with a specific population, such as Generation Z.

### ***Erikson's Psychosocial Developmental Theory***

Erikson was one of the first to put forth a life-span model of human development (Sokol, 2009). In his life-span developmental model there are eight stages. One must sequentially pass through a stage to move on to the next stage of development. To pass on to the next stage of development one must resolve an inherent conflict or inner crisis to move forward. Erikson defined a crisis as “a developmental sense to connote not a threat of catastrophe, but a turning point, a crucial period of increased vulnerability and heightened potential” (Erikson, 1968, p. 96). The developmental task of each stage highlights either a successful or unsuccessful outcome, as seen in the names of the stages: trust versus mistrust, autonomy versus shame, initiative versus guilt, industry versus inferiority, identity versus role confusion, intimacy versus isolation, generativity versus stagnation, and ego integrity versus despair. The stages of identity versus role confusion and intimacy versus isolation both encompass current Generation Z college students between 18 and 22 (Evans et al., 2010).

Intimacy versus isolation is the first of three stages that make up the stages of adulthood in Erikson's theory (Evans et al., 2010). The main goal of this stage is to form intimate and committed relationships with others. These relationships can take the form of friendships and



romantic relationships. College students who struggle in this stage often do not have a strong sense of identity, which can lead to difficulty building these important relationships. The result of difficulty building relationships can be emotionally and psychologically distressing and can cause isolation from others (Evans et al., 2010). When college students struggle in this stage, they may seek mental health counseling services to address concerns about their identity and how they form relationships with others.

Identity versus role confusion is the stage between adolescence and adulthood where the central task is to define oneself (Evans et al., 2010). Defining oneself is not an easy task, as those in this stage are faced with answering the questions “Who am I?” and “What is my place in this world?” (Sokol, 2009, p. 142). People in this stage seek to answer these questions through increased independence and autonomy that leads to the exploration of career, worldviews, and relationships (Erikson, 1968; Sokol, 2009). In the college environment, students pick a major that helps prepare them for a career, are engaged with new people, ideas, and experiences that challenge and shape their worldview, and enter into a variety of new relationships. When identity is explored, role confusion can occur as people try to figure out who they are and try out different roles and identities. Role confusion can also occur when ones’ internal sense of identity does not match ones’ external identity as perceived from others. Identity is then ultimately formed when one can pair personal characteristics “with outlets for expression available in the environment” through career, understanding of worldview, and relationships (Sokol, 2009, p. 142).

Students often seek counseling services when they experience confusion with an aspect of their identity, their choice of major or career, a challenge to their worldview, or changes in

relationships (Evans et al., 2010). During the process of counseling, clients in this developmental stage can also experience role confusion when they do not understand what to expect in their role as a client. This can lead to an awkward start to building the therapeutic relationship and may negatively impact the client's experience in counseling. To help students understand their role in counseling, counselors must know what Generation Z students expect when entering into a counseling relationship. Understanding these expectations help counselors effectively build rapport with this population to foster a therapeutic relationship where clients can resolve their developmental concerns.

Erikson started the conversation on the difficulties young adults can have with conceptualizing their identities in career, relationships, and worldviews. Arnett (2000) continued the conversation on young adult development by describing how the social, political, and economic climate has shaped the identify development and relationships of college students at the time of this study. Both theories provide context for concerns students can have regarding their identities and relationships. As students emerge into adulthood, they can find support for these concerns through mental health counseling.

### ***Emerging Adult Developmental Theory***

The theory of emerging adulthood provides a developmental context for the population of this study. As emerging adults in college explore their options in love, work, and worldviews, they may seek the assistance of mental health counseling services on campus. Understanding the different aspects of development that impact the emerging adult population can be an important tool to inform possible discussion topics and interventions from counselors, as these will be influenced by the needs of this population. Since Generation Z is the latest generation to

matriculate to college and universities, their needs in college counseling centers may not be fully understood yet. Therefore, knowing what expectations the emerging adults of Generation Z have about the process of mental health counseling can help to make services more effective because counselors may begin to understand what this unique population thinks about the treatment they will receive when seeking counseling services, such as their role as the client, the counselor's role, and the therapeutic relationship.

Arnett (2000) proposed a theory that explained a continuum of developmental growth for people between the ages of 18 and 29. This period of emerging adulthood is one that is distinctive and separate from the stage of adolescence that comes before, and the period of young adulthood that comes after. Emerging adulthood is different because people in this stage have the independence of being a legal adult, but do not necessarily have the responsibilities of young adulthood, such as marriage and parenthood (Arnett, 2000). Arnett describes this developmental period as

A time of life when many different directions remain possible, when little about the future has been decided for certain, when the scope of independent exploration of life's possibilities is greater for most people than it will be at any other period of the life course. (Arnett, 2000, p. 469)

The state of having to decide between different directions and living with uncertainty about the future can cause a significant amount of anxiety for those in emerging adulthood. This anxiety experienced by emerging adults is a result of social and economic changes that have occurred over time (Arnett, 2000). In their college careers, Generation Z students have already been

tasked with managing stressors related to the global pandemic of Covid-19, as well as incidents of racial injustice that sparked outrage and protests all over the world.

The concept of this new stage of development emerged from economic and social changes that took place over the past several decades (Arnett, 2015). Since the 1960s the age of marriage and parenthood has risen slowly, but steadily into the 21st century. In 1960 the median age for marriage in the United States for women was 20.3 and 22.8 for men. By 2013, the marriage age in the United States rose to 26.6 for women and 29 for men and continues to rise (Arnett, 2015). The rise in age of marriage and parenthood is not surprising given that it often takes people longer to complete their college education and terminal degrees. In addition, employment may also be attained at a later age due to taking longer to finish their college education and terminal degrees. Therefore, the combination of increased time to complete higher education, job instability throughout the 20s, and getting married and starting a family later in life have all made it necessary to define this period of development (Arnett, 2015).

Arnett's theory of emerging adulthood highlighted the social, political, and economic context in which emerging adults live today (Arnett, 2000). Emerging adults in today's society are faced with an economy that often requires specialized education to obtain sustainable employment in the areas of information, technology, and services (Arnett, 2016). To meet the needs of this economy, emerging adults are entering into institutions of higher education to obtain advanced degrees. This pursuit of education can delay not only the path to employment in their field of choice, but also delay marriage or long-term partnership, home ownership, and having children. These traditional markers of adulthood are taking longer to obtain, making a

new stage of human development necessary to explain the time between adolescence and full adulthood (Arnett, 2015).

Arnett's theory of emerging adulthood is characterized by five features that highlight the tasks and experiences of emerging adults today. These five features are: identity exploration, instability, self-focus, in between feelings, and possibilities/optimism. These features are not meant to be developmental stages that emerging adults must pass through to get to the next stage, but as experiences and tasks that define this time in development. The task of identity exploration is for emerging adults to figure out who they are and what they want out of life in the areas of education, work, and romantic relationships. The second task of instability is defined by frequent moves in residence and job changes, which can start in college and continue beyond graduation. The third task of self-focus removes emerging adults focus from their parents to developing their identities and relationships outside of their family unit.

This fourth task of emerging adulthood highlights the feeling of being in between adolescence and adulthood. Emerging adults have the independence to go where they want, do what they want, and be who they want before being tied to the responsibilities of career, marriage, and children, yet they can also be dependent on others. For example, college students can be living independently in an apartment, but their parents are paying their rent. This balance between independence and dependence can leave emerging adults feeling as though they are taking on some adult responsibilities, but do not fully feel like an adult.

The fifth task of emerging adulthood is a time of being optimistic and thinking that the world is full of possibilities. When students think about life after graduation, the prospects of what they will do once they finish their degree can be both exciting and stressful. These

expectations can add internalized pressure to achieve a higher level of success, which can lead to the attainment of undergraduate and graduate degrees (Arnett, 2015, 2000).

In the college environment, students are often surrounded by services that help them be successful in their academic and personal lives, such as counseling services. Emerging adults who attend colleges and universities are likely to seek mental health counseling services when they need guidance and a space to process their options for their college experience and beyond, which may influence their expectations regarding the process for counseling because they may see the counselor as someone who can help them explore their identity, provide support for the stressors of instability, process their experiences of being in between independence and dependence, and provide support when exploring future possibilities. In other words, college students may perceive that mental health counseling is a space where they can get support and process what is going on in their lives.

While college students are focused on their studies and see it as a pathway to their future success, they also want to have fun and enjoy various aspects of college life, such as parties, friendships, romance, and general camaraderie (Arnett, 2016). Emerging adults in college have many opportunities to explore love and romantic relationships because they are in a setting with a large number of their peers. Conflict in these relationships, as well as the effects of partying can lead students to seek mental health counseling services for support. The structure of college also provides a considerable amount of unstructured time, which allows emerging adults to further explore and develop relationships inside and outside of the classroom. Having a considerable amount of unstructured time can also lead to conflicts with time management and

prioritizing tasks, as well as increased feelings of anxiety, all of which are common concerns that students bring to college counseling centers (CCMH, 2017).

College is seen as a unique time in a person's life and development, as it may be one of the few places where people live, work, and learn in one setting. College is also seen as a time for growth and change, where students explore their identities from a variety of sources and experiences (Taylor & Magolda Baxter, 2015). Arnett described colleges and universities as a "social island set off from the rest of society, a temporary safe haven where emerging adults can explore possibilities in love, work, and worldviews with many of the responsibilities of adult life kept at bay" (Arnett, 2016, p. 219). Arnett (2016) asserted that college is an ideal environment for emerging adults because they have the freedom to choose their major after they have had time to explore their options in their first and second years of study. They also have the option to switch their major if interests change. Taking a variety of classes and exploring different majors allows college students to develop their worldview, which helps to form their identities (Arnett, 2016). These inherent aspects of the structure and meaning of college are relevant for students to explore and build their identities in their career and personal lives (Taylor & Magolda Baxter, 2015). College students have increased access to various types of support on campus, including mental health counseling. When students engage in mental health counseling services during this time, it can be another way to explore possibilities in love and work, as well as develop their worldview. The process expectations Generation Z college students bring to counseling was found to be important to build rapport for a successful therapeutic relationship where students feel comfortable exploring possibilities in love, work, and worldviews.

## **Process Expectations**

Process expectations are the expectations clients have regarding the procedures of counseling, the role of the client and the counselor, the therapeutic relationship, and how long counseling will take to alleviate symptoms and resolve concerns (Constantino, 2012).

Preliminary research on the Millennial generation and Generation Z has found that clients often start counseling with expectations regarding the duration, process, and behaviors of the client and counselor (Arnkoff et al., 2002; Delsignore & Schnyder, 2007; Dew & Bickman, 2005; Henshaw et al., 2020; Wang et al., 2022). A current gap in the literature for counseling expectations is identifying and understanding the process expectations of Generation Z college students who have sought counseling services (Connolly Gibbons et al., 2003). At the time of this study, there was a distinct lack of research regarding how Generation Z college students perceive process expectations. When using the keywords “Generation Z or Gen Z or post-millennials or post-millennial, or igeration” AND “process expectations,” AND “college students or university student or undergraduates,” AND “counseling or therapy or psychotherapy or treatment” from the years of 2013 to 2022 there were no relevant studies that came up in the Academic Search Premiere database. When using the keywords “process expectations,” AND “college students or university student or undergraduates,” AND “counseling or therapy or psychotherapy or treatment” from the years of 2013 to 2022, there were four relevant studies that came up in the Academic Search Premiere database (Elchert & Gaasedelen, 2016; Price, 2016). Therefore, this study expanded the existing literature related to exploring the expectations Generation Z college student clients have about the process of counseling.



### ***Procedures of Counseling***

Clients expect that they will be informed of the parameters of the treatment they will receive (Glass et al., 2001). The parameters of treatment are discussed in the first initial assessment appointment and throughout the clients' time obtaining counseling services. Making sure clients understand the parameters of treatment, including their rights and responsibilities as a client is a part of their informed consent to counseling treatment. During the informed consent process, the counselor will often describe the type(s) of counseling they provide, depending on their theoretical orientation. When college students do not know what to expect for the procedures of counseling after their initial assessment, they may feel unsure of how to proceed in subsequent sessions (Bohart & Wade, 2013). This makes education from the counselor essential to easing the transition into therapeutic work after the initial assessment has been completed.

Clients also expect that there will be a session where they will do most of the talking, such as an initial assessment at the start of counseling services (Swift & Callahan, 2010). In subsequent sessions, clients expect to talk about a variety of topics (Joyce & Piper, 1998). For example, clients of previous generations expected that counselors will ask them to talk about their concerns, feelings, and experiences, as well as ask questions and present additional topics for discussion (Arnkoff et al., 2002; Bordin, 1955; Gladstein, 1969; Joyce et al., 2000). Joyce et al. (2000) identified more specific therapeutic topics such as symptoms, childhood memories, present relationships, and a connection between past experiences and current concerns. Overall, clients expect that they will spend a significant amount of time in counseling talking about the problems that brought them into counseling (Tambling, 2012).

A recent quantitative study that assessed the pre-intake expectations of Generation Z college students regarding: (a) the process of counseling, (b) how effective they perceive counseling to be, and (c) their attendance after the intake (Henshaw et al., 2020). Participants were 418 clients who did not have a history of counseling services and had complete intake and termination data. Data was collected from September of 2013 to April of 2016 (Henshaw et al., 2020).

The sample of clients in this study was comprised mostly of Caucasian (72.25%) females (71.1%) who identified as heterosexual (68.7%). Other races in the sample included: Latinx (8.6%), African American (6.0%), Asian/Asian American (5.5%), and more than one ethnicity (4.6%). The majority of clients were freshmen (29.2%), then sophomores (27%), juniors (21.8%), and seniors (22%). The authors noted that the sample in this study is representative of the sample that seeks counseling services at the college counseling center where data was collected (Henshaw et al., 2020).

Six measures were assessed in the study: (a) demographic characteristics, (b) therapist assignment, (c) confidence in counseling, (d) dropout after intake, (e) therapist-rated unsuccessful treatment, and (f) counseling process expectations. The demographic characteristics that were described above were taken from the intake form. Each participant was assigned to one of four staff therapists at the college counseling center where data was collected. Participants were asked to rate their confidence in counseling on a 7-point Likert scale through the prompt, “How confident are you that counseling will help you feel better than you do now?” When a client ended counseling, the therapist coded in the termination note whether the client continued counseling after the initial intake. Also in the termination note was a place to determine if

treatment had been successful by recording a yes or no for if treatment was or wasn't successful (Henshaw et al., 2020).

Every participant was asked to answer the question, "What do you expect will happen in your counseling sessions to help you feel better than you do now?" The responses resulted in three codes that described different levels of specificity for expectations for the process of counseling. The codes that emerged from the data were: (a) Don't Know (no specified process for improvement), (b) Just Talking (talking with counselor, without any specific activities, goals, or outcomes mentioned), and (c) Beyond Talking (some goal or activity is mentioned that specifies therapeutic activity, such as consulting, planning, learning skills, or gaining insight) (Henshaw et al., 2020, p. 848).

The expectation that was reported most frequently from participants was Beyond Talking at 52.2% of the sample. The second most frequent expectations was Just Talking at 26.3% of the participant sample. Lastly, 21.5% of participants reported Don't Know when it came to their expectations for counseling services (Henshaw et al., 2020). The authors hypothesized that participants who didn't know what to expect in counseling services would be more likely to drop out after the initial intake. Out of the 418 participants, 90 participants (21.5%) reported that they did not know what to expect to happen in counseling services. However, a small number of participants ( $n = 33$ ) or 7.9% did not continue counseling services after the intake (Henshaw et al., 2020). When compared to the Just Talking or Beyond Talking groups of participants, those who answered Don't Know were 2.68 times more likely to drop out after the intake (Henshaw et al., 2020). For the participants who engaged in counseling services after the initial intake, 80.4% ( $n = 336$ ) of cases were considered successful by the counselor at the end of services, as opposed

to 19.6 ( $n = 82$ ) that were considered to not be successful by the counselor who provided services (Henshaw et al., 2020).

Overall, this study assesses that Generation Z college students can have different expectations when it comes to what they will be doing with their counselor in session. This study also highlights that a little over half of Generation Z college students who sought counseling services at their college counseling center expected that counseling would consist of having goals and an active relationship that included planning, learning skills, and/or gaining insight. This study from Henshaw and colleagues (2020) not only adds to the existing literature on process and outcome expectations, but becomes part of the foundational literature on the pre-counseling expectations of Generation Z college students, an area of which is only just starting to increase its knowledge.

### ***The Role of the Client and Counselor***

Role expectations are defined as “patterns of behavior viewed as appropriate or expected of a person who occupies a particular position” (Arnkoff et al., 2002, p. 336). In the studies reviewed in this section from those in the Millennial generation, clients can have role expectations both of themselves and of the therapist (Arnkoff et al., 2002). When clients make their first appointment, they can view themselves as “active agents” by taking the initiative to come to their first counseling session (Hill, 2005, p. 431). Once counseling is started, it is important for clients to understand what it will involve to know their role in the therapeutic relationship (Hill, 2005). What is known about the role clients expect to play, from research on client expectations, is that they will be active in the counseling process by collaborating with their counselor to receive support that is unique to them (Fisher & Boswell, 2016; Norcross,

2011; Norcross & Wampold, 2018). Clients expect to be active in the therapeutic relationship by talking about their experiences, providing discussion topics, expressing their feelings, and asking questions (Joyce & Piper, 1998).

A study that explored Millennial college students' perceptions of counseling and willingness to engage in counseling services found significant differences between undergraduate and graduate students with participants reporting that they felt more comfortable talking about and expressing their feelings as they got older (Dotson-Blake et al., 2010). The Millennial generation is the generation that comes before Generation Z. A survey was given to a convenience sample of 288 students consisting of 69.8% female and 30.2% males with a median age of 20 years old, and a range of ages from 17 to 56 years old. The racial diversity of the sample included 65.3% European American, 22.6% African American, 3.8% Latino(a), 4.5% Asian, 1.4% Biracial, and 2.4% identified as other.

When asked if participants felt comfortable with identifying their feelings, 97% of graduate student participants, 87% of seniors, 80% of juniors, 74% of freshmen, and 70% of sophomores identified that they were comfortable identifying their feelings in a therapeutic setting such as counseling. The authors of the study hypothesized that as students grow older they are better able to identify their feelings (Dotson-Blake et al., 2010). Participants were also asked if they felt comfortable processing their emotions after they have identified them. Similar results were found, with 97% of graduate student participants, 93% of seniors, 77% of juniors, 73% of sophomores, and 72% of freshmen identified that they felt comfortable processing their emotions. As students grow older, they seemed more comfortable processing their emotions after identifying feelings. However, some groups felt more or less comfortable with processing

emotions compared to identifying feelings. Graduate students felt equally comfortable with identifying feelings and processing their emotions. Seniors felt an increased comfort with processing these emotions compared with identifying feelings. Juniors felt less comfortable processing emotions compared to identifying feelings. Sophomores on the other hand felt more comfortable processing emotions than identifying feelings. Freshmen felt less comfortable processing emotions compared to identifying feelings.

The authors differentiated between identifying feelings and processing emotions. Identifying feelings were considered a cognitive skill because client label and categorize their feelings as sad, angry, or happy. Processing emotions was thought to reflect the scope of emotional capabilities, such as saying “I felt betrayed” (Dotson-Blake et al., 2010, p. 3). Being able to identify and process emotions is a vital role for the client to have in the therapeutic process, as well as a strong predictor of attitudes that may influence seeking professional counseling services (Vogel & Wester, 2003). At the time of this study, little is known about how Generation Z college students will feel about expressing their feelings in counseling. What is known is that Generation Z has described themselves as thoughtful and compassionate (Seemiller & Grace, 2016). This suggests that they may have less difficulty expressing their feelings in a therapeutic setting than Millennial college students.

In another qualitative study, Millennial college students who were interviewed on their beliefs and expectations about counseling services identified several roles clients and therapists have in counseling (Hill et al., 2012). These students had not had previous counseling experience and were enrolled in an introductory psychology class. Through interviews the authors asked students questions regarding: (a) beliefs about therapy, (b) the sources of those beliefs, (c)

expectations and preferences about the role of clients and therapists in therapy, (d) expectations and preferences about the ideal therapeutic relationship and managing conflict in therapy, (e) perceived benefits of and barriers to seeking therapy, and (f) the perceived effects of receiving a psychiatric diagnosis (Hill et al., 2012, p. 14). Overall, participants thought that clients should give information about their lives and be open to talking about their feelings and the counselor should be active by giving advice, analyzing problems, and giving feedback.

The sample for the study above (Hill et al., 2012) was a total of 12 participants, with nine identifying as female and three identifying as male. This sample was comprised of five African American participants, four European American participants, and three Asian American participants. All the participants were between the ages of 18 and 20, with four freshmen students, six sophomore year students, and two junior students. The authors noted that this sample was representative of the introductory psychology class where participants were gathered, but provided more racial diversity than was present in the class as a whole. This sample of students was from the generation before Generation Z given that the study was published in 2012; however, this data may provide insight into expectations of how Generation Z could identify the roles of the client and counselor in the therapeutic relationship.

Participants thought that clients should give information about their lives and be open to talking about their feelings. Participants also felt that clients should be able to acknowledge the areas of their lives that are problematic and be willing to be positive and make changes. Finally, participants thought that clients need to be receptive by being cooperative, following the directions of the counselor, and having an open mind (Hill et al., 2012). These expectations of the client role relate to the Generation Z characteristics of being responsible to make changes in

their lives and being open-minded (Seemiller & Grace, 2016). These characteristics could influence Generation Z expectations regarding their role as the client in counseling and the therapeutic relationship by making them more open to seek counseling services and being more active in the process of change.

Participants were also interviewed on what they thought the role of the counselor should be during counseling services (Hill et al., 2012). They believed the counselor should be active by giving advice, analyzing problems, and giving feedback. These activities are meant to provide insight on the client situations so that the counselor and client can discuss options. Participants thought that the counselor should foster a “warm, supportive, empathic, genuine, caring, and professional” therapeutic relationship (Hill et al., 2012, p. 18). Participants also thought that the counselor should be helpful to the client. Finally, participants thought that the counselor should listen to their clients (Hill et al., 2012).

Generation Z has been described as open-minded and responsible (Seemiller & Grace, 2016, p. 8). These characteristics relate to the perceptions of the role of the client that were described from the Millennial generation in that clients should be receptive and have an open mind (Hill et al., 2012). The perception that clients should be able to take responsibility for problematic areas in their lives and be willing to be positive and make changes also aligns with the value Generation Z places on being responsible (Hill et al., 2012). How the characteristics of Generation Z relates to their perceptions of the roles of the client and counselor is an area of research that presents a gap in the current literature on process expectations that this study has started to fill.



### ***The Therapeutic Relationship***

The therapeutic relationship is defined as a “collaborative relationship between clients and therapists, with regards to the tasks and goals of treatment” (Tambling, 2012, p. 405).

Clients’ expectations regarding the therapeutic relationship impact the formation of the therapeutic alliance and a positive working relationship between the client and the counselor (Tambling, 2012). During counseling sessions, the education the counselor provides regarding the role of the client and counselor and collaboration on goals for treatment impacts the forming of the therapeutic relationship (Ackerman & Hilsenroth, 2003; Locati et al., 2019; Patterson et al., 2013) Understanding the expectations Generation Z clients have when they enter counseling will help counselors educate clients on the therapeutic relationship. This education could be helpful to clients who are unsure of how they will form a relationship with their counselor that will be beneficial to them during counseling services.

When clients have expectations regarding the role of the counselor, this influences their expectations for the therapeutic relationship (Tambling, 2012). If the patterns of behavior the counselor displays are in line with what the client expects, then it is more likely that a positive therapeutic alliance will form. However, if the patterns of behavior displayed by the counselor are incongruent with what the client was expecting, this could challenge the client’s expectations in a positive or negative way. For example, if the client was expecting negatively perceived behaviors from the counselor and instead experienced positive behaviors, their expectations are then positively changed and the therapeutic relationship would continue to build in a positive manner. In turn, if the client was expecting positive behaviors from the counselor and

experienced negative behaviors then their expectations would negatively change and the therapeutic alliance would be compromised (Westra et al., 2010).

Some of the ways clients expect to have a positive experience in counseling is that the therapeutic relationship will be encouraging, validating, and providing of hope so that they will be able to work on their concerns through the process of counseling (Glass et al., 2001). Other ways clients can expect to have a positive experience in counseling is through the counselor's calm demeanor and providing a non-judgmental space by communicating their desire to help to understand the client's issues and work towards fixing them (Tryon, 2002). The identification of these characteristics suggests that clients expect a supportive therapeutic relationship where the counselor validates their concerns and provides hope to feel that their concerns are legitimate and manageable (Tambling, 2012). When clients understand their role and can collaborate on their goals for treatment, this impacts the outcome of counseling, with research confirming that clients view the therapeutic relationship as paramount to their success (DeFife & Hilsenroth, 2011; Friedlander et al., 2011; Horvath et al., 2011).

Characteristics that Generation Z used to describe themselves that may relate to the therapeutic relationship are being thoughtful, compassionate, and loyal. The value placed on these characteristics implies that they may care about others and the relationships they can build with others (Seemiller & Grace, 2016). As cited in the section on the role of the client and counselor, the characteristic of being compassionate aligns with how participants from the previous generation described their perceptions of the therapeutic relationship as being "warm, supportive, empathic, genuine, caring, and professional" (Hill et al., 2012, p. 18). These values of being thoughtful, compassionate, and loyal could influence their perception of the therapeutic

relationship as one that is important. The connection between the characteristics of Generation Z and their perceptions of the therapeutic relationship has not yet been established, making this an area of research that is needed to know how this generation views this fundamental aspect of mental health counseling. The current study started to address this particular gap in the literature.

### ***Duration of Counseling Services***

The expectations clients have about the duration of counseling include how long clients think it will take to alleviate their symptoms and resolve their concerns (Owen et al., 2009). Greenberg et al. (2006) found that clients tend to have a general sense for how long this will take. However, the duration of counseling services is an expectation that is often different between the client and the counselor (Reis & Brown, 2006). Clients usually want fewer sessions than counselors recommend, which means they can end counseling services before the counselor thinks they are ready to terminate the relationship (Pekarik, 1985; Pekarik & Finney-Owen, 1987). The expectation for how long clients think they need to be in counseling will often influence their decision of when to end counseling services (Reis & Brown, 2006).

In the latest annual report from the Center for Collegiate Mental Health (CCMH), the average number of appointments clients attended was 4.56 sessions, which includes the initial assessment (CCMH, 2017). This number of sessions is a slight decrease from the annual report for 2013 where the average number of sessions was 4.73 (CCMH, 2014). The decrease in sessions from 2013 to 2017 seems significantly smaller since it has also been reported that students are presenting to college counseling centers with complex concerns and needs (Gallagher, 2014). This reduction in number of sessions highlights the need for counselors to know what expectations related to the therapeutic relationship Generation Z college students

have when they seek counseling services so that expectations can be adjusted if needed and positive rapport can be built.

The number of reported average sessions from the CCMH report (CCMH, 2017) provides context for how quickly college mental health counselors need to build rapport with clients to help them alleviate their concerns and provide resources to get their needs met. Understanding what expectations Generation Z college students have regarding how long they believe they will need counseling could influence counselors' behavior inside of session; depending on how many sessions clients think they need to alleviate their symptoms and resolve their concerns. For example, if clients expect their symptoms and concerns to be resolved within a few sessions, then counselors would know to employ techniques that are solution focused in nature. On the other hand, if clients expect that it will take many sessions to alleviate symptoms and resolve concerns, then counselors may use different techniques that take more session to implement or refer clients to long-term counseling services, as more and more college counseling centers are moving towards short-term models for counseling services (CCMH, 2017). Understanding the expectations Generation Z college students have regarding mental health counseling services can help counselors to prepare clients for the counseling process and effectively build the therapeutic relationship for counseling services to be effective in the number of sessions clients may desire. To date there is a lack of research that explores all the components of process expectations (procedures, role of client and counselor, therapeutic relationship, and duration of counseling services) together and in a college mental health counseling setting (Aubuchon-Endsley & Callahan, 2014). The importance of expectations and their influence on the experience in and

outcomes from counseling services with a population that is particularly vulnerable to stress, such as college students, makes it critical for more research to be done in this area.

## **Generation Z**

Generation Z is defined as people who were born between the years of 1995 and 2010 and make up an estimated 69 million people in the United States (Parker & Igielnik, 2020). This section begins with a review on previous generations and how Generation Z compared to their predecessors. Next, the social and political events that shaped the lives of Generation Z are described. Then technology and its influence on the lives and communication styles of Generation Z is presented. The next section is a review of characteristics that have been attributed to Generation Z. This section ends with a review of the mental health concerns that are unique to this generation.

### ***Previous Generations and Generation Z***

To understand Generation Z, it is important to review the generations that came before and how Generation Z compares to these generations. The Baby Boomers, who were born between 1946 and 1964, were a generation that came of age in a post-World War II environment of economic stability and the ability to pursue “the American Dream” (Seemiller & Grace, 2016). Baby Boomers and Generation Z have both been impacted by war. For Generation Z, their experiences of war were impacted by the September 11th terrorist attacks on American soil, the Homeland Security Advisory System that alerted them to the level of terrorist threat in the nation at any given point, and the Iraq war that followed (Seemiller & Grace, 2016).

Generation Z experienced the United States’ economy crashing and unemployment rates increasing, compared to the Baby Boomers who experienced a stable economy and increased

opportunities for employment. After World War II, the Baby Boomers also experienced social and political instability with the rise of the Civil Rights Movement and anti-Vietnam war demonstrations. These movements could be described as similar to the current struggles of Lesbian, Gay, Bisexual, and Transgender (LGBT) rights and climate change that Generation Z face today (Seemiller & Grace, 2016).

After the Baby Boomers, there was Generation X, members of this generation were born between the years of 1965 and 1980, which make them the parents of Generation Z. Generation X grew up with the start of computer technology, the norm of having both parents work, and the rise of divorce rates. Overall, Generation Z has been labeled as more optimistic than their parents of Generation X, who have been described as “cynical, skeptical, and pragmatic” (Seemiller & Grace, 2016, p. 3). While Generation X has been described as cynical, skeptical, and pragmatic, this has not had a negative impact on their parenting, as Generation X provided a family life where parents play an active and supportive role in their children’s lives (Seemiller & Grace, 2016).

The generation that followed Generation X was Generation Y, also known as the Millennials, who were born between the years of 1981 and 1994. Unlike Generation X and Z, Millennials grew up with parents from the Baby Boomer generation, who had stable finances. Growing up in families with stable finances created an unfortunate expectation of financial stability in adulthood. This was not their reality. Their reality included crippling student debt and unemployment. Both Millennials and Generation Z were born at times when social and economic developments influenced their own development, as seen through the concept of emerging adulthood (Arnett, 2015). For full description of emerging adulthood, review the section on

emerging adult developmental theory earlier in this review of literature. Millennials were also the first to adopt social media and other forms of modern technology (Seemiller & Grace, 2016).

Social, political, economic, and technological developments shape Generation Z and how they view themselves and their relationships with others. These factors make it important to identify what Generation Z expects from an activity where self-exploration and relationship building is fundamental, such as in mental health counseling services.

### ***Social, Political, and Economic Influences on Generation Z***

Each generation is shaped by prominent social, political, and economic events and Generation Z is no exception (Seemiller & Grace, 2016). Those considered in Generation Z were born between the years of 1995 and 2010 (Seemiller & Grace, 2016). This means that Generation Z has grown up in a time of terrorism and war, school shootings, and government mandates on academic testing. The first and most significant national event of their lives was the terrorist attacks on September 11, 2001, and as a result they have known a world at war most of their lives with the Iraq war (Seemiller & Grace, 2016; Turner, 2015). Growing up in a world at war may have impacted general feelings of safety and security for this generation (Turner, 2015). Generation Z may feel as though their safety and security can be compromised even in the school setting. Before coming to college, Generation Z have heard of multiple shootings on college campuses, namely the Virginia Tech shooting in 2007, which had a profound impact on support for mental health in higher education (Kay & Schwartz, 2010). These shootings may also have increased anxiety related to personal safety for the members of Generation Z who currently attend college.

School has been a source of anxiety in ways that were different from previous generations. Before attending college, the education of Generation Z was heavily influenced by the No Child Left Behind Act enacted in 2001, which emphasized standardized tests as the main measurement of learning and achievement. The focus of performing on standardized tests had an impact of increased test anxiety for this generation (Segool et al., 2013). Schools were also under pressure to perform well on these tests to secure funding from the government, which likely added additional pressure to students.

Generation Z also witnessed the United States economy and housing markets crash, which led to the Great Recession. The Great Recession was caused by several factors, including banks using mortgage loans to trade with investors to increase profits. As the banks needed more and more mortgage loans to trade, they loaned large sums of money, often more than what the house was worth, to people with questionable credit who wouldn't be able to pay back the loans (Amadeo, 2019). This recession led to increased unemployment that likely impacted the financial stability of their families (Turner, 2015). This financial instability could also make their ability to pay for college a struggle, especially when the rising cost of attending college is considered. The social, political, and economic events that occurred between 1995 and 2010 have impacted nearly every area of life for Generation Z, including their lives at home and school. Another entity that has had a strong influence on Generation Z is technology and how it has changed the way they understand themselves and communicate with each other.

### ***Technology and Social Media***

Society has become accustomed to interactions with others through technology (Turner, 2015). In a society where technology has become a primary form of communication, Generation



Z has been described as digital natives because they have not known a time where the Internet did not exist (Lanier, 2017; Turner, 2015). The impact of the advancement of technology has meant that Generation Z has grown up in two realities: physical and virtual. In the virtual reality Generation Z has been able to instantly communicate with others and communicate in multiple formats, such as texting, Facebook<sup>©</sup> (<http://facebook.com>), and Instagram<sup>©</sup> (<http://instagram.com>). These forms of communication are readily available and socially accepted by this generation to the point where it is greatly influencing their relationships with others and themselves (Seemiller & Grace, 2016; Turner, 2015). For example, a view of one's own popularity is not necessarily through how many friends one has, but in how many likes and shares they get from their friends and followers on social media (Girardi, 2015). Another perspective is that online communication has contributed to stronger relationships offline because of increased communication with family and friends through messages and sharing of photos (Ellison et al., 2007). The impact of technology on relationships is undeniable and for the digital natives of Generation Z also the most influential as they learn to navigate relationships with themselves and others (Girardi, 2015; Turner, 2015; Twenge, 2017; Twenge et al., 2018).

The implications of being native to this kind of world means that Generation Z can interact with others at all times through their electronic devices. A drawback to continuous use of electronic devices is that there is an expectation to be constantly connected with others through texting and social media, which can create anxiety for members of Generation Z because they can worry about missing a post on social media or what is the status of relationships when people haven't responded to their texts (Twenge, 2017; Twenge et al., 2018). The anxiety that is created from these fears has now been coined by the term "fear of missing out" or "fomo" for short. The

reality of being constantly connected has resulted in face-to-face communication being viewed as a less preferred method of communication over electronic messages (Turkle, 2011).

However, a study conducted to identify traits of Millennial and Generation Z workers by one of the largest Human Resources services and staffing companies in the United States showed that 53% of Generation Z participants preferred in-person communication over electronic communication (Schawbel, 2014). Generation Z also prefers to have feedback from their employers to be delivered in person instead of email or instant message (Schawbel, 2014). Though Generation Z has come of age in a time where electronic communication has been an established norm, it appears that they still value in-person communication when it is important, such as getting feedback from an employer or maybe within a therapeutic relationship such as counseling.

When people from Generation Z voluntarily seek counseling services, they are opting for a form of communication in which they may have less experience. Turner (2015) asserted that the youth of Generation Z are “no longer becoming trained in the nuances and art of conversation,” which could impact both their emotional development and relationships with others (Turner, 2015, p. 109). The impact of not being trained in the nuances of conversation may also impact the therapeutic relationship in that clients can struggle with knowing how to respond when they are given therapeutic space to talk about their concerns.

### ***Generation Z Demographics***

Generation Z has been touted as the most diverse generation in terms of race and ethnicity (Parker & Igielnik, 2020). In a poll from the Pew Research Center (Parker & Igielnik, 2020), Generation Z is comprised of people who identify as White (52%), Hispanics (25%),

Black (14%), Asian (6%), and Other (4%). In a poll from the Pew Research Center on the racial and ethnic demographics of the Millennial generation, people who identified as White comprised of 61% of the population, as well as people who identified as Hispanic (18%), Black (15%), Asian (4%), and Other (1%; Fry & Parker, 2018). The decrease in people who identify as White and increase in people who identify as racial minorities has steadily increased since the Baby Boomer generation, who were born between 1946 and 1964 (Fry & Parker, 2018).

Generation Z has also been described as more diverse in terms of gender identity (CCMH, 2014, 2018). The most recent published survey from the Center for Collegiate Mental Health contained client demographic information, including data on gender identity, from college counseling centers across the United States (CCMH, 2018). Gender identity was labeled into four categories: female, male, transgender, and self-identify. Self-identify is a gender category where students can label and identify their own gender expression. Within Generation Z, college students who identified as female represented 64% of the clients who sought counseling services in the 2017 to 2018 academic year. College students who identified as male represented 34% of the clients who sought counseling services in that same academic year. Transgender and self-identify clients who sought counseling services represented 0.7% and 1.4%, respectively (CCMH, 2018).

Since the 2012 to 2013 academic year, the increase in transgender and self-identify clients who have sought services at college counseling centers has increased significantly. From 2012 to 2013 students who identified as female represented 63.3% of students who sought services at college counseling centers. Students who identified as male represented 35.9% of students who sought services at college counseling centers. Students who identified as

transgender and self-identify represented 0.3% and 0.4% of the population sampled (CCMH, 2014). When comparing gender demographics between 2013 and 2018, more students who identify as female, transgender, and self-identity sought counseling services. At the same time fewer students who identified as male sought counseling services at their college counseling centers.

Demographic data from the counseling center where data were collected showed that counseling services were sought by 1,704 clients in the fiscal year of 2018. Of those 1,704 students, 71.7% identified as Caucasian, 10.3% identified as African American, 9.7% identified as Asian/Pacific Islander, 2.9% identified as Hispanic/Latinx, and .2% identified as American Indian/Alaska Native. In terms of gender identity, 60.2% identified as women, 37.3% identified as men, 0.6% identified as transgender, and 1.8% self-identified their gender expression (Personal Communication, 2019). The counseling center where data were collected is a part of a higher education institution that is composed of primarily Caucasian students at 74% of the total student population for the fall semester of 2018 (Snyder et al., 2018). The number of students who attended the institution and sought counseling services where data was collected was similar, with the exception of Caucasian students (2.3% fewer students), African American (3.3% more students), and Asian/Pacific Islander (5.8% more students).

### ***Generation Z Characteristics***

In a recent mixed methods study of over 1,000 Generation Z students ( $N = 1,143$ ) from colleges and universities across the United States, Seemiller and Grace (2016) identified several characteristics that Generation Z students used to describe themselves. These characteristics were: loyal, open-minded, responsible, determined, compassionate, and thoughtful (Seemiller &

Grace, 2016, p. 8). The characteristic of being loyal highlights how Generation Z can show strong feelings and concern for others within their social circles and beyond (Seemiller & Grace, 2016). Describing themselves as open-minded could relate to their ability to understand and accept everyone's unique individuality (Seemiller & Grace, 2016). Generation Z described themselves as compassionate and thoughtful, which may be due to their awareness of the struggles faced by family, friends, and communities all over the world as a result of their constant connection to technology and social media (Loveland, 2017; Seemiller & Grace, 2016).

Being more aware of others and feeling a sense of responsibility may contribute to members of Generation Z wanting to participate in service that has a profound impact on the systemic and structural problems the world faces today (Loveland, 2017; Seemiller & Grace, 2016). Their thoughtfulness, compassion, and sense of responsibility has contributed to them being described as "we-centric" with a genuine desire to help others. This "we-centric" worldview influences a cultural ethos of being focused on social justice and diversity (Meehan, 2016). This sense of responsibility and focus on social justice and diversity may contribute to their mentality of "if not you, then who?" (Seemiller & Grace, 2016, p. 11). The combination of being responsible and determined may also impact the work ethic of Generation Z, whether they are working towards a social justice cause or in their careers.

Generation Z has also been described as pragmatic for wanting career opportunities with more job security (Lanier, 2017). They may be more pragmatic about their job security because they didn't grow up in a stable economy and have significant debt from the rising costs of a college education (Gutfreund, 2016). As a college degree becomes more and more costly, Generation Z students can see college as not only a personal and professional investment, but a

financial investment as well. This is no surprise given the rising numbers of average student debt, with the current debt average at \$30,100 after finishing college (Cochrane & Cheng, 2016; Loveland, 2017). It is likely that this generation is willing to take on that kind of financial responsibility because 81% of students believe that graduating from college is “crucial” to starting their careers (Loveland, 2017, p. 36). The financial investment of going to college may influence Generation Z college student to seek mental health counseling services on campus because their tuition and fees go towards supporting these services. This may make Generation Z college students feel they are entitled to on campus counseling services and for these services to meet all their mental health needs, whether that is possible or not. As more and more Generation Z college students seek on campus counseling services, it is important to know what they expect for the process of counseling, given the possible perception that they are entitled to these services.

While there has been plenty of praise to go around for Generation Z, not all the comments about this generation have been positive. Generation Z has also been described as “insecure,” “entitled,” “self-centered,” “unable to handle adult responsibilities,” and “overly sensitive” (Katz, 2019; Piore, 2019). These comments may come from the perception that this generation grew up with so much technology that it led them to “expect instant answers to every question” (Loveland, 2017). Generation Z being labeled as “self-centered,” “entitled,” and “insecure” may be influenced by the prevalence of social media shaping their sense of self and relationships with others (Parker-Pope, 2018; Villa et al., 2018). The perception that Generation Z is “unable to handle adult responsibilities” and is “overly sensitive” may come from the perception that this generation dislikes self-reflection and taking on leadership roles (Katz,

2019). When describing an entire generation of people, it would be unfair to attribute only positive or negative traits to such a large group of people. It is also important to understand that there is often a difference between how another generation describes the youngest generation and how that generation describes themselves (Seemiller & Grace, 2016).

All these events and characteristics have shaped the attitudes, beliefs, social norms, and behaviors of this newest generation (Seemiller & Grace, 2016). Generation Z has seen an unprecedented rate of change in the technology of how we communicate with each other and see the world around us. Generation Z has also witnessed changes in the economy and cost of higher education that has impacted their view of college and the work they will do after college. Given that this generation is the newest to be studied, it is important that college counselors understand how members of Generation Z describe themselves and how that description could relate to their expectations for the process of mental health counseling.

### ***Generation Z Mental Health***

Students from Generation Z are coming to college counseling centers with more complicated concerns and needs compared to previous generations, such as having more than one mental health disorder and having a mental health diagnosis that needs medication to increase or stabilize functioning (Gallagher, 2014). The most recent assessments of utilization rates for college counseling centers showed a 30% increase in service utilization with just a 5% increase in institutional enrollment for Generation Z students (CCMH, 2017). This statistic may be explained by Generation Z college students feeling less stigma related to seeking professional help for mental health concerns, increased psychological distress from a variety of factors, and increased entitlement to seek this type of support services.

Generation Z college students seek on campus counseling services for a variety of reasons. In a national survey of college counseling center data, the top 12 primary presenting concerns as identified by Generation Z college students were: anxiety, depression, relationship problems, stress, family, interpersonal functioning, academic performance, grief/loss, mood instability, adjustment to new environment, self-esteem/confidence, and alcohol abuse (CCMH, 2017). The presenting concerns of this report illustrate that Generation Z clients struggle with anxiety and depression that may impact their relationships, functioning, and in some cases their motivation to live.

Generation Z college students can face a host of challenges in their personal and academic lives. These challenges often relate to their stage of development within Erikson's psychosocial stages of development and emerging adulthood (Arnett, 2000, 2015; Evans et al., 2010). In their personal lives, Erikson's intimacy versus isolation stage is seen through finding and making meaningful friendships and romantic partners, breaking up with friends and romantic partners, and handling conflicts with people at work and class (CCMH, 2017). Contemplating whether they want to continue in a specific major or career relates to both identity vs. role confusion, as well as the importance of exploring career options in emerging adulthood (CCMH, 2017).

Given the stressors that Generation Z can face, such as finding and maintaining relationships, conflict within relationships, and exploring identities, it is no surprise that their concerns with anxiety and depression have risen slightly, but steadily over the past five years (CCMH, 2013, 2017). Understanding the expectations for the process of mental health counseling is important due to Generation Z college students being vulnerable to a host of mental



health and developmental concerns as seen through the concerns they bring to college counseling services (Gallagher, 2014; CCMH, 2017). As more and more students seek counseling services from colleges and universities, it is important for clinicians to understand how these clients perceive counseling services and the therapeutic relationship to help them function and succeed in college and beyond.

### ***Generation Z and the Covid-19 Pandemic***

The Covid-19 pandemic was considered a defining moment for Generation Z given that it took place during a time where they are coming of age and caused a significant emotional impact of fear and uncertainty (Center for Generational Kinetics, 2020). The host of challenges college students of this generation faced got more complicated in the spring of 2020 when the Covid-19 pandemic forced many students to leave their colleges and universities to continue their semesters at home, isolated in residence halls, or off campus housing (Charles et al., 2021). To say that the lives of Generation Z college students were upended would be an understatement. In a survey of 498 Generation Z college students taken in July of 2020, 71% of students reported that the learning curve of transitioning to technological learning was somewhat or very difficult. As for summer/part-time jobs, full-time jobs, or internships, 84% reported that the pandemic negatively impacted these plans. Not surprisingly, 41% of students felt that the pandemic will or probably will impact their ability to graduate on time (Pavao, 2020). When the overall well-being of Generation Z participants was captured in this survey, those who rated their well-being as “poor” before the pandemic was at 5% and those who identified their well-being as “poor” during the pandemic went up to 36% (Pavao, 2020). Despite the sobering tone of the survey data, this survey concluded with a hopeful sentiment that the openness of Generation Z for addressing

emotional and mental health concerns will be a helpful tool in navigating the uncertainties and challenges of pandemic and post-pandemic life (Pavao, 2020).

A study that assessed the effects of the disruption of life during the Covid-19 pandemic on college student well-being found that data from participants in the spring of 2020 reported more symptoms of mood disorders, perceived stressed, and an increase in alcohol use compared to participants who were surveyed in the fall of 2019 semester (Charles et al., 2021). When participants from the same university were sampled in the fall of 2020, the authors found that the symptoms of mood disorders, perceived stress, and alcohol use had decreased compared to spring of 2020 (Charles et al., 2021). The results of this study point to the need for and potential of resiliency in Generation Z.

Another study that looked at how the Covid-19 pandemic impacted different generations found that those in Generation Z had their lifestyles and social relationships impacted more than other generations (Vacchiano, 2022). Between school, work, and their social lives, Generation Z found their lifestyles and social interactions needed to move to mostly online platforms which increased their psychological distress, as their opportunities for face-to-face interactions declined (Vacchiano, 2022). Even though Generation Z was less likely to experience severe symptoms of Covid-19 compared to older adults, they were still psychologically impacted by the effects of the pandemic (Charles et al., 2021; Vacchiano, 2022). The results from this research highlight a salient factor from the Covid-19 pandemic that contributed to a temporary increase in psychological distress for a population that endured some of the most drastic upheavals in terms of work and lifestyle changes (Vacchiano, 2022).

Each generation has defining moments that shape them as they come of age in an uncertain and ever-changing world. For Generation Z, one of those moments was the Covid-19 pandemic (Center for Generational Kinetics). Covid-19 caused significant upheaval to not just their day-to-day lives, but also their future plans (Pavao, 2020). As a result, it has also impacted the psychological distress and well-being of Generation Z in their young adult years (Charles et al., 2021; Vacchiano, 2022). Yet preliminary evidence showed that Generation Z can be resilient despite the challenges they faced over the past couple of years.

### **Summary**

This review of literature started with describing the theoretical foundations of this study through response expectancy theory (RET), Erikson's stages of psychosocial development, and Arnett's theory of emerging adulthood. RET informed this investigation by explaining how expectations are formed and how they can influence the beliefs and expectations people have about the process of mental health counseling. Erikson's psychosocial stages of development and Arnett's theory of emerging adulthood provided context for the concerns Generation Z can have regarding their identities and relationships. As students emerge into adulthood, they can find support for these concerns through mental health counseling.

Expectations, as well as generational beliefs, influence both experiences and behavior, such as what the process of mental health counseling will be like (Kirsch, 1997; Seemiller & Grace, 2016). What is known about process expectations for mental health counseling services is that clients expect to build a collaborative relationship with their counselor to work on specific goals and process life events. However, most of this data were gathered in settings that were not college counseling centers or on participants who were not a part of Generation Z. Another gap

in the current research was that expectations for the process of counseling were not known for students from the newest generation to attend college, Generation Z. To address these gaps in the literature, Generation Z college students who have sought counseling services for the first time were interviewed regarding their expectations for process expectations for mental health counseling services. The next section of this study explains the process and procedures for how this study was conducted.

## **CHAPTER II**

### **METHODOLOGY**

Chapter 2 contains the methods and procedures for how this study was conducted. The chapter starts with a review of the research question and the methodology being used to guide the study. The qualitative research methodology and the specific design within qualitative research methodology, interpretive description, is presented. A section on the description of the researcher, including information on background, biases, and values, as the researcher is the main instrument for data collection is also presented (Merriam, 2002). Next are sections describing the criteria for participant recruitment and selection, a review of the procedures for the study, and a description of how data were managed and analyzed. Finally, a discussion on the delimitations of the study completes this chapter. The purpose of this study was to develop a deeper understanding of the expectations Generation Z college students have for the process of counseling who have sought mental health counseling. To develop a deeper understanding the research question for this study is: How do Generation Z college students perceive process expectations when seeking mental health counseling?

#### **Qualitative Research Methodology**

The overarching goal of a qualitative design is to “understand how people make sense of their lives and their experiences” (Creswell, 2013, p. 47). Another goal of qualitative research is to understand another person’s frame of reference at a particular point and in a particular context (Creswell, 2013). Qualitative methods are used when researchers want to interpret a research question based on the meaning people bring to that question (Creswell, 2014). Qualitative

methods investigate research questions by exploring the thoughts, feelings, and experiences of small samples of participants (Creswell, 2014).

Qualitative research uses an inductive approach to describe multiple beliefs and develop deeper understandings of participants' thoughts and experiences (Trumbull, 2005). Data are gathered through many sources, including interviews, to create an accurate and rich description of the topic being studied (Merriam, 2002; Schram, 2006). A benefit to qualitative methodology is that the researcher can make adjustments during data collection as needed through follow-up questions that are asked during the interview process (Schram, 2006). Qualitative methods are ideal when a topic needs further investigation when there is a gap in the literature related to the population and/or the topic being studied (Creswell, 2014).

The current study addressed a gap in the literature on process expectations because it utilized in-depth interviews of Generation Z college students who sought counseling at their college counseling center. In Hill et al. (2012) participants had not sought counseling services, instead the sample was taken from an introductory psychology class and not from students who were actively seeking counseling services. While students certainly had expectations regarding the process of counseling and the therapeutic relationship, it came from a different context compared to students who sought counseling services and were waiting to engage in the process (Hill et al., 2012). Future studies would benefit the exploration of this population of students who have made the effort to seek counseling services, but before they can experience such services.

To deepen the understanding for the process expectations of Generation Z, qualitative research uses data that emphasizes description and explanation (Fitch, 1994). For this study it was important to have participants describe and explain their beliefs in their own words to fully

understand how they conceptualized process expectations. This kind of methodological inquiry allows for a richer understanding of beliefs, which will provide valuable information for college mental health counselors, to know whether clients from Generation Z have expectations that will be met or need to change for counseling to be successful.

### **Interpretive Description**

Interpretive description is a type of qualitative methodology that was originally formulated within the field of nursing to research clinical issues that would have practical applications (Thorne et al., 1997; Thorne et al., 2004). In recent years, this methodology has grown popular with other disciplines such as psychology, another field where knowledge is used to inform clinical practice (Hunt, 2009; Thorne, 2008). Therefore, this type of qualitative methodology is used when researchers want to produce knowledge that is relevant to clinical practice (Hunt, 2009).

Thorne and colleagues (2004) provided this succinct definition of the interpretive descriptive approach:

The foundation of the interpretive description is the smaller scale qualitative investigation of a clinical phenomenon of interest to the discipline for the purpose of capturing themes and patterns within subjective perceptions and generating an interpretive description capable of informing clinical understanding. (p. 5)

The interpretive description approach informs clinical understanding by gathering individual perspectives of participants while also gathering data on patterns and commonalities from the entire group of participants (Hunt, 2009; Oliver, 2012; Thorne, 2008; Thorne et al., 2004). This made interpretive description an ideal methodology to inform clinical practice on a

population where this knowledge has not been established (Hunt, 2009; Oliver, 2012). In the current study, the perspectives and perceptions of Generation Z were investigated through individual interviews, a common strategy for collecting data in the interpretive description design (Hunt, 2009). Interview data were taken from transcripts and then coded through an interpretive lens to examine the similarities and differences in beliefs and expectations among participants (Thorne, 2008). The methodology of interpretive description allows for this type of analysis because it uses constant comparative analysis to identify and examine themes that are common in participant data (Hunt, 2009; Thorne, 2000; Thorne, 2008). In addition to constant comparative analysis for development of themes and patterns, interpretive description asks broad questions to assess the big picture of the data (Hunt, 2009; Thorne et al., 1997).

Interpretive description is a qualitative methodology that is used to inform clinical practice by identifying and analyzing both individual and common themes among participants (Thorne et al., 1997; Thorne et al., 2004). This type of qualitative methodology is most appropriate for the current study because I was able to explore individual perspectives, as well as commonalities between participants to increase the understanding of what expectations Generation Z college students have for the process of counseling. The goal of interpretive description is to extend beyond knowledge that has already been established to produce new insights to inform and produce change in clinical practice (Thorne, 2008). The tenets of the interpretive description philosophy made it an ideal methodology to use for this study because as a researcher and clinician I sought to identify and understand process expectations for counseling for a new generation of college students. Due to the interpretive nature of the interpretive



description methodology, it was important that a description of the researcher be present within a study to identify any possible biases and assumptions that might impact data analysis.

### **Description of the Researcher**

As the researcher, I am the main instrument in this qualitative study due to the interactive and collaborative nature participants had with me during data collection (Converse, 2012). This is seen as an advantage because I can immediately respond and modify the interview process as needed to capture the emerging narrative of participants through verbal and non-verbal communication (Merriam, 2002). Reflecting on and describing my values, biases, and past experiences are important tasks to produce quality research and results in the interpretive description method (Thorne, 2008). Since the researcher is the main instrument in qualitative methodology, it was imperative that I identified and reflected on my biases and past experiences for these biases and experiences to not alter the interview and subsequent data analysis. Below I described how my biases and experiences shaped my role as a researcher.

I am a doctoral candidate at Kent State University in the Counselor Education and Supervision program within the College of Education, Health and Human Services. I have been licensed as a professional mental health counselor since 2010, have worked independently since 2016, and have been able to supervise counselors-in-training since 2018. Since becoming a licensed mental health counselor, most of my clinical experience has been working with college age populations in higher education settings, such as college counseling centers. I currently work as a Licensed Professional Clinical Counselor in a college counseling center located in a mid-size private university in the Midwest. My interest in the topic of process expectations evolved from my experiences working in college counseling centers. I often feel that

expectations of both clients and counselors are one of the most important factors in counseling that is the least talked about in sessions. Expectations inform our thoughts, feelings, and behaviors about certain situations and relationships, which make them vital to understand in a relationship with an intimate nature, such as counseling.

In my role as a clinical counselor and researcher, I am often seen as an expert in mental health counseling, which informed both my role and my potential biases. Being in the role of the expert created a certain power dynamic. In my work with clients, I was careful with this power dynamic because clients are often coming to me in a vulnerable state. I also was careful in my role as a researcher, because I interpreted the expectations and experiences of my participants through analysis of their interview data. One of the ways I limited the extent my bias impacted my research was to recognize the limitations of my expertise. I recognized that my expertise lies in what I have researched and prepared for this study, as well as what I have learned and practiced as a mental health counselor. My training as a mental health counselor and researcher helped me to make sure that all participants feel heard, understood, and known so that I was able to have a relationship with them that was built on trust and mutual understanding while participating in the current study. I also limited my bias by understanding that the participants in the current study were experts of their own expectations and experiences. Together we created a narrative that answered the research question put forth by this study.

My bias was also informed by my own generation. I was born in the year 1983, which means that I am a part of the Millennial generation, the generation before Generation Z. I grew up at a time when social media was just getting started and texting was not as prevalent as it is today. During my own college experience, I received most of my support in person and not

within a social media format. This means, I was given the chance to interact with others in a format I view as more vulnerable because it was in person instead of in front of a screen. The amount of time Generation Z clients have spent communicating and getting emotional support in virtual formats made me wonder if they will struggle with some of my interview questions relating to the different ways their counselor can build rapport and the therapeutic relationship with them. This is a bias I had because I have grown up in a different generation and may not have the same relationship with technology as someone who grew up in Generation Z. Given that I am not considered a “digital native” and grew up in an age when the Internet and social media were just getting started, my relationship with technology can change depending on the ease of use and outcome. Some aspects of technology I find very helpful, such as texting and Facebook<sup>®</sup>. I may not be considered a “digital native” by some standards, but as a Millennial I have grown up with advances in technology and social media for most of my life. Therefore, I am in a unique position to be able to connect with clients because I am old enough to understand the necessity of vulnerability that comes from face-to-face conversations and young enough to have experience communicating with others through texting and social media. This position also influenced my experiences working as a clinical counselor in college counseling centers.

From my experiences counseling college students who belong to Generation Z, I have noticed that it can be easier to build a therapeutic relationship with clients who know what to expect when seeking mental health counseling services. While there are many factors that account for how this relationship is built, it appears that whether clients know what to expect influences their conceptualization of and behaviors in counseling and the therapeutic relationship. In my time providing mental health counseling in the college setting, I have found

that some students can get to that first session after the initial assessment and not know what to say because they are unsure of their role as the client in the therapeutic relationship. If these clients had had a better understanding of their role as the client, they may have an easier time thinking of where they wanted to start in counseling. Therefore, knowing what expectations regarding the process of counseling Generation Z college students have is helpful to my colleagues and I who are a part of different generations. In order to build therapeutic relationships and provide the most effective counseling services, we as counselors and mental health professionals need to have in depth understanding of how clients understand the process of mental health counseling services.

When I am in the role of a researcher, I recognize that I am often seen as an expert and this creates a certain power dynamic between my participants and myself. To reduce this power dynamic as much as possible, I recognize that the limits of my expertise lie in what I have researched and prepared for this study. I also recognize that my bias is informed by my own generation, the Millennial generation, and the experiences I had growing up in a different time than Generation Z. In my experience of seeing how expectations influence clients' understanding of their role, I have noticed how it can be easier to build the therapeutic relationship with clients who know what to expect when seeking mental health counseling services. Therefore, understanding what expectations Generation Z clients bring to counseling services is important to help my colleagues and myself know how to best build rapport when this generation seeks counseling services.

## **Participants**

For this study, participants needed to be between the ages of 18 and 24 and born between the years of 1995 and 2002 to meet the criteria of belonging to Generation Z. The number of participants was determined by the number of participants it took to saturate the data, which occurred when no new themes were acquired from collected data (Thorne, 2008). In interpretive description studies, that number can range from five to 30 (Thorne, 2008). This sample was gathered from students who sought services at a counseling center at a large, urban, public university in the Midwest. A letter stating that research was allowed to be conducted at this counseling center can be found in Appendix A.

### **Inclusion Criteria**

Participants for this study were selected based upon the following criteria.

1. Participants were born between the Generation Z years of 1995 and 2002, which puts them between the ages of 18 and 25. Participants of Generation Z were chosen for this study to identify and explore their expectations for the process of counseling and the unique factors related to this generation that influences those expectations.

2. Participants were undergraduate or graduate students enrolled on a part-time or full-time basis.

3. Participants were willing and able to participate in an interview for 60 to 90 minutes. Participants were also willing to spend additional time reading and responding to an email with the provisional report of interview codes and categories from their interview for member checking purposes. Participants who were unable to agree to the above would not be able to

provide adequate descriptive narrative for analysis given the in-depth nature of qualitative and interpretive description designs.

4. Participants sought counseling services voluntarily, which would likely influence expectations for mental health counseling services. Participants who were mandated to attend counseling by others may have different beliefs about those services and conceptualize the therapeutic relationship differently.

5. Participants did not have a follow up counseling session with their counselor, but may have had a Rapid Access and Consultation appointment before their interview was scheduled.

### **Exclusion Criteria**

Participants were excluded based upon the following criteria.

1. Participants were less than 18 years of age.

2. This experience was not their first time obtaining mental health counseling services.

For the purpose of this study, mental health counseling services are described as mental health services conducted by licensed mental health professionals. Participants could not have had previous experiences with counseling because these experiences would likely influence their expectations for counseling services.

2. Participants seeking counseling services did not need emergency services. Participants who needed immediate counseling services were excluded because the screening and interview process would delay the start of their counseling services.

### **Procedures**

Since my data collection procedures were disrupted by the pandemic, I had to find another method to recruit students when they were no longer coming into the counseling center.

Therefore, it took me significantly longer to recruit and interview participants because I had to wait for the counseling center to implement virtual counseling procedures, as well as reconfigure my own procedures for data collection, and submit these modifications to IRB for approval. A timeline for these events and the amended procedures for data collection and analysis can be found in Table 1.

**Table 1**

*Data Collection and Analysis Flowchart*

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Week 1–Began March 4, 2020

IRB approvals

Met with administrative staff to go over participant recruitment procedures

Weeks 2–3 (March 9–22)

University where data was being collected closed (March 16)

All counseling services were in the process of being transitioned to online formats

No new intakes were being scheduled

Recruitment of participants was put on hold to transition data collection procedures to online formats

Stay at home order was put in place (March 22)

Weeks 4–7 (March 23–April 19)

No new intakes were being scheduled

Assessed options for transitioning data collection procedures to online formats

Weeks 8–12 April 20–May 24)

Summer semester began and Rapid Access and Consultation appointments were implemented to support students (May 11)

Set up Qualtrics account to administer the Screening Questionnaire, Participant Schedule and Contact Information form, and Virtual Procedures Consent Form

Submitted modifications for virtual data collection procedures to IRB

Submitted modification updates to IRB where data was collected

IRB modifications approved

Weeks 12–16 (May 25–June 28)

Recruitment of participants started on June 1

Interviews with Christina, Nadia, and Selena were conducted online

These interviews were transcribed and given an initial analysis

Weeks 17–21 (June 29–August 2)

Interview with Drew was conducted, transcribed, and given an initial analysis

Met with administrative staff to check in regarding participant recruitment and provide support

Ohio Corona Virus cases hit a new high at 1,733 cases

*(table continues)*

**Table 1 (continued)***Data Collection and Analysis Flowchart*Weeks 22–26 (August 3–September 6)

Summer semester ended on August 8th

Fall semester begins August 24<sup>th</sup>, students were permitted to live in the residence halls

Counseling center continued to conduct all sessions virtually

Interview with Kate was conducted, transcribed, and given an initial analysis

Met with administrative staff to check in regarding participant recruitment and provide support

Weeks 27–30 (September 7–October 4)

Interview with Sam was conducted, transcribed, and given an initial analysis

Met with administrative staff to check in regarding participant recruitment and provide support

Weeks 31–35 (October 5–November 8)

Met with administrative staff to check in regarding participant recruitment and provide support

Analysis of codes and categories across interviews conducted

Ohio Department of Health reported 5,500 Corona virus cases

Weeks 36–40 (November 9–December 13)

Met with administrative staff to check in regarding participant recruitment and provide support

Analysis of codes and categories across interviews continued

Fall semester ended on December 8<sup>th</sup>

Weeks 41–45 (December 14–January 24)

Recruitment of participants stopped; data saturated

Finalized analysis of codes and categories across interviews

Thematic analysis of themes completed

Winter break from December 9<sup>th</sup>–January 10<sup>th</sup>

First shipment of vaccine (Pfizer) to Ohio (December 24)

**Virtual Recruitment of Participants**

The original plan for data collection included recruiting participants when they scheduled their routine intake at a college counseling center at a large, urban university. After students scheduled their routine intake, they were to be transferred to the researcher via phone to conduct the screening questionnaire and to schedule an interview if they met criteria. This plan would have allowed for a more personal touch since participants would have had a chance to learn more about the study directly from the researcher and ask questions about participation. Instead, an



email was sent to interested students to give them more information about the study. Email addresses were collected because a secure, encrypted email could be sent to students with information about the study. Correspondence was done through email and texting until their interview.

Two weeks after I obtained IRB approval for this study, the university where data were collected closed due to the COVID-19 pandemic, most of the students were sent home, and the counseling center did not take any new clients until the counseling services were transitioned to online formats. These circumstances decreased my participant pool because the counseling center where data were collected didn't take any new intakes until the summer semester to allow time to transition services online. My participant pool was also decreased because students who lived out of state were not allowed to access assessment appointments due to license jurisdiction for clinical staff.

Before selection of participants and data collection began, approval was obtained from the Institutional Review Board at Kent State University and the university where data were collected (Appendices B and C). Two weeks after IRB approval was obtained, the counseling center where data were collected physically closed due to policies and procedures put in place by the university due to the outbreak of COVID-19. The counseling center where data were collected did not schedule new intakes for the remainder of the semester to figure out how to provide mental health counseling and other services in a virtual format. After it was decided how students would schedule new intakes and fill out paperwork and I figured out how to transfer my data collection procedures to online formats, I submitted these modifications to the IRB at the institution where data were collected. In the modification to IRB, I stated that recruiting,

selecting, and interviewing participants virtually was not meant to replace the existing in-person procedures, but to be conducted while the counseling center where data were collected was physically closed to students. Due to the ongoing nature of the COVID-19 pandemic, the university was physically closed to students for three out of the seven months I collected data. While the university was physically closed to students, they were still able to access all of CAPS services online.

When students called the CAPS number and made an appointment for a Rapid Access and Consultation appointment (RAC), they were asked by administrative staff if they were interested in learning more about a study that was being conducted by one of the CAPS clinicians. If the student said “yes” that they wanted to learn more about this study, then the administrative staff gave their email address to me and I emailed them information about the study. Administrative staff sent the student’s name and university email address to me in an encrypted email to my university email address. Once I got the student’s information, I deleted the email and administrative staff deleted the sent email. This was done so that their participation was kept separate from this clinical file. The script that the administrative staff followed can be found in Appendix D.

Once administrative staff gave me the student’s university email address, I sent the student an email with information about the current study, as well as a link to fill out the screening questionnaire online through a Qualtrics survey. The student’s university email address was used because it is through a secure network. The information students received in this email can be found in Appendix E.

Interested students clicked on a link that took them to a Qualtrics survey to fill out the screening questionnaire. The screening questionnaire had the same questions as before, with some added questions regarding technology due to the interviews being conducted online. The screening questions can be found in Appendix F.

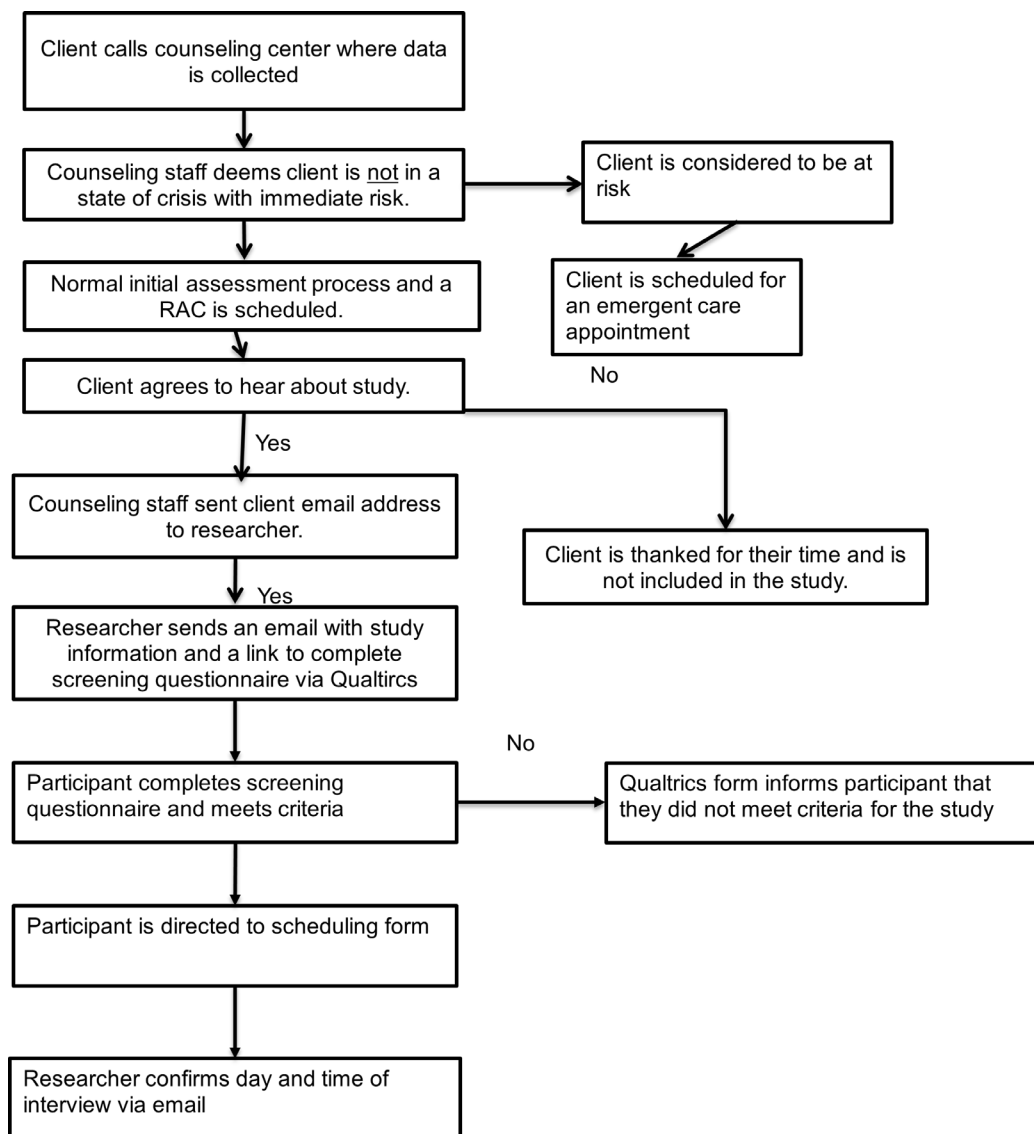
If students met the criteria for the study and agreed to participate by checking a box at the end of the screening questionnaire, they were taken to the next page in the survey where they picked an interview day and time. If they did not meet criteria for the study or do not agree to participate, they were directed to a page that thanked them for their time and consideration.

When participants filled out the screening survey and they met the criteria for the study, they were directed to a page on the Qualtrics survey where they picked a day and time to be interviewed. On this Qualtrics page they also identified their preferred method of communication (text, phone call, or email) for me to send them a reminder of their interview day and time. Participants were informed that they would receive a text/phone call/email reminder 24 hours before their scheduled interview. Participants were also informed that they would receive the informed consent form via email 24 hours before their interview time. Participants were encouraged to review and sign the consent form before their interview; however, if they had questions they were encouraged to ask them before the interview or at their scheduled interview time. All interview questions remained the same and were not altered to keep the questions consistent for each participant.

When potential participants called the counseling center to make an appointment, they were asked by administrative staff if they were interested in learning more about a study that was being conducted by one of the staff clinicians. When potential participants expressed that they

were interested in learning more about the study, the administrative staff took their email addresses and forwarded them to the researcher, who contacted the potential participant about the study. A total of 20 potential participants were contacted who had expressed interest in learning more about the study.

All 20 potential participants were provided the opportunity to fill out the pre-screening forms in Qualtrics. From that group of 20 potential participants, 10 potential participants who did not complete the screening questionnaire were contacted to see if they were still interested in participating in the study. None of these 10 potential participants responded to that email. Of those 10 potential participants who filled out the screening questionnaire, three potential participants had previous counseling services and one potential participant did not finish the questionnaire. Six participants met criteria and were willing and able to participate in the study. I stopped at six participants when I saw repeated codes and categories that did not provide any new perspectives or add any additional depth to codes and categories that were already identified. (See Figure 1 – selection criteria was assessed using a screening script; see Appendix F).

**Figure 1***Participant Recruitment Flow Chart***Virtual Interview**

Structured interviews were conducted with six participants who met the criteria for the study and were willing to be interviewed. Data collection took place from June 1, 2020, to January 8, 2021. Due to the COVID-19 pandemic, the counseling center where data were

collected transitioned from in-person services to having all services online. The counseling center also changed its procedures to provide immediate support for students which allowed them to be scheduled for counseling within two days. Before the COVID-19 pandemic, students were scheduled for intake assessments between a week and four weeks out depending on how many intake appointments were available and the student's availability. This would have allowed ample time to gather student's perceptions of the process of counseling. During the pandemic, instead of intake assessments, students were scheduled for rapid access and consultation appointments (RAC). The primary purpose of the RAC appointment was to provide support to students who were in distress. During this appointment therapists also asked questions to assess functioning and mental health needs to determine if the student would be appropriate for counseling at the counseling center or would need to be referred to a community provider.

Conducting participant screenings, obtaining informed consents, and conducting interviews before they had their first appointment was difficult because RAC appointments were scheduled within 24–48 hours in advance. One out of the six participants had a RAC appointment before she was interviewed. No participants had individual counseling sessions before they were interviewed. Despite these challenges, I was able to conduct interviews with two undergraduate and four graduate participants. Each of the participants provided a unique perspective that was formed from their experiences, age, gender, race, ethnicity, and degree program. Participants were encouraged to contact me if they had any questions or changes in schedules, or notify me if they changed their mind about participating in the study before their scheduled interview. Participants were scheduled for only one interview so that services would not be delayed.

Participants were given a link to my personal room on Zoom™ through TAO™ in the email that confirmed the day and time of their interview. Zoom™ was the same platform in which I did counseling sessions, which meant that it was secure through being HIPAA compliant. At the start of an interview, I reviewed the purpose and procedures of the study and explained confidentiality and limits to confidentiality. Since participants had already signed the consent form via Qualtrics, I asked if they had any questions regarding their consent to participate in this study. Participants gave permission to be emailed through the informed consent form on Qualtrics. Participants were once again informed of the purpose of emailing them a provisional report of the interview codes and categories for their review and to give feedback for member checking. Then I reviewed the rights of the participant. These rights included the right to withdraw at any time from the study, the right to take breaks as needed, and the right of refusal to answer any of the questions. Participants were given time to ask any additional questions and/or address concerns.

Before conducting the interview, a Demographic Information Sheet with six questions was completed (see Appendix H). I verbally asked participants the questions and wrote down their answers on the Demographic Information Sheet. The purpose of asking these demographic questions were to gather additional information about the participants of the study. For the first question, participants were asked their age. In the second, third, and fourth questions, participants were asked to provide their gender, race, and ethnicity. The fifth question asked if participants were enrolled in an undergraduate or graduate program. The sixth question asked participants to pick a pseudonym to be used in their interview.

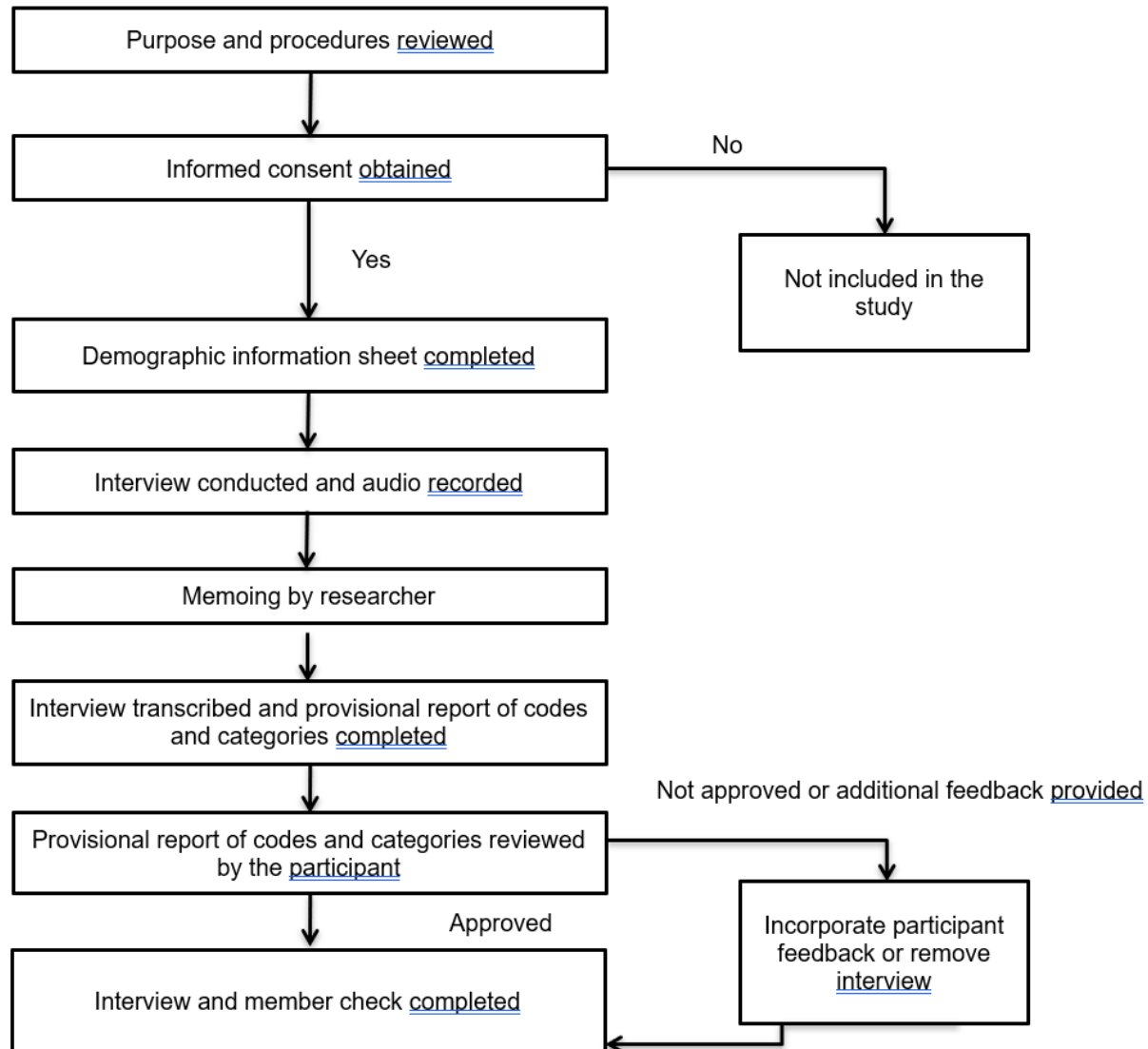
After the Demographic Information Sheet (Appendix H) was completed, the interview began and was audio recorded with the participant's permission. During the interview, I asked questions that are outlined in Appendix I. Participants were asked main questions and follow up questions regarding their expectations of the process of counseling.

I transcribed each interview after it was conducted. Interviews were transcribed as soon as possible to allow for more time to analyze the data. The main interview questions were not changed to ensure each participant was asked the same set of questions to increase reliability of the data and allow for comparison between interviews. Transcribing each interview after it was conducted for initial analysis was done to allow data collection to inform the analysis of the data as themes started to emerge from each participant (Hunt, 2009). The process of data analysis for this study is outlined below. A flow chart providing a detailed description of the procedures that were used in this study can be found in Figure 2.

### **Data Analysis**

When using methods of interpretive description, the researcher first seeks to understand the characteristics, patterns, and structures of the phenomenon being studied through an initial read of the data (Thorne et al., 2004). As the characteristics, patterns, and structures emerge, the researcher uses an interpretive lens to decide which pieces of data to focus on for in depth analysis and emphasis in the results of the study (Thorne et al., 2004). The interpretive lens I used to analyze data was informed by my knowledge of previous research, as well as my own clinical experience (Thorne et al., 2004). I specifically used my interpretive lens to decide which pieces of data captured the characteristics, patterns, and structures for counseling process expectations and how participants' generation influence these expectations.



**Figure 2***Interview Procedures Flow Chart*

The following general steps were utilized during data analysis. Further details of each step are provided below: (a) memoing after each interview, (b) transcribing participant interviews, (c) open coding using transcripts to obtain codes and categories for the provisional report of interview codes and categories to give to participants for member checking, (d) member

checking process, and (e) identifying the saturation point once categories had been established for individual participant interviews. Following completion of the analysis of individual interviews, I employed these steps to analyze data across participant interviews: (f) axial coding to create common categories using a hierarchy of categories and sub-categories across participant interviews, and (g) selective coding to analyze significant patterns and common categories between participants to identify themes across participant interviews. After open coding, axial coding, and theme development, a peer reviewer was utilized.

### **Memoing**

Memoing is when a researcher writes notes consisting of thoughts, emotions, reflections, and insights during the qualitative research process (Hunt, 2009). In order to process the interview data, I wrote my reflections after each interview. These reflections included participant's reactions to questions, as well as their non-verbal communications, such as body language and tone of voice. I continued the process of writing memos on my reflections as I analyzed interview data (Hunt, 2009). These reflections helped me to make connections and comparisons to allow codes and categories to develop. Memoing informed my provisional report of interview codes and categories for each individual interview to be given to participants for member checking. The process of writing these memos, also helped me to reflect on individual perspectives, as well as perspectives that were shared among participants. Making connections between individual perspectives and the group as a whole from memoing allowed me to identify categories of data to develop themes among participants.

## **Interview Transcription**

Each interview was transcribed using Trint™ (Trint, 2019), a transcription software program. Trint™ uses an algorithm for converting speech into text that is generated into a transcript that can be reviewed and edited. Using Trint™, a 90-minute interview took approximately 45 minutes to transcribe. Once each interview was transcribed, I edited the document for accuracy through the Trint™ website. Reducing the amount of time it took to transcribe the interviews was important to this study, allowing me to do an initial analysis of the data and write the provisional report of interview codes and categories in a shorter amount of time. I was then able to return the transcribed interviews to the participants while the interview was still fresh in their minds and ideally before they received any counseling services.

When the audio recordings of interviews were submitted to Trint™ they were owned by me and were not accessible to anyone else (Trint, 2019). In Trint's terms of use located on their website, under the section entitled, "Your Content and Confidentiality," it states "you grant Trint™ a non-exclusive licensure to use the content solely for the purpose of providing the Services" (Trint, 2019). This statement means that when submitting content to be transcribed you are allowing Trint™ to provide the service of transcription. In a personal communication with a Trint™ representative I confirmed that by using this service no one, including Trint™ employees, have access to data that is submitted to the website for transcription purposes (Trint, 2019). After transcribed interviews were edited for accuracy, they were printed creating a hard copy. After the completion of data analysis, interviews were deleted from the Trint™ website (Trint, 2019).

## **Open Coding**

Open coding is a data analysis technique (Charmaz, 2014). A code is a word that is used to describe the meaning of a particular section of data (Saldaña, 2016). Detailed steps for coding are not outlined in interpretive description methodology, but can be taken from other qualitative methodologies, such as grounded theory (Charmaz, 2014; Thorne, 2008). In grounded theory analysis open coding can be completed in two ways (Charmaz, 2014). One way is for data to be coded word-by-word and line-by-line. The second way is coding larger sections of data (Charmaz, 2014). The second way of coding was used because coding small bits of data can make it difficult to identify the codes and categories that ultimately inform themes (Thorne, 2008). Categories are words that describe the connection between multiple codes (Saldaña, 2016). Open coding of individual interviews included these steps:

### ***Step 1: Open Coding Sections of the Data***

After I read through each interview transcript, I used open coding to identify and define codes throughout the interview. Open coding allowed me to identify units of data, ascribe meaning to the unit of data, and then name the piece of data with a code that described the meaning (Saldaña, 2016; Thorne, 2008). Units of data can be measured by a word, phrase, or a passage of data.

### ***Step 2: Constant Comparison for Code Consistency***

Throughout the open coding process, codes were continuously analyzed, and reflected on (Charmaz, 2014). As I developed codes, I compared these codes with other codes within each participant's interview to reduce redundancy (Saldaña, 2016). New codes that did not relate to

existing codes were also defined (Saldaña, 2016). As I identified codes, I defined them when the name of the code was not self-explanatory.

While engaging in the open coding process, broad questions were asked to help determine what data can support a “tentative truth claim” in the beginning stages of data analysis (Hunt, 2009; Thorne et al., 2004, p. 6). Broad questions that were used in the data analysis included: “What is happening here?” and “What am I learning?” (Thorne et al., 1997, p. 174) along with “Why is this here?” and “What does it mean?” (Thorne et al., 2004, p. 13). I also asked broad questions that were specifically related to the current study, such as: “How does this response relate to what is already known about process expectations?” “How is this participant’s generation influencing or not influencing the answer to the question?” My responses to these questions were also written in memos, along with my thoughts, ideas, and connections between codes.

### ***Step 3: Identify Codes With Similar Meaning and Group Into Categories***

During this categorization process, I explored codes from each individual interview to identify codes that had similar underlying meanings. To assess similar meaning between codes I asked myself this question: Are these codes referring to a similar concept (Saldaña, 2016)? Answering this question allowed me to identify which codes were related to each other helping me to synthesize the data into categories. Codes that were related to each other were grouped into a category. The name of the category identified similar ideas that ran across the grouped codes. Through this process I retired codes that were redundant or could be explained more completely by other codes. To complete this step in the process I made a list of categories with the related codes.

### **Provisional Report of Interview Codes and Categories**

For each individual interview a document was written that outlined an initial analysis of the participant's codes and categories. Participants were given a provisional report of interview codes and categories for their own interview. This report was then given to each participant to review for member checking (Lincoln & Guba, 1985).

When I wrote a provisional report of interview codes and categories for a participant, I included the list of codes, categories, and direct quotes from their interview that supported codes. Each provisional report was given to participants for their own interview. Participants were then encouraged to reflect on the provisional report of codes and categories and provide clarification through email as a part of the member checking process.

### **Member Check Email**

Member checking is an important strategy for establishing credibility in qualitative studies (Lincoln & Guba, 1985). When the provisional report of interview codes and categories was complete for participants, I contacted them via their provided email address to inform them that their interview was transcribed and initially analyzed and sent the provisional report of their interview codes and categories. The script for this email can be found in Appendix J. In this study, sending the provisional report of interview codes and categories with quotes back to participants gave them an opportunity to review their responses to increase the validity of the study (Creswell, 2013). Participants were asked that they review the provisional report of interview codes and categories and give feedback through email.

After participants approved their provision report of interview codes and categories, I moved forward to the next step in data analysis. If participants did not approve their provisional

report of interview codes and categories, their feedback was reflected upon and could be incorporated into their data. If needed, I presented this feedback to my peer reviewer to discuss how I could incorporate this feedback into the data. Participants were given one week to respond to my email in order to not delay additional data analysis. In the email it also stated that if participants did not respond within a week from the date of the email, it was assumed that they did not have any feedback to include for their provisional report of interview codes and categories and their data included in the data analysis. Due to the time needed to transcribe and analyze, it is possible that some participants received their member checking email after they had completed their initial intake. This situation may influence any feedback they have given regarding their interview.

### **Data Saturation**

Thorne (2008) conceptualized data saturation as collecting data until no new information or insights are found. Thorne (2008) asserted that true saturation of data is ultimately impossible; however, researchers can collect data until the same codes and categories are developed repeatedly. During data collection, I hit a point where patterns of codes and categories repeated and no new codes and categories emerged. I felt I had reached a point of data saturation when I saw repeated codes and categories that did not provide any new perspectives or add any additional depth to already identified codes and categories.

### **Axial Coding**

Once the analysis of the individual interviews was complete, analysis across interviews could begin. Axial coding is a data analysis process used to assemble categories with similar meaning in order to move towards a more consolidated meaning (Gibbs, 2007; Saldaña, 2016).

In this study, categories were consolidated across individual interviews to create a hierarchical structure of categories and sub-categories across all participants. Categories and sub-categories were formed to reassemble data to bring coherence to the next step of data analysis to develop themes (Charmaz, 2014). Axial coding across individual interviews included these steps:

***Step 1: Identify Categories With Similar Meaning and Group Them Together***

During the categorization process, I explored categories across individual interviews to identify categories that had similar underlying meanings (Saldaña, 2016). To assess similar meaning among categories I asked myself this question: Are these categories referring to a similar concept (Saldaña, 2016)? Answering this question helped me to identify which categories were related to each other in ways I deemed significant and to synthesize the categories into groups. Through this process I retired categories that were redundant or could be explained more completely by other categories (Saldaña, 2016).

***Step 2: Identify Sub-Categories From Groups of Categories***

Identifying similarities and differences between categories allowed me to theorize and form a hierarchy of relationships (Thorne et al., 2004; Thorne, 2008). This hierarchy of relationships included a main category and sub-categories. The main category was a category that described an overarching concept found in several interviews. The sub-categories were categories that related to the main category or reflected various aspects of the main category (Sandelowski & Barroso, 2003). I was able to establish a main category and sub-categories by asking and answering the question of how the sub-categories are related to the main category (Saldaña, 2016). To complete this part of the categorization process I made a list of categories and sub-categories that were present across individual interviews.



## **Selective Coding**

Selective coding is the final step in the data analysis process (Corbin & Strauss, 1990). Selective coding is defined as the process of identifying common categories to develop themes (Strauss & Corbin, 1990). This is done by taking categories and sub-categories and unifying them into common categories (Corbin & Strauss, 1990). Knowledge from my research and clinical experience, as well as my analysis of the interviews informed the interpretive lens for further data analysis. During this process I used my interpretive lens to assess which categories I thought were significant or represented patterns within the data. Significant categories and patterns of categories were identified by deciding which categories were within a typical variation of perceptions and beliefs and which were not, as informed by the participants. These decisions are supported by interpretive description methodology due to the interpretive lens researchers use to decide what is significant and relevant to the study during data analysis (Thorne, 2008). Having the knowledge and ability to make these decisions is called interpretive authority (Thorne et al., 1997). To enrich my analysis, I also reflected on the memos I wrote after each interview and during data analysis. These memos helped me interpret the data and tease out participants' understanding of their expectations about the process of mental health counseling and how their generation may influence those views. Selective coding of categories and sub-categories across all interviews included these steps:

### ***Step 1: Group Categories With Sub-Categories Together to Form Common Categories***

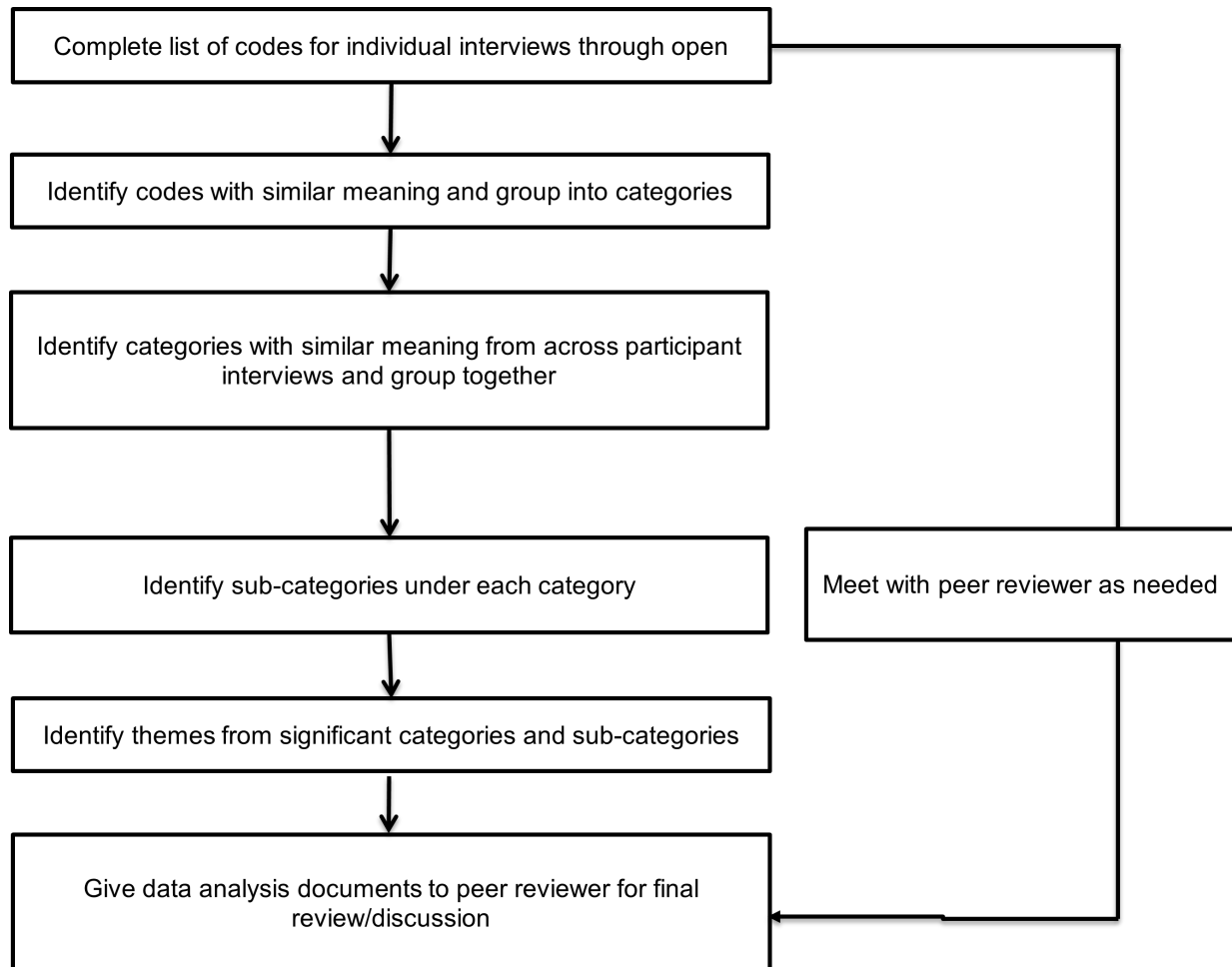
I reviewed the list of categories and sub-categories numerous times. While I reviewed this list, I grouped categories and sub-categories together that were related to a similar concept to form common categories. Then I made a list of common categories.

### ***Step 2: Identify Themes***

From the list of common categories and sub-categories I started to construct themes. A theme is defined as an “implicit topic that organizes a group of repeating ideas” (Auerbach & Silverstein, 2003, p. 38). I started to construct initial themes through analysis of the common categories that I deemed significant because of the repeating ideas that ran through several categories. During this process I asked myself this question highlighted by Corbin and Strauss (1990, p. 14): “What is (are) the main analytic idea(s) presented” in these common categories? The purpose of asking this question was to get at the “meaningful essence that runs through the data” to construct themes for process expectations that were common among participants and how those expectations were related to their generation (Morse, 2008, p. 727). As I reflected on this question, I identified themes that represented main analytic ideas from the data.

### ***Step 3: Peer Review***

During the selective coding process I met with my peer reviewer as needed to review this part of the data analysis process and incorporated her feedback. Once themes were found, I gave my peer reviewer the following for review: (a) the list of categories and sub-categories for each participant interview, (b) the list of categories and sub-categories across participant interviews, (c) significant categories, and (d) the list of themes from across participant interviews. These items were given to the peer reviewer to check the accuracy of the data for my analysis to be without the influence of my personal bias and values. A detailed description of the open, axial, and selective coding process can be found in Figure 3.

**Figure 3***Data Analysis Flow Chart***Data Management**

The interviews were transcribed using the transcription software program Trint™ (Trint, 2019) after each interview was completed. Once interviews were transcribed they were saved as a word document on a password protected computer. All documents used in transcription and analysis of the data were kept on an external hard drive.

### **Trustworthiness**

In qualitative research, it is important to take steps to ensure that the data are accurate and speaks to participants' thoughts, feelings, and experiences. Lincoln and Guba (1985) highlighted three areas of inquiry I used to increase the validity of this study: "truth value," consistency, and neutrality. "Truth value" refers to the accuracy of the data I explored with the participants in the current study. During the interviews, participants provided a thick description of their expectations, beliefs, and experiences by thinking about and answering the interview questions (Creswell & Miller, 2000). To ensure the accuracy of this data, I sent a member checking email to participants after their interview was transcribed and initially analyzed (Hunt, 2009). Included in the member checking email was an attached document of the provisional report of interview codes and categories. The purpose of this member checking email was for the participant to review and give feedback to ensure accuracy of the data.

Consistency is whether or not the study could be repeated based on the clarity of the original study. This study followed the research methodologies of qualitative, interpretive design, and grounded theory data analysis to provide a framework and step-by-step process. In each section outlined in the methodology, I have taken care to clearly lay out each step of data collection and analysis. Given that this study is one of the first of its kind to identify the process expectation of Generation Z college students seeking counseling from college counseling centers, it will hopefully serve as a foundational study that will inspire further inquiry.

Neutrality refers to steps taken to ensure that researchers do not insert their biases and perspectives. In this study, to ensure that the data was gathered and analyzed in ways that were neutral, several measures were put in place. When writing the description of the researcher

section I explored my professional and personal perspectives and biases to identify and acknowledge how these perspectives and biases may impact my data analysis. By naming and exploring these perspectives and biases, I was better able to recognize them as I conducted the research to reduce the chance of my data analysis and results being influenced. Thorne and colleagues asserted that trying to “eliminate all biases are naïve,” but researchers can identify and explore them throughout the research process (Thorne et al., 1997).

In order to decrease personal bias, a peer reviewer was selected to review the description of researcher, categories and sub-categories for each participant and across participants, analysis, and results. The peer reviewer who was selected for this study is an assistant professor in the psychology department at the university where I was employed. She was selected because she holds a doctoral degree in social psychology and has research experience in qualitative and mixed methods methodologies.

Before data collection began, I met with the peer reviewer to inform her of the process for collecting data, including how participants were going to be recruited and selected. During this meeting I provided my description of the researcher section for my peer reviewer and we discussed my biases before she engaged with the data. I met with my peer reviewer as needed to review the selective coding data analysis. Finally, once I identified the common themes of the data, I met with my peer reviewer to discuss these themes and incorporated her feedback.

Establishing trustworthiness is a multi-step process that occurs at every stage of the research process. Lincoln and Guba (1984) asserted while researchers can take steps to establish trustworthiness within their study, there are no studies that can meet all the measures of trustworthiness. Every study has its limitations and this study was not an exception. A part of

being a reflective researcher is to be flexible and adaptable, as well as be able to recognize the potential limits of your study.

### **Delimitations**

Below I have listed the delimitations I perceive and the adjustments I made to decrease their impact on the data. The first delimitation of this study is the amount of time I gave participants to explore and express their beliefs, thoughts, and feelings. Participants were given a minimum of 60 minutes per interview, but there was only one interview for them to provide their answers. Only one interview could be scheduled in this study because participants could not be delayed in getting counseling services. Participants were given a document with the provisional report for them to review and provide feedback if needed to help increase the accuracy of their responses.

The second delimitation of this study was due to time needed to transcribe and analyze interviews. Due to the short amount of time between the interview and when participants started counseling services, it is possible that participants got the provisional report of interview codes and categories after they had their rapid access and consultation appointment. Getting the provisional report of interview codes and categories after experiencing counseling services may have impacted the responses of those participants.

The third delimitation of this study was my ability to draw a diverse sample in terms of gender identity, race, and ethnicity. Participants had to be picked from a sample of students who called to make an appointment for counseling services because data was collected in a counseling center. This meant that the sampling of participants came in at random and could not be purposeful to obtain students from diverse backgrounds. When students make an appointment

for counseling services, it is often done over the phone, making it difficult to assess gender, race, and ethnicity.

The fourth delimitation of this study is that data were provided from college students who are members of Generation Z and therefore may not be applicable to members of Generation Z who do not have college experience. Data were also gathered from students who attend a large, urban, public institution, which may make the results not applicable to Generation Z college students who attend different kinds of institutions, such as small, private, liberal arts colleges. To provide space for these perspectives, further research would need to be conducted on Generation Z college students who attend different types of institutions of higher education or who are not enrolled in a college or university. Along these lines, a general critique of qualitative research is that the small number of participants create the possibility that the research is not generalizable. Given that there is a distinct lack of research in the area of understanding process expectations for Generation Z college students, more studies will have to be conducted and variables will have to be established through qualitative research.

The fifth delimitation of this study is that participants were recruited from Generation Z students who called a college counseling center to seek counseling services. Since participants initiated contact with the counseling center, they may have more positive expectations for the process of counseling based on their decision to seek counseling services. Therefore, the data may be more skewed towards having positive expectations towards the role of the client and counselor, the therapeutic relationship, and duration of counseling services.

### **Summary**

The use of the interpretive description design gave me the opportunity to identify and explore with Generation Z college students how their perceptions of process expectations impact the therapeutic relationship they form with their counselors. Through the interpretive description design I was able to capture themes and patterns to generate an interpretive description of a phenomenon that can inform the clinical understanding of how to build rapport and the therapeutic relationship with a unique population. I was also able to collect data in a setting where a significant number of Generation Z college students obtain counseling services, which bridged the gap between research and clinical practice. My hope is that from the richness of the interview data we will learn more about the identities of Generation Z as well as what it means to build a therapeutic relationship with them.



## **CHAPTER III**

### **RESULTS**

The research question that guided the study was: How do Generation Z college students perceive process expectations when seeking mental health counseling? This chapter contains the results of the study starting with a description of participant demographics. Participant demographics also includes highlights from each participant's interview. The results presented illustrate the themes and subthemes found from the data. Finally, the summary of the findings in this chapter and their connection to the research question are presented.

#### **Participants' Demographics**

The total number of participants in this study was six. Due to the Covid-19 pandemic, which started at the same time as data collection, recruitment of participants was difficult. All procedures for data collection had to be transitioned to online formats, including interviews. Additionally, I had to rely solely on administrative staff to ask students if they were interested in participating in the current study. This was during a time that was already stressful and lots of changes were occurring in the counseling center where data were collected. Then we had fewer students seeking counseling services than anticipated during the spring and summer months, which decreased the pool of possible participants. Each participant provided information about their age, gender, race, ethnicity, their status as undergraduate or graduate students, as well as their chosen pseudonym to protect their identities. The ages ranged from 21 to 24 years, which put them all in the age range of Generation Z given participants were born between the years of 1996 to 1999. Four identified as female and two participants identified as male. Three identified their race as White, two identified as multi-racial, and one identified as Southeast Asian. Two

labeled their ethnicity as unknown. One identified her ethnicity as Irish, Scottish, and English. Another identified her ethnicity as French. A third identified her ethnicity as American and a fourth identified his ethnicity as Indian. Finally, two were enrolled in undergraduate programs and four were enrolled in graduate programs. Table 2 provides the demographic characteristics of each participant.

**Table 2**

*Participant Demographics*

Participant	Age (years)	Gender	Race	Ethnicity	School Status
Christina	23	Female	White	Unknown	Graduate
Drew	21	Male	Southeast Asian	Indian	Undergraduate
Kate	24	Female	White	Irish, Scottish, English	Graduate
Nadia	24	Female	Multi-racial, African American, White	American	Graduate
Sam	21	Male	White	Unknown	Undergraduate
Selena	23	Female	White, Black, Asian	French	Graduate

**Christina**

Christina described herself as a 23-year-old, White female, of unknown ethnicity, who was enrolled in a graduate program. Christina described Generation Z as a combination of contrasting characteristics: flaky, driven, with a desire to change the world. Christina recognized that her comment on Generation Z being flaky may be influenced by her experiences with trying to get her classmates to work on group projects together. Being driven with a desire to change the world were things that she felt could be generalized of her generation, but then commented

that “every generation has a sense of wanting to make their generation better than the previous one.” After a short pause, Christina reported that ultimately, she didn’t feel comfortable speaking on behalf of her generation because she couldn’t be the spokesperson for an entire generation of people.

After reflecting on how social, political, and economic events shape generations, Christina stated that this current time was going to be “very formative” for her generation because of the civil rights protests and the COVID-19 pandemic. Christina stated that she felt there was a “lot of outrage” for how civil rights have been handled because of a “lack of humanism” seen in the United States of America. Christina felt that these events would shape her generation because they will “carry this experience with us throughout our lives, throughout our careers, and that will probably have a lasting impact on what we do.” Christina did not have a Rapid Access and Consultation appointment before her interview for this study.

### **Drew**

Drew described himself as a 21-year-old, Southeast Asian male, of Indian ethnicity, who was enrolled in an undergraduate program as an international student. “Progressive” was how Drew described his generation. He stated that “everyone I’ve interacted with in my age, my generation, everyone’s moving forward, like it’s more progressive than the last generation.” Drew went on to say that the biggest experience he shares with other members of his generation is technology and the ways in which it has impacted their lives. Drew described technology as a “shared culture and experience” amongst his generation, no matter where one lives.

Drew identified with several aspects of Generation Z by “being engaged with those around me and the things that affect me.” For Drew being a part of Generation Z meant that you

work towards seeing meaningful change with the things you care about, which was something he identified with strongly. In contrast, Drew felt as though he was not like his peers because he does not like big crowds or going out and partying, but felt that those things were not markers of his generation. Another thing that Drew felt set him apart from his peers was growing up in India and how that influenced his politics. Drew stated that, “my politics are marked by that as well and so there is a little bit of difference in political opinion, but I don’t think it’s different enough to be a marked change for my generation.” Drew did not have a Rapid Access and Consultation appointment before his interview for this study.

### **Kate**

Kate described herself as a 24-year-old, White female, of Irish, Scottish, and English ethnicity, who was enrolled in a graduate program. Kate identified as a person who is a Zennial, which is a term often used to describe someone who is born between the Millennial and Generation Z generations. Growing up Kate reported that she spent her childhood playing outside and did not get a phone until middle school, and a Facebook account until high school. She felt like her life wasn’t heavily influenced by technology and social media during her formative years. Since Kate identified more as a Zennial, she was asked to describe that subset of Generation Z and Millennials. Kate described Zennials as young adults who are finishing up graduate school, starting their careers, getting married, and starting families.

In contrast, Kate described Generation Z as a generation who has had cell phones their whole lives and is preoccupied with social media. This has made them “self-centered and not thinking about other people. . . . I’m way more of a people person, I care about people more than anything.” Kate cited examples of younger Generation Z people as “kids that don’t understand

Covid and don't understand why they need to wear a mask and not go to the bar and not hang out in groups of 10." For Kate it was important to follow safety guidelines for Covid to help keep other people safe, especially vulnerable populations because she wants to work with geriatric populations in medical settings for a career. Kate stated, "I would never want to harm any of them, like that is such a big hole in my heart." Kate felt that Generation Z has compassion for "worldly stuff" such as the environment and other large-scale social issues, but when it comes to having compassion for those around them, they fall short. Kate did not have a Rapid Access and Consultation appointment before her interview for this study.

### **Nadia**

Nadia described herself as a 24-year-old, multi-racial (African American and White) female, of American ethnicity, who was enrolled in a graduate program. Nadia described Generation Z as "shallow, fearful, unskilled, unprepared, well-intentioned and well-meaning, but clueless." Nadia continued to describe Generation Z as being "confused about their values" and "being open minded, but not having any principles." Nadia felt that this came from many kids in Generation Z having two working parents and spending their free time with friends which meant that they didn't have the support structure that would foster security. Nadia went on to say:

So your afternoons can be filled with your friends, which means that the most important things in your life are very shallow. It's everything everybody else sees on the surface. So it's having the newest thing involved in social media and hanging out with your friends all the time.

For Nadia she felt that having a supportive family was paramount to developing people who are prepared to take on adult responsibilities. This was due to feeling as

though an “extended adolescence” was “huge” in Generation Z. Nadia did have a Rapid Access and Consultation appointment before her interview for this study.

### **Sam**

Sam described himself as a 21-year-old, White male, with unknown ethnicity, who was enrolled in an undergraduate program. Sam described his generation as one that was diverse and able to connect with common interests through social media. For Sam, diversity meant diversity of thought, which was highlighted by the ways in which people can express themselves through social media. Sam stated, “everybody thinks differently and feels differently about different things, but I feel like with just how technology has been advanced recently that we can really see it.” Despite commenting on how important technology is to Generation Z, Sam reported that he recently deleted all his social media accounts due to spending too much time on them and not getting much out of it.

The characteristics that Sam attributed to Generation Z were “hardworking, caring, and supportive of each other.” Even though Sam described himself as being on the “older side” of Generation Z, he noted that younger people in Generation Z were advocates for mental health and other social justice causes. When asked how he was similar or different from Generation Z he reported that being a part of Generation Z isn’t a part of his identity, even though he recognizes that is the generation where he demographically belongs. Sam cited the reasons why he does not identify with his generation is that he does not act like his typical peers by partying, drinking, and doing drugs. In contrast, Sam cited ways in which he did feel connected to his peers by going through similar experiences by being in college together. For Sam, he also found solidarity with his peers in knowing that his generation is not “lazy, unproductive, and just sits

on their cell phones all day,” a critique that he has heard about his generation from people in other generations. Sam did not have a Rapid Access and Consultation appointment before his interview for this study.

### **Selena**

Selena described herself as a 23-year-old, White, Black, and Asian female, of French ethnicity, who was enrolled in a graduate program. The first thing Selena said when asked how she would describe Generation Z is that she had a difficult time identifying with Generation Z. Selena reported that Generation Z is her younger sister’s generation because of the way her sister focuses on having a large social media presence. For Selena a key difference between Generation Z and the generation before it, Millennials, is if one remembers the terrorist attacks on 9/11/2001. Selena reported that she remembered 9/11 because it was her first year of preschool. Selena reported that she also identifies more with the Millennial generation because she didn’t grow up with constant technology and even remembers certain old relics of technology, such as dial up Internet and floppy discs.

Selena felt that she was different from Generation Z because she did not feel reliant on technology, stating, “if I didn’t have a phone or computer, I think I could survive . . . like I wouldn’t pass out without the Internet. I would find things to do.” She also felt that she was different from Generation Z because she is intentional about what she posts on social media. Ultimately, Selena reported that she felt as though she was a part of a micro-generation, called Zennials, separated by those who grew up in the early 2000s and those who grew up in the late 2000s. Selena did not have a Rapid Access and Consultation appointment before her interview for this study.

Each participant brings their own unique perspective towards how they identify their expectations for the process of mental health counseling. These perspectives are influenced by their backgrounds and experiences, which creates a multitude of layers for how Generation Z college students conceptualize mental health, counseling services, and their own generation. Next, we look at those layers through the themes and subthemes from their interviews.

### **Overview of Results**

This section presents the results of the study that examined how Generation Z college students perceived process expectations when seeking mental health counseling. In the previous chapter of this dissertation, I described the procedures for data analysis. These procedures included constant comparative methods occurring throughout the data collection and analysis process. The purpose of using constant comparative methods was to identify codes and categories for thematic analysis. A code is defined as “a word or short phrase that symbolically assigns a summative . . . attribute for language-based data” (Saldaña, 2013, p. 3). A category is defined as a “group of similarly coded data . . . that share some characteristic” (Saldaña, 2013, p. 9). Interviews resulted in 33 codes and 13 categories that represented the participants involved in the study (Appendices K and L).

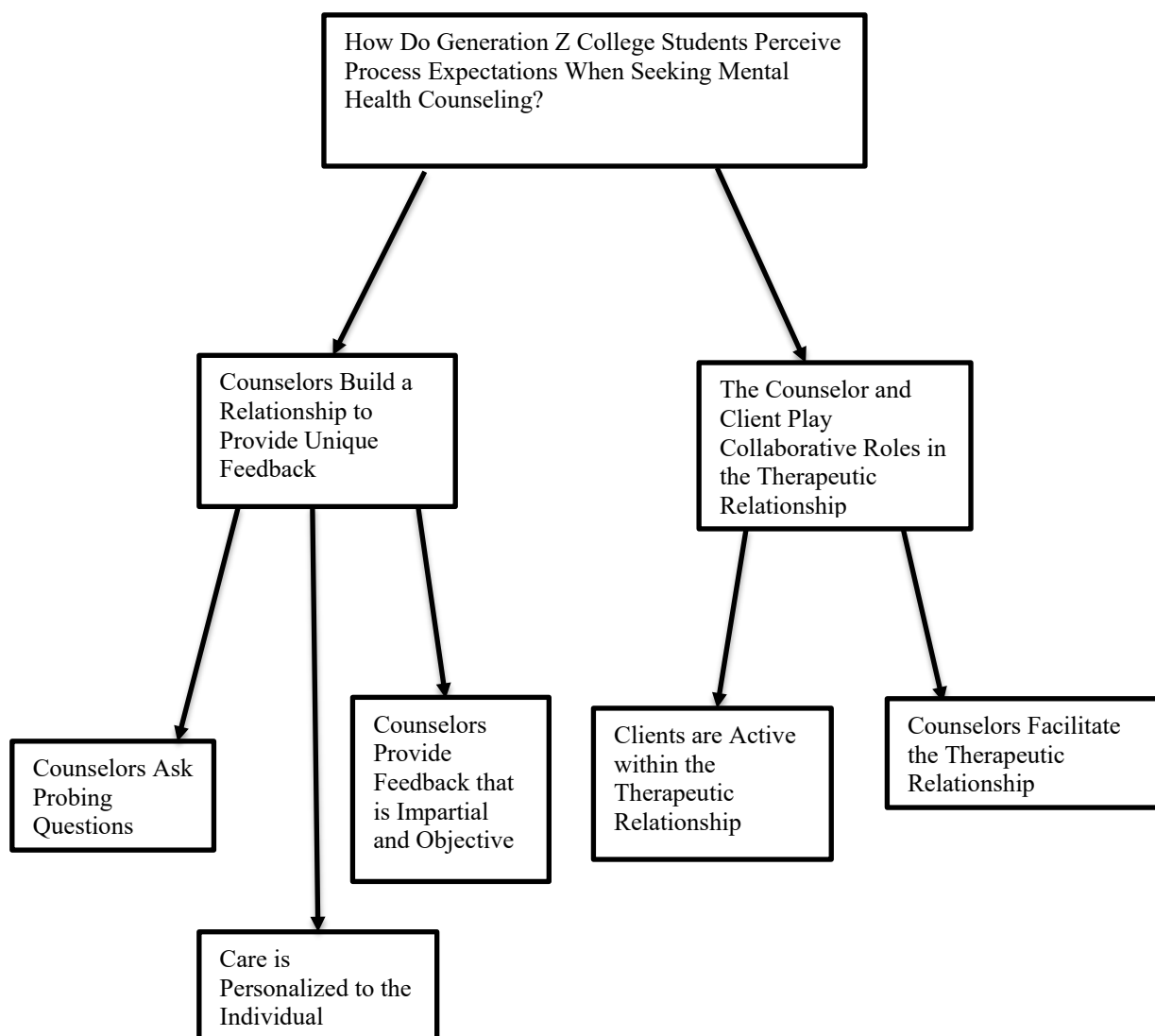
During the process of analyzing the codes and categories to merge into themes and subthemes, I assessed how many participants reported similar thoughts, feelings, and expectations, and what parts of the data stood out to me as a researcher and clinician. Another way that I assessed the data was to ask myself questions that would help me focus on what I found important in the data to help codes and categories emerge into themes. One question that guided me through this process was, “what would be helpful for college mental health counselors



to know about Generation Z clients' process expectation when they seek services?" This question was informed by my methodology because Interpretive Description is meant to inform clinical practice (Thorne, 2008). The interpretive description approach informs clinical understanding by gathering individual perspectives of participants while also gathering data on the patterns and commonalities from the entire group of participants (Hunt, 2009; Oliver, 2012; Thorne, 2008; Thorne et al., 2004). This type of qualitative methodology is most appropriate for the current study because I explored individual perspectives to discover patterns and commonalities to help inform clinical practice (Hunt, 2009; Oliver, 2012). Another question that guided me through this process was "How may the participant's generation influence their expectations for the process of mental health counseling?" This question was informed by my research question of wanting to know not only what expectations today's college students had for the process of counseling, but how those expectations were informed by their generation. As I analyzed participant data, I noticed certain quotes that represented what participant expectations were regarding the process of counseling services. Participants reported expectations for what they expected to do in sessions as clients, what they expected their counselors to do with them in session, how they expected the therapeutic relationship to be built, as well as how their generational identity informed those answers. Ultimately, I was looking for data that would help college mental health counselors understand how their Generation Z clients conceptualize the process of counseling and the therapeutic relationship through a review of their expectations.

As I reviewed the 33 codes and 13 categories across participant interviews (Appendices K and L), I assessed for similarity and significance across the codes and within the interviews to result in two overarching themes. When I assessed the codes and categories, I made decisions

based on whether they answered the research question. I also made decisions on what pieces of data could provide insight into Generation Z and what would be helpful for college mental health counselors to know about the expectations of the primary population with which they work. The themes that met these criteria were: (a) counselors build relationships to provide unique feedback and (b) counselors and clients play active roles in therapeutic relationships. As I reviewed the codes and categories, subthemes connected to themes to describe the theme in more detail. Under the first theme there were three subthemes and under the second theme there were two subthemes that illustrate nuances within the themes. The subthemes under theme one were: counselors ask probing questions, care is personalized to the individual, and counselors provide feedback that is impartial and objective. The subthemes under theme two were: client is active within the therapeutic relationship and counselors facilitate the therapeutic relationship. To illustrate the connection between the themes and the subthemes, please see Figure 4. To highlight these themes and subthemes, I provided direct quotes from each participant to give context to the thematic structure.

**Figure 4***Theme and Subtheme Flow Chart***Theme 1: Counselors Build a Relationship to Provide Unique Feedback**

The first theme represents how all six participants expected their counselors would take time to get to know them during the counseling process. Participants expected that during the

process of counseling, counselors would get to know them through asking questions in the initial assessment and subsequent sessions. Throughout the course of counseling services, participants expected counselors would get to know clients and their overall mental health concerns, as well as specific relationships and experiences that impact them. After getting to know them, participants expected counselors would offer feedback regarding their concerns. Participants believed that feedback would seem disingenuous unless counselors understood their clients' personalities, as well as the concerns that prompted them to seek counseling. The first theme of counselors would build a relationship to provide unique feedback had three subthemes that illustrate specific expectations: (a) counselors ask probing questions, (b) care is personalized to the individual, and (c) counselors provide feedback that is impartial and objective. All these subthemes highlight the expectations Generation Z college students can have for how counselors can build a therapeutic relationship to help meet their needs through counseling services.

Several distinct elements were identified by participants that frame each of the subthemes below. The first of these is the relevance of social justice to the generation as a whole. Five participants (Kate, Nadia, Drew, Sam, Christina) reported they felt Generation Z was distinct because of the degree to which they cared about the intersection of social justice causes, such as the environment, educational system, mental health, and racial justice. Drew cited an example for a failing in social justice for his generation by saying: "things were failing us as we were growing up. You know, the education system starting to become increasingly exclusive and capitalized." There was also a sense from participants that this was an important time for their generation with the Covid-19 pandemic and co-occurring protests around racial injustice. Christina highlighted her awareness of the impact of these events when she said:

This time right now is going to be very formative for my generation because . . . we are personally impacted by everything that's been going on . . . I know that there's been a lot of outrage, especially among my peers, as to how things are being handled and just a lack of humanism in our country.

Given that data were collected in the summer of 2020, which was in the first three months of the Covid-19 pandemic and during the protests for civil rights and racial injustice, these events were likely on the minds of participants when they were interviewed about their generation.

Participants highlighted a value in self-advocacy and community support as a social justice issue. Sam also captured this self-advocacy and support around mental health when he described characteristics of Generation Z by saying:

I think my generation is hardworking and caring and supportive of each other because I've noticed that mental health advocacy is typically coming from people younger than me and people my age . . . so it's like all this social justice is with people who are really young.

Sam's description of Generation Z being hardworking, caring, and supportive of each other and how that influences mental health advocacy may have influenced his decision to seek counseling services, as well as his expectation to work hard on his goals through the care and support of his counselor. A national study that addressed trends in public stigma of mental illness in the United States from 1996 to 2018 found that stigma for depression had decreased in that time (Pescosolido et al., 2021).

Sam was not the only participant who reported feeling as though Generation Z advocated for mental health. Drew reported that he felt as though there was less stigma for mental health

and help-seeking behaviors. He said, “the only reason I am here is because of my generation. My parents never addressed mental health growing up.” This quote from Drew highlights the importance of peers modeling mental health seeking behavior and how advocacy for mental health can influence help-seeking behaviors, even when they were not promoted within one’s family of origin. In a study that assessed the role of social media and how it can stigmatize perceptions of seeking mental health care, the authors found that when people experience public stigma related to mental health, that can then become internalized into self-stigma towards mental health and help seeking (Competiello et al., 2023; Corrigan & Rao, 2012). Research supports Drew’s comment about having positive attitudes towards mental health and help-seeking because of peer modeling through social media, a tool native to Gen Z (Competiello et al., 2022; Kulhman et al., 2017; Thompson et al., 2020). While people can learn sociocultural norms, such as mental health stigma from sources such as one’s family of origin, they can also learn them from social media (Competiello et al., 2022; Kulhman et al., 2017; Thompson et al., 2020). Thus, Generation Z expects counselors to see help-seeking as normative and desirable rather than stigmatized, affirming their experiences.

Every participant expected their counselors would get to know them through asking probing questions about various topics, such as their presenting concerns and background to be able to provide personalized feedback. Christina exemplified this when she highlighted her expectations for getting personalized feedback. She said:

If I just needed self-help tips, like, I could get that from a book or the Internet. I think the benefit of counseling is that the person actually gets to know your unique situation and

gets to tailor their professional opinion. You know, advice that is to you and your circumstances.

Christina's quote echoes the sentiment from other participants regarding their expectations that counselors will get to know their unique situations, presumably by asking questions, and to provide feedback that is specific to them. The comfort members of Generation Z may have with the Internet may also extend into the realm of virtual counseling services. Nadia spoke to this idea when she said, "I actually do expect a lot of counseling to move to virtual . . . I expect that virtual counseling will be huge for my generation and younger." This quote from Nadia highlights the comfort Generation Z clients may have with virtual services to make meeting with a counselor and getting personalized feedback more accessible.

Kate made a similar statement to Christina about wanting her counselor to "individualize my care . . . to help me with the direction to go." For Kate, it was important to have her counselor individualize her care to help "connect the dots" in her life. Providing this unique kind of feedback that is individualized to the client was echoed throughout participants responses on how they wanted their counselors to build the therapeutic relationship with them.

Every participant also expected that counselors would use what they know about clients to personalize their care by providing feedback and interventions that felt tailored to their concerns. Half of the participants, Christina, Kate, and Selena reported expecting feedback from their counselors that was impartial and objective. Selena described her expectation for her counselor to be "someone who is just unbiased, is able to see something, like a situation from a completely removed point of view." Even though this last subtheme was reported by half the participants, it was seen as a pertinent aspect to building the therapeutic relationship.

***Subtheme 1.1: Counselors Ask Probing Questions***

Participants expected to form a relationship with their counselors because they expected that their counselors would be thorough in getting to know them and understand who they are during the process of counseling. When participants sought mental health counseling services, they expected that their counselors would ask them questions related to what they are coming into counseling for, what they are looking for from counseling, their educational background, social experience, and their motivations in life. During the introductory process, some participants expected that counselors would get to know them through conversations and asking questions. These participants reported that they wanted to build relationships with their counselors through one-on-one conversations. Kate expressed this sentiment when she said, “The counselor would ask ‘get to know me’ questions and what I need help with and what I’m looking for.” This quote speaks to Kate’s expectations related to having her counselor ask questions to understand her concerns and what she needs from counseling services.

Nadia also expected her counselor to “ask questions around your educational background . . . your social experience . . . laying the groundwork for the rest.” For Nadia, she expected that during the initial assessment her counselor would get to know her by asking questions to understand her history, as well as current life. Nadia also had ideas about what kind of probing questions her counselor would ask her during individual sessions, such as: “How do you feel about these thoughts you are going through? Like is that really reality? Is that really an accurate perception of yourself or of someone else?” Through these questions, Nadia expected that her counselor would probe her thinking to help her understand herself and how her thoughts and emotions are connected.



For some participants, it was difficult to know how much information to give when counselors asked probing questions to get to know them in the first session of counseling.

Christina stated how she expected to feel at the beginning of the counseling process:

I think at the beginning it will feel kind of awkward just because the person that I'm talking to doesn't know me, doesn't know my background. And it's kind of hard to give enough information, you know, whether that is like through facts or stories to actually get that person in your first session, like a sense of who you are and where you're coming from and like why you are the way you are.

This awkwardness Christina reported came from not being sure what kind or how much information to give her counselor to get to know her. Yet, Christina expected her counselor would ask questions that would help to understand her background and motivations in life to have a sense of who she is during the counseling process. This quote highlights Christina's expectations related to counselors taking time to understand the clients' point of view, what motivates them, and who they are so that they can feel known and understood by counselors during the counseling process.

Another participant, Drew, expected to be asked questions that would help the counselor understand his concerns for seeking counseling. He illustrated this point when he said that he expected his counselor to provide a "structured conversation" to "understand my current mental health situation." As for specific questions or topics, Drew felt that he wasn't sure what he was going to be asked. He illustrated this point when he said: "I guess it is still very abstract to me about what I would be talking about and what they would need from me." Drew then went on to

say that he felt it would be more beneficial to be asked questions related to his presenting concerns and goals, instead of questions related to day-to-day experiences.

Sam had similar expectations about what he thought counselors would ask when he said, “asking the person questions about their life or what they’ve gone through or what they’re feeling . . . but I don’t really know what it’s like because I’ve never done it before.” Even though Sam reported that he doesn’t specifically know what questions will be asked, his initial expectations were that he would be asked questions about who he is as a person and how he relates to his past experiences.

When participants described their expectations about how their counselors would ask probing questions, they expected questions that would help counselors to know their background, understand their personalities, and challenge their thoughts and perceptions. These ideas about what questions that would be asked showed the range of expectations clients can have regarding how counselors are going to get to know them when they seek counseling services. The different kinds of question participants expected stood out as thematically significant due to participants expecting their counselor to ask about their concerns, their lives, as well as who they are as people to get to know them and understand their concerns.

Participants being unsure what questions they would be asked and how much information to give also stood out as thematically significant because this could speak to the trepidation some clients may have in the initial appointment where counselors are getting to know them. Expecting to become known to counselors is a sentiment that was expressed throughout the data on expectations for the process of counseling. This sentiment is also seen in the next subtheme

where participants expected that after counselors would get to know them they would then personalize their care.

***Subtheme 1.2: Care is Personalized to the Individual***

There was an expectation that participants held regarding counselors understanding their generation to provide adequate services. Christina spoke to how she expected her counselor to be able to put her generation into context when she said:

Whether or not I feel like I personally associate with all of the positive or all of the negative factors of my generation, I am still someone who is a product of the time I'm living in and so I think that will be helpful for my counselor to put that as part of the context in which I'm coming to them.

For Christina, her expectation was that her counselor would be able to take her generation into account with her identity and the concerns she is coming into counseling. When working with clients from Generation Z, or any generation, it is important for counselors to recognize that each client is a product of their time, what that can mean for their identity, and how that may impact their concerns (Hicks et al., 2018).

Participants expected to feel known to their counselor for feedback to feel genuine and for their care to feel personalized to them. During the process of counseling participants expected to build relationships with their counselors before counselors would give them feedback on their concerns and various aspects of their lives. In an age where information can be looked up online, some participants felt it was important to have feedback that felt personalized instead of something they could find on the Internet. Christina highlighted her expectations for getting personalized feedback when she said:

If I just needed self-help tips, like, I could get that from a book or the Internet. I think the benefit of counseling is that the person actually gets to know your unique situation and gets to tailor their professional opinion. You know, advice that is to you and your circumstances.

For Christina a vital part of the counseling process was having her counselor get to know her before they offered guidance and support. Through the act of getting to know her, Christina expected her counselor would provide suggestions that were then customized for her personality and circumstances. It was clear that she expected guidance and not something generic she could find on the Internet that didn't speak to her personally.

Christina went on to explain how she expected her counselor get to know her before offering feedback by saying:

But overall, like, I definitely hope that progresses to where I feel like they understand better what's going on so that they can actually help me individually. Just because something happened to be in the past and I'm struggling with it doesn't mean that, like the exact same advice applies to me as it does to someone else who went through the same thing. So that's why I really want them to understand who I am so that they can they give me tools or advice that will be optimal for me.

Christina expected that when she sought counseling services counselors would give her advice that was individualized even if other clients came in with similar concerns. Christina also expected counselors would take time to get to know her and understand who she is before providing any feedback. Christina went on to say she expected counselors to utilize their education and experience when providing feedback. She said: "To first, get a sense of who I am

and why I am seeking counseling and then give me suggestions, advice like things that they have learned in their education/experience that will help me reach my goals.” Having counselors take time to get to know a client by using their education and experience shows how Generation Z college students can expect counselors to give personalized and therapeutic feedback when they seek counseling services.

Sam also reported that he expected his counselor to understand how clients are different even when they present with similar concerns. He said:

Being understanding and realizing that every case is different and everyone is different, so different people might experience the same concerns differently, even though they might be the same concern. And just like understanding that and helping the client feel comfortable around them.

Counselors recognizing the individuality of each client was important to Sam because he wanted to feel known by his counselor. This sentiment was illustrated when he said: “just getting to know me personally because I don’t know much about mental health, but I assume, every case would be different. So I would assume just getting to know me and what I’m feeling.” Sam went on to say that he expected his counselor to get to know him by asking “who I am or knowing like where I come from or what I like and don’t like.” Sam stated that he expected his counselor to get to know him “on a personal level” before providing individualized care so that he feels like he is treated as an individual with his own perspectives.

Selena spoke about several ways in which she expected to get personalized feedback from her counselor. Selena stated that she expected her counselor to: “take whatever abilities I have and then telling me ok, this is the best way you can do this to have the best result.” This

quote is an example of how clients could expect personalized feedback to optimize results after the counselor learns who they are and their abilities.

Once she built a relationship with her counselor, Selena described how she expected the counselor's feedback to go deeper:

A counselor will be able to take a situation or a particular behavior or something and be like, hey, this is what you're doing, maybe don't do that. Here's why that's not healthy for you. And here's how you can kind of process that or think about that or go about that differently.

For Selena, it was pertinent for her to get personalized feedback on her behaviors to think about things differently. Ultimately, she expected this kind of feedback to result in her counselor guiding and motivating her through the process of getting to a "good mental state."

When describing her expectations for the process of counseling, Kate reported that she expected her counselor to personalize her care. She reported:

I want to see somebody that's going to individualize my care and be like this is probably going to be more helpful than this or this will help you in this way. I need someone to help me with which direction to go.

For Kate, personalizing her care meant that she expected her counselor to explain which interventions would work for her, as well as how these interventions would be helpful. Kate also expected her counselor to curate different interventions and resources to provide a direction for how to alleviate her concerns.

Nadia expected her counselor to personalize her care through appropriately chosen techniques. She said, "what I wanted out of these sessions personally was to be able to talk to

someone who would listen to what's going on in my life and give appropriate guidance from techniques." This quote further highlights the expectation participants had about how counselors take time to get to know them and their concerns to provide guidance that is personally tailored to their situations and needs.

Drew expected his counselor to get to know him and provide treatment recommendations that would best alleviate his concerns. When asked what his expectations were for the process of counseling, Drew stated that "being able to have that structured conversation with my counselor . . . to understand what kind of specific service I would need in terms of my mental health and how I would improve that." Drew went on to say how he expected his counselor to get to know him and offer personalized feedback by saying: "that process of getting to that understanding of my current mental health situation . . . reaching that point of understanding and then from there, going towards how to actually solve the mental health issues I'm having." When Drew sought counseling services, he expected his counselor would get to know him through a structured conversation aimed at providing him with the appropriate treatment for his concerns.

During the process of counseling, participants expected counselors to build a relationship with them through providing personalized feedback. Getting personalized feedback from counselors was expected because participants wanted counselors to provide care that was unique to their circumstances, personalities, individual concerns, as well as concerns of their generation. In addition to getting personalized feedback, participants also expected feedback that was impartial and objective from counselors to build the therapeutic relationship.

***Subtheme 1.3: Counselors Provide Feedback That is Impartial and Objective***

Three participants expected counselors would provide impartial and objective feedback from an impartial and objective perspective. Christina, Kate, and Selena expected counselors would give impartial and objective feedback because they were outside of their social and familial circles and only knew what they were reporting to them. These factors made it feel easier for participants to talk with counselors about their concerns and lives. This subtheme emerged because it provided expectations participants had related to counselors' perspective and how it plays into the personalized feedback they give to their clients, as well as how they can build a relationship with clients.

Christina expected that one of the benefits of having a counselor was that they were not directly involved in her life, such as a family member or friend. She said that a counselor is "someone who's not related to me/don't know me/don't interact with me in any other areas of my life." Christina went on to say that "it's kind of hard to find like a nonpartisan party to talk to about the things that are going on in my life when it relates to all of the people that are in my life." For Christina to feel as though her relationship with her counselor was beneficial, she needed that person to be separate from her life to be able to give her feedback that was impartial and objective. Christina also highlighted an additional benefit to having a counselor because it would be difficult to talk with friends and family when her concerns are related to those relationships. Christina went on to say:

So I think that they will take a role of being uniquely outside of my normal circle of interaction and being able to kind of look in as an outsider and say, this is where, you know, we can talk through these things. This is a confidential space.



Christina expected to have support from someone who didn't know people in her social circle and could give her an impartial and objective perspective. Christina also expected to have a safe and confidential space where she could talk with a professional who was invested, but not directly involved in her life.

Selena also expected to receive support from her counselor from an impartial and objective standpoint. She describes a counselor as:

A kind person who's walking through things, but with honesty that you might not get from someone who's closer to you just because they don't want to hurt feelings or also just because they might not see something from a removed point of view.

In turn, Selena expected to have someone who could see her situation and concerns from an impartial and objective perspective because she would be less likely to experience this with friends and family. For Selena, this impartial and objective perspective offered a level of honesty she wouldn't expect to get from her friends and family because they might be afraid of making her upset. Yet, from a counselor, this type of feedback would be perceived differently because it is coming from a trained professional who would be kind and able to "walk through things" during the process of counseling.

Kate also expected that it would be helpful to talk with someone who would have an impartial and objective point of view. She stated: "It's much easier when you have an impartial and objective third party that is only getting the information that we're telling them." For Kate she expected that talking with a counselor would be "easier" due to their role as an impartial and objective perspective. Kate also pointed out that counselors only get information the client tells them, which helps the counselor's feedback to be centered towards the client based off what they

have said in sessions. This quote highlights the expectations that participants had about counselors providing feedback that is impartial and objective towards their clients. This theme and three subthemes show what expectations participants can have for how counselors will build a relationship to get to know them and provide impartial and objective feedback during the counseling process. First, they expected counselors to be thorough in getting to know the client so that the client feels known to the counselor. Second, participants expected that counselors would build a relationship with them by getting to know them before they provided support that was tailored and optimal for their concerns and situations. Some participants expected the counselor to build a relationship with them by understanding that each client is different, even if they have similar concerns. Overall, participants wanted counselors to build a relationship to provide techniques and treatment recommendations that were personalized to them to provide the best results in resolving their concerns. Third, participants expected that counselors would build a relationship with them to provide feedback that comes from a supportive, impartial, and objective perspective. This type of relationship allowed them to feel more comfortable speaking about the people in their lives with a person who is invested, yet also objective. The three subthemes for theme one all highlight how Generation Z participants expected their counselor to build a relationship with them to provide impartial and objective feedback that was unique to their personalities, circumstances, and concerns.

## **Theme 2: Counselor and Client Play Collaborative Roles in the Therapeutic Relationship**

All six of the participants thought that clients and counselor should play active and collaborative roles in the therapeutic relationships. Data from the codes and categories stood out as thematically significant due to the way participants described expectations for what the

counselor and client would be doing in session. This theme relates back to the research question because an important part of the process of counseling, as well as the expectations one would have regarding that process, includes the actions of both the client and the counselor in session. Client and counselor activity is seen in the two subthemes for this theme: client is active within the therapeutic relationship and counselor facilitates the therapeutic relationship. Participants shared that the client is active by providing matters to discuss in session and do work outside session to move forward on their goals. The counselor is collaborative by facilitating the conversations in session, as well as providing interventions to help clients alleviate their distress. This theme stood out as thematically significant because it explores the expectations Generation Z college students have for what they and their counselors will be doing in and out of counseling sessions. This theme was also considered to be thematically significant because it highlights how the roles of the client and counselor impact the therapeutic relationship.

***Subtheme 2.1: Client Is Active Within the Therapeutic Relationship***

Participants expect to get from counseling what they put into it. What they put into it depends on how active they are in the relationship. Christina stated that she “definitely wants to take an active role” in counseling. She thought being active in her role as the client would benefit her overall:

I think there is no point in doing counseling if you’re not going to give yourself space and time to think about the hard topics that you’re bringing up during counseling . . . I already have been writing down my goals and expectations for what I want to get out of counseling.

Christina is clear about how she wants to be active in her role as the client. For her, taking ownership of her role is about bringing up difficult topics in session and then thinking about those topics in between sessions.

Christina went on to say that while she thinks of the counselor's role as being a catalyst for change, it is ultimately up to her to make changes in her life. Christina stated:

It's ultimately me who has to process things and reflect and give myself time to think about things that we've talked up about during our meeting because I realized that it's like a short amount of time that we're meeting and then more of my time is just me. So if there's things I want to work on, relationships or something, for example, I am the one who's actually going to be working on my relationships. So I have to be willing to take that active role and do things that may be uncomfortable . . . the point of asking for help is being willing to try things that they suggest.

Christina realized that while she is engaged in counseling services, she will have a significant amount of time between sessions to reflect on and progress on her goals. Having this time between sessions will make her ultimately responsible for putting in the work to complete her goals. She expected that being active in her role meant that she would work on her goals between sessions to make changes in her life. Taking an active role meant feeling uncomfortable, being willing to work on her concerns outside of session and being willing to try things that her counselor suggests.

Drew reported that he expected to be active in counseling by "talking about my experiences, my thoughts, and just how my mental processes affect my everyday life." In the therapeutic relationship, Drew expected to be active by giving his counselor the information

needed to help him move forward. When talking to his counselor, Drew expected to take ownership of his role by being open and honest so that they can work together to fix the concerns that lead him to counseling.

Being active for Kate meant that she wanted to lead her counseling sessions by doing more of the talking while the counselor facilitated the conversation through keeping her on track and providing direction. Kate exemplified this theme when she stated, “I would be the one doing more of the talking and the counselor would be more of like facilitating it. I kind of like that I’m more leading the meeting than anything.” Kate went on to say that she expected her counselor to facilitate the discussions with her by helping to keep her on track and providing direction during the conversation so that she can get what she needs out of her sessions.

Similar to Kate, Selena echoed the sentiment of working as a team with her counselor when she said, “I see counseling as a team effort. Like I’m putting forth the material and being honest and contributing like how I feel about things, and then the mental health professional is having their spin on it.” This quote highlights how Selena expected to build the therapeutic relationship by bringing material to discuss during session, as well as being open about her feelings so that the counselor can provide feedback. Selena went on to say that she expected to be active by following the feedback and guidance she received from her counselor, by

Recommending some stuff that I should do on my own time, like journaling or that kind of thing, I would follow those recommendations . . . to think through my feelings and why I feel that way . . . and just being open and honest and willing to participate in discussions.

For Selena, she expected that being active in the therapeutic relationship meant she would follow the recommendations given to her by her counselor, reflect on her feelings, as well as being open, honest, and willing to participate in the conversation with her counselor during session.

Sam reported that he expected it would be more beneficial for him to be more active in the therapeutic relationship. Sam said, “I personally would want to be more active. I feel like that would be the most beneficial to the client and for me personally, at least, being more active.” Sam went on to say how he expected he would be active with his counselor by saying, “I always imagined it was just like answering questions and being honest and transparent and like not trying to hide anything.” For Sam being active didn’t just mean answering questions, but also meant being honest and not trying to hide anything from his counselor.

Overall, participants expected to be active within a collaborative relationship with their counselor when they sought mental health counseling services. This was seen through participants expecting to do most of the talking. Participants also expected that they would be active by trying what the counselor suggests and working on their goals between counseling sessions. For participants, they expected the therapeutic relationship to be a collaborative relationship where the client is active by answering questions honestly and openly about their mental health to facilitate a therapeutic relationship to address their concerns.

### ***Subtheme 2.2: Counselors Facilitate the Therapeutic Relationship***

Participants described their expectations for the role of the counselor being both directive and facilitative within the therapeutic relationship. Facilitation of the therapeutic relationship was defined by participants as the counselor facilitating a discussion to identify a path for change, provide clients tasks to complete between sessions, keeping the client on track and providing

conversational direction, reviewing what was discussed in previous sessions, and suggesting topics to discuss for follow up sessions. In this context facilitation meant that the role of the counselor was to help make change easier for the client through building a therapeutic relationship to help alleviate their presenting concerns.

Nadia expected that her counselor would facilitate a path to change “from session to session following up, like a recap of what you were supposed to do or what we talked about after last session.” Nadia expected that her counselor would be directive by facilitating the session with recapping what was talked about in the previous session, as well as discussing what Nadia was to work on in between sessions.

Nadia went on to say that she expected her counselor to facilitate her sessions by “giving me support to do the things that are important, to help me make the decisions that are hard, to face my fears and keep going.” During session Nadia expected that her counselor would facilitate by providing support in important matters, help her make difficult decisions, as well as help her face fears. Nadia went further into how she expected her counselor to facilitate her sessions by saying, “I need someone to be able to listen and give me kind, thoughtful, reasonable, responsible support, and guidance. And encouragement, really, I think it’s encouragement.” Nadia expected her counselor to facilitate change by giving thoughtful and reasonable feedback regarding her concerns, with an emphasis on providing encouragement to help her feel supported.

Kate also had expectations related to how her counselor would be directive and facilitative during their counseling sessions. Kate reported that she thought her counselor would “keep asking me questions and making sure that I’m staying on track and making sure that I’m

telling as much as I can about something.” Kate expected a collaborative relationship where her counselor asked questions for her to answer. Then she expected her counselor to facilitate the conversation by making sure that she is being as open as possible, while also keeping her on topic.

Christina expected her counselor to be a facilitator in helping her reach her goals when she stated, “just like facilitate my path towards my goals.” She went on to say that facilitating a path to her goals meant that her counselor would give her suggestions and advice from what they learned from their experience and education. Christina highlighted her expectations for how counselors help facilitate paths for clients to complete their goals by providing suggestions and advice related to what they want to work on during counseling.

Drew echoed a similar sentiment when he said that he expected his counselor to be “a facilitator between, me and understanding the issue and working to fix it.” For Drew, the counselor facilitated a way for him to make connections regarding understanding his role in his concerns and how he can work towards fixing them. Both participants described their expectations related to their counselor being a facilitator who would help them reach their goals by understanding their concerns and working towards alleviating them.

Sam described how he expected his counselor to facilitate their sessions by “being understanding and caring, like trying to be helpful, and want to be helpful, and want to help improve or help me understand what’s going on.” Facilitating to Sam meant that the counselor would provide understanding and caring guidance to help him understand his concerns for counseling. Sam also expected that the counselor would want to be helpful by facilitating ways for him to improve his mental health. Sam went on to say that he expected his counselor to



continue to facilitate their relationship after learning his concerns for counseling. He said, “I imagine it would be somewhere between finding out what’s wrong and somehow fixing it or giving strategies to fix it to improve or resolve those concerns.” When Sam sought counseling, he expected his counselor to learn of his concerns, help him understand his concerns better, as well as provide strategies to resolve the concerns that brought him into counseling.

Even though Sam expected his counselor to be directive, he expressed that he does not want to be told what to do. Sam made this point clear:

I don’t really want to be told what to do, even though I am looking for help. I would want to know how something is going to help me before I’d want to do it. So I’m not like, wasting my time, you know?

Despite Sam expecting his counselor to give strategies to resolve his concerns, he didn’t want to be told that he had to try a particular technique without understanding the potential benefits. For Sam, he wanted to know how a technique was going to be beneficial before he would try it, expecting an explanation from the counselor to not waste his time.

In contrast, Selena expected her counselor to facilitate the maintenance of the therapeutic relationship by giving direct feedback on her situations and behaviors to approach them in a healthier way. Selena described her expectations for her counselor to facilitate the therapeutic relationship by

Taking a situation or a particular behavior and be like hey, this is what you’re doing, maybe don’t do that. Here’s why that’s not healthy for you and here’s how you can kind of process that or think about that or go about that differently.

This approach directly contrasts Sam's expectations of not wanting his counselor to tell him what to do, which can highlight the different expectations Generation Z college students can have regarding how direct they want their counselor to be when providing feedback.

Even though she expected her counselor to be direct, Selena reported that she also expected a collaborative relationship with her counselor to see "how fast my mental health can be improved." Selena went on to describe her counselor's role in facilitating the therapeutic relationship as having a conversation that was more casual and where she felt comfortable with her counselor. She said, "talking like we were friends having a conversation, but again, from like a third party . . . a casual conversation, not like a power dynamic." Selena expected that her relationship with her counselor would feel more like casual conversation where she felt comfortable. This expectation highlights how clients want the therapeutic relationship to feel more casual, instead of feeling an obvious power dynamic between them and their counselor.

Selena described how she expected the counselor's facilitation of the conversation to look by saying, "talking as if you're talking to a friend, but it's a friend that's going to be like really honest with you, but like challenge you and make you reframe how you're thinking about things." From this quote it appears Selena expected that during the process of counseling her counselor would facilitate a therapeutic relationship that was open and able to challenge her. Selena expected her counselor to facilitate a relationship that was casual enough to feel like a friendship, but therapeutic enough to discuss different ways of thinking.

Participants expected that counselors and clients play collaborative and active roles in the therapeutic relationships by the client being active within and the counselor facilitating the therapeutic relationship. Throughout the process of counseling, participants expected to get out

what they put into the relationship between them and their counselor. Participants expected to be active by putting in time in between sessions to work on their concerns, as well as being open, honest, and reflective during sessions. Participants expected their counselors to be active by facilitating therapeutic conversations where they can give helpful feedback and things to work on between sessions to facilitate client insight and change. This subtheme illustrates the expectations participants had for the roles of the client and counselor, as well as how the therapeutic relationship can be collaborative within the process of counseling.

### **Summary of Results**

In this chapter I went over descriptions of all the participants, gave an overview of the results, which included the thematic structure, as well as detailed descriptions for each theme and subtheme from data collected for this study. The themes were developed to help answer the research question that guided this study: How do Generation Z college students perceive process expectations when seeking mental health counseling? The results of this study suggest that participants expected their counselor will build a relationship with them to provide unique feedback by asking probing questions, personalizing their care, and providing feedback that is impartial and objective. The results of this study also suggest that participants expected to play an active role in the therapeutic relationship while their counselor facilitates a therapeutic relationship that is collaborative.

All the themes and subthemes help to answer the question of how Generation Z college students perceive expectations for the process of mental health counseling. Throughout this chapter I have provided quotes from each participant on what they expect regarding how their counselor will build a relationship with them, personalize their care, provide feedback, as well as

how they perceive the roles of the client and counselor within the therapeutic relationship. In the next chapter, I explore the findings from this study compared with applicable research on Generation Z college students and their expectations for the process of mental health counseling. I also discuss implications for college mental health counselors, as well as for supervision, teaching, leadership/advocacy, and future research. In addition to the implications of the results of this study, I also describe the limitations of this study, as well as my experience as the researcher conducting this study.

## **CHAPTER IV**

### **DISCUSSION**

The purpose of this study was to identify the expectations Generation Z college students had for the process of counseling. Given that Generation Z is the newest generation to be attending college at the time of the current study, it is not surprising that research on their expectations for the process of counseling is still emerging. From the review of the literature, it was clear that there was a dearth of research on process expectations for this population, particularly Generation Z participants who have sought counseling services. To increase the literature on this topic, the research question that informed the current study was: How do Generation Z college students perceive process expectations when seeking mental health counseling? To better understand this topic, I also examined how participants understood Generation Z as a whole and how that influenced their expectations for the process of counseling. The characteristics participants identified as distinctive of Generation Z are discussed in relation to the themes of the current study. The results of this study produced two main themes with subthemes. Theme one was counselors build a therapeutic relationship to provide unique feedback. The subthemes of theme one were: (a) counselors ask probing questions, (b) care is personalized to the individual, and (c) counselors provide feedback that is impartial and objective. Theme two was the counselor and client play collaborative roles in the therapeutic relationship. The subthemes of theme two were: (a) client is active within the therapeutic relationship and (b) counselors facilitate the therapeutic relationship. These themes and subthemes were discussed in relation to how they have added and supported the current literature. Implications for college mental health counselors, as well as for supervision, outreach,

and future research are described. The limitations for the current study are also presented. My experience as a researcher conducting this study was explained to provide additional context to the results from the current study. To begin this chapter, I discussed the ways in which my participants described the uniqueness of their generation and how these characteristics impacted their expectations for the process of counseling.

### **Generation Z in Context: What Makes this Generation Unique and the Impact on Process Expectations**

This study sought to understand how participants' status as members from Generation Z impacted their expectations for the process of counseling. Each generation is defined by different characteristics that could impact something as fundamental as counseling expectations. Therefore, it seemed appropriate to highlight these characteristics and put them into context from the results of the current study. What makes this generation unique are two characteristics participants described as distinctive of Generation Z: being social justice oriented and their utilization of technology and social media throughout their lives. In the interviews, participants' concern for social issues led to increased motivation for social change. Being more motivated to make changes in the world may have contributed to them wanting to make changes within themselves through being active in the counseling relationship. Beyond their orientation towards social justice, Generation Z are digital natives. In this way they are the first generation to grow up with technologies, such as social networking and video conferencing as a part of their everyday lives.

As digital natives, having the choice to meet with their counselor in the format of their choice, face to face or online, was crucial to the counseling experience for one participant. Nadia

spoke to this idea when she said, “I actually do expect a lot of counseling to move to virtual . . . I expect that virtual counseling will be huge for my generation and younger.” This quotation from Nadia may have been influenced by the Covid-19 pandemic where all counseling services were moved to online formats at the counseling center where data were collected. Giving Generation Z clients a choice of remote counseling is an example of how the utilization of technology can be influential to the experience of counseling for this generation. The increase in virtual counseling services could have a significant impact on Generation Z client’s expectations for the process of counseling. As Nadia stated, this format for counseling “will be huge” for her generation, which could mean that clients from Generation Z would expect college counseling centers to continue providing services that would be in virtual formats. Nadia’s comment also implies that Generation Z clients could feel more comfortable engaging in the therapeutic process through virtual formats, which could explain expectations for virtual services to be offered at college counseling centers.

Even though Christina didn’t comment directly about virtual counseling services, she did describe technology playing an important role in her daily life. Christina stated, “it’s basically a vital part of every day for me because without technology I can’t do work, I can’t learn things, I can’t connect with people . . . everything is online.” Given the role Christina described technology playing in various aspects of her life, it is understandable that it could be a format where she and other Generation Z clients would expect to connect with others and learn about themselves, such as through the therapeutic relationship within counseling services.

While Nadia and Christina thought that virtual counseling services could be expected for Generation Z, Sam and Drew felt differently about technology. Sam stated that he is “always a

supporter of the least amount of technology possible.” Sam felt that a major concern with technology is that it isn’t always reliable. Sam reported concerns around worrying about his laptop needing to update when he is in the middle of something, or having the Internet not work, or his laptop having a low battery and he can’t find his charger. Drew also cited a critique for the use of technology. Drew reported that he has concerns around the security of technology, even though he uses technology “for almost everything.” He went on to say that “people are becoming more aware about the risk associated with the use of technology.” This could provide additional context for why some Generation Z college students may want to engage in counseling services through in-person formats, if given the choice. Drew and Sam’s perspective on technology could mean that Generation Z clients could be less likely to want to engage in counseling services through a virtual format. Even though a significant number of Generation Z college students could expect college counseling centers to offer virtual services, not all students may want to engage in this format for services. Therefore, offering a variety of virtual and in-person formats is critical to meeting the needs and expectations of the Generation Z population who seeks counseling services.

For Generation Z their developmental context was heavily influenced by social media (boyd, 2014). Generation Z has come of age in a predominantly social networked society where exposure around social justice may have happened earlier or more broadly at a pivotal point in their development. In other words, the Internet and social media provided information for Generation Z at a level that was unprecedented in previous generations. This could mean that Generation Z clients have increased access to topics around mental health and social justice, including information on the process of counseling. Selena captured this idea when she stated, “I



think Generation Z is definitely more aware of the world strictly because there is more exposure early on and continually because of social media.” Kate also echoed a similar sentiment when she stated, “I can see them being more conscious of the world because it’s so easy to get information now.” These statements hypothesize a possible reason for the increased awareness and knowledge for Generation Z on a variety of topics, including mental health, help-seeking, the process of counseling, as well as social justice issues. Throughout interviews with participants in the current study, it was clear that they had a general understanding of what the process of counseling can look like, even though they had not had counseling services before their interview. As highlighted by Selena and Kate, Generation Z has an increased awareness and knowledge of the world around them because of their social media and Internet use. These could be influences on their general understanding of the process of counseling before having experienced it firsthand. Therefore, counselors cannot assume that when Generation Z clients come to counseling for the first time that they do not have any knowledge about the process of counseling, their role as the client, the role of the counselor, or the therapeutic relationship.

The increased social media access around social justice issues could also influence Generation Z client expectations for the process of counseling by making them expect a therapeutic relationship where they can feel safe and supported due to experiencing a lack of humanity in the United States around racial injustice, as Christina stated when describing the connection Generation Z has to social justice.

Christina stated:

This time right now is going to be very formative for my generation because . . . we are personally impacted by everything that’s been going on . . . I know that there’s been a lot

of outrage, especially among my peers, as to how things are being handled and just a lack of humanism in our country. And so I think there's a sense of really wanting to do better and wanting to have a voice that stands for something different than what's out there right now.

Christina's reference to a "lack of humanism in our country" is regarding the murder of George Floyd which occurred at the same time data was collected for the current study. In her interview, Christina went on to talk about how she thought the racial injustices, such as the murders of Breonna Taylor and George Floyd, along with the Covid-19 pandemic, would shape her generation by "carrying this experience with us throughout our lives, throughout our careers, and will probably have a lasting impact on what we do." While this quotation does not directly connect to expectations for the process of counseling, it highlighted how Generation Z clients could feel about wanting a space where they can voice how events that shaped their generation have had fundamental and lasting impact.

These pivotal events for Generation Z could relate to their expectations for the process of counseling by wanting a therapeutic relationship with counselors where they feel heard, known, and safe. To feel that there is a lack of humanism in the country where one lives is terrifying. This could mean that Generation Z clients expect a therapeutic relationship with their counselor that would help them feel safe in the world around them. For Generation Z, their utilization of technology and social media, as well as being social justice oriented has influenced their development as emerging adults and are characteristics that make their generation unique. In the following sections I will describe each theme from the current study and how these themes relate to previous research on process expectations from earlier generations.

### **Theme One: Counselors Build a Relationship to Provide Unique Feedback**

The current study added to the existing literature on process expectations for mental health counseling by providing insight into how Generation Z college students can expect counselors to build the therapeutic relationship with them. The results from this first theme highlight that participants from the current study expect to develop a close relationship with their counselor where they feel known to them. Participants from the current study reported that they expect their counselor to build a close therapeutic relationship with them by asking probing questions, providing personalized feedback, and providing feedback that was impartial and objective. The results from the current study echo what has been found in previous studies about expectations for the process of counseling (Hill et al., 2012, Westra et al., 2010). What is different about the Generation Z participants in the current study is that even though they mostly did not have any counseling services prior to being interviewed, they seemed to have accurate insights into what they could expect during the process of counseling and how their counselor would build the therapeutic relationship with them.

In this first subtheme 1.1, counselors ask probing questions, data from Generation Z participants echoed what was found in the literature on building the therapeutic relationship with Millennial college students. The initial responsibility to establish a relationship relied on the efforts of their counselor (Hill et al., 2012). Participants in the Hill et al. (2012) study expected a therapist to ask questions to “know and understand the client deeply” and to build a “close” and “professional” relationship with them (p. 17). Results from the current study expanded on what specific questions clients expected their counselor to ask, such as when Kate stated that she expected her counselor to ask, “get to know me questions and what I need help with and what

I'm looking for," as well as Nadia's statement about expecting her counselor to "ask questions around your educational background . . . your social experience . . . laying the groundwork for the rest." Nadia described several topics she expected her counselor to ask during session (sub-theme 1.1). These topics included professional stress, education, relationships, and if she experienced traumatic events or heard about traumatic events in the lives of others. Nadia highlighted the importance of counselors asking probing questions not just about what is going on directly in the lives of clients, but what could be having an impact from the world around them. Overall, participants in the current study wanted to feel heard, known, and safe and expected to have a counselor who would build a relationship with them to provide personalized feedback through asking probing questions to personalize their care.

Expectations from participants in the current study are similar to the expectations from Millennial participants of Hill et al. (2012) study. Both studies found that participants believed that counselors would ask questions to get to understand clients deeply and build a relationship that is both close and professional to work on their concerns for counseling.

Participants in the current study identified common factors within their expectations for the process of counseling. The importance of personalized care and feedback became subtheme 1.2. This echoed what was found in Tracey et al. (2003) who analyzed common factors in psychotherapy as identified by psychologists, such as clients receiving feedback and having experiences within counseling that would personalize their care. In the Tracey et al. (2003) study, psychologists identified ways that client care would be personalized by:

Client receives feedback in order to gain a more realistic perspective, client receives suggestions, client has opportunity for catharsis and ventilation, client's insights and

awareness are fostered, client's emotional and interpersonal learning is enhanced, client has opportunities to focus on "inner world" and explore emotional issues, and client practices and acquires new behaviors. (p. 405)

While the focus of the Tracey et al. (2003) study was not on client expectations, it identified what therapists feel are central components in the process of counseling and the therapeutic relationship. Some of these central components were also identified by participants in the current study regarding what they expected for the process of counseling, such as receiving feedback, emotional and interpersonal learning, exploring emotional issues, and practicing and acquiring new behaviors. The results from the current study and Tracey et al. (2003) draw parallels for what clients and therapists think are important components of the therapeutic relationship for clients to alleviate their concerns and grow as individuals. These results help counselors to know the importance of providing feedback, facilitating emotional and interpersonal learning, exploring emotional issues, and teaching new behaviors to their Generation Z clients because that is what they may expect when they start the process of counseling.

Horwitz et al. (2022) found similar results to the current study regarding interest in personalized feedback. Participants in their study showed interest in reviewing personalized feedback from an online assessment about their mental health (Horwitz et al., 2022). In Horwitz et al., participants were randomly selected from a clinical trial to take a survey on various mental health measures. Participants from Horwitz et al. were Generation Z college students who had not had any mental health counseling experience within the previous year. Therefore, they were not a population who was actively seeking counseling services, which may influence the results. The purpose of the Horwitz et al. study was to assess how various demographic and treatment

seeking factors related to reviewing online personalized feedback on participants' emotional distress. What is interesting about the Horwitz et al. (2022) study is that even though the participants were not seeking mental health counseling at the time of the study, they showed a significant interest in their personalized feedback from the results of the survey they completed about their mental health.

In the current study, several participants reported that they expected their counselor to provide personalized feedback on their goals and presenting concerns through conversations during counseling sessions. Participants in the current study go beyond the results of Horwitz et al. (2022) by highlighting how participants expected to build a relationship with professionals who would take time to get to know them to give feedback. While accessing an online program is different from getting personalized feedback from a mental health professional, it does point to a high level of interest in the personalized feedback from another sample of Generation Z participants (Horwitz et al., 2022). The results from the Horwitz et al. study confirmed the results of the current study, that Generation Z college students have a high level of engagement with personalized feedback regarding their mental health. Whether it's from surveys and questionnaires or a mental health professional, they are interested in knowing more about their mental health in formats that are personalized to them.

Personalized feedback was something that Christina and other participants captured as a benefit of counseling compared to other sources of support and information. Christina reported that she sought counseling instead of getting generic mental health information off the Internet because she wanted feedback that was personalized to her situation. In addition to expecting personalized feedback, participants also wanted feedback that was impartial and objective. This

may relate to the desire to obtain feedback through the therapeutic relationship because feedback from a counselor is more likely to be impartial and objective as opposed to all the opinions one can find on social media and the Internet that are biased and subjective.

A third subtheme emerged that was unexpected. Subtheme 1.3, the importance of the counselor providing feedback that is impartial and objective, emerged in three of the first interviews I conducted. There is a limited amount of research regarding clients expecting their counselor to be objective and provide impartial feedback. This particular aspect of process expectations was not included in Chapter 1 because it was not found during the review of literature. It was only after data were collected and analyzed that this expectation came to light. Therefore, the current study is one of the first studies to highlight this expectation within the process expectation research. In a review of the literature on process expectations and objective or impartial feedback one article found a similar finding to the current study. Moore et al. (2016) found that participants expected to have counselors who were objective and impartial in their support. In addition to having similar findings, participants from Moore et al. were also clients who sought counseling services at their college counseling center. Given that this article was published in 2016, they were within the age range of Generation Z. Unfortunately, this can only be deduced from the study publication year since the authors did not collect demographic data. Similar to what participants reported in the current study, participants in Moore et al. found that this kind of support was difficult to find outside of the therapeutic relationship, where counselors are bound to standards of professionalism that include being objective and impartial. This finding highlights the importance of Generation Z college students expecting a level of professionalism from their counselor to build a therapeutic relationship where they can receive impartial and

objective feedback on their concerns. The discussion of themes from the results of this study continues with the second theme of counselors and clients playing collaborative roles in the therapeutic relationship and how this theme relates to the literature on process expectations and mental health.

### **Theme Two: Counselors and Clients Play Collaborative Roles in the Therapeutic Relationship**

Data from participants in the current study highlighted that Generation Z college students can have expectations for what the client and counselor will be doing in session, as well as how counselors build rapport and the therapeutic relationship with them. Participants expected their role as the clients to be active by being honest about themselves in session, open to what the counselor suggests for them, and willing to work on their goals outside of session. In turn, participants expected the role of the counselor as one who facilitates the counseling sessions to build rapport and provide a meaningful, therapeutic relationship to resolve their concerns. This expectation for a high level of collaboration is uniform across all the participants in the current study.

Overall, participants in the current study expected to have a collaborative relationship with their counselor where they could be active in co-creating the therapeutic relationship together. In subtheme 2.1, the client is active within the therapeutic relationship, Kate exemplified this idea when she described the roles of the client and counselor, “I would be the one doing more of the talking and the counselor would be more of like facilitating it. I kind of like that I’m more leading the meeting than anything.” This evidence is contrary to an earlier study. Participants in Westra et al. (2010) went into the therapeutic relationship believing it was



going to primarily consist of the therapist doing most of the talking. The Westra et al. participants were from a variety of generations including Millennials, Generation X, and Baby Boomers, with most of the participants being from Generation X. These participants also expected that the therapist wasn't going to allow them to direct sessions and were pleasantly surprised when that wasn't what they experienced. In contrast, participants in the current study, expected to direct counseling sessions and be active in the therapeutic relationship. They didn't expect to be "restrained" like participants in Westra et al. (2010, p. 440). Comparing both studies highlights how expectations for the roles of clients and counselors may have changed with Generation Z. These changes in expectations for client and counselor roles could relate to characteristics that a study of Generation Z participants used to describe themselves: determined and thoughtful (Seemiller & Grace, 2016). Participants from the current study reported that they were determined to be active in the therapeutic relationship because they were resolved to improve their lives. Participants from the current study also reported a level of thoughtfulness for their expectations for the process of counseling, including their roles as the client and the role of the counselor. The results from both studies have shown how expectations from Generation Z are more informed of what the process of counseling is typically like in terms of the client being active and the counselor facilitating the therapeutic relationship. Earlier generations, particularly Baby Boomers and members of Generation X, may be more likely to expect the role of the client to be more passive in the therapeutic relationship, whereas Generation Z clients may enter into the therapeutic relationship expecting their role to be more active and collaborative with their counselor.

Client engagement in counseling and in therapeutic tasks outside of sessions was a key element in the current study. While not conducted with Generation Z participants, this finding supported the findings of Hill et al. (2012) in that both studies found that counselors were expected to facilitate a collaborative relationship by listening to the client, giving advice, and analyzing problems. Participants in the current study reported expectations around the counselor facilitating the therapeutic relationship by being supportive (Kate and Nadia), empathic (Selena), caring (Sam), and professional (Christina, Drew, and Kate). Additionally, participants confirmed results from Hill et al. (2012) on the role of the client being open, receptive, and working hard in counseling. Christina highlighted this idea when she said, “It’s ultimately me who has to process things and reflect and give myself time to think about things that we’ve talked about.” This quote from Christina showed how she was willing to be open by processing and reflecting on her presenting concerns, similar to her Millennial counterparts in the Hill et al. (2012) study.

Data from both studies confirmed expectations that Millennial and Generation Z college students can have for how they expect counselors to build rapport and facilitate the therapeutic relationship, which are components of process expectations for mental health counseling. This is further highlighted by the fact that participants in the Hill et al. (2012) study were not seeking counseling at the time they were interviewed, whereas participants in the current study had already scheduled an appointment for counseling services, yet they both had similar expectations for how they viewed the process of counseling. Given that participants from two generations, one from a clinical population and one from a general population, have expectations for the process of mental health counseling that echo each other, this could point to general expectations that clients can have for the process of counseling.

In subtheme 2.2, participants in the current study expressed their values around empathic facilitation within the therapeutic relationship. Swift and Callahan (2010) found similar data in their study on participants from several generations who sought counseling at a university psychology clinic. Participants in this study were asked their preferences between having a supportive therapeutic relationship versus an effective intervention (Swift & Callahan, 2010). Participants valued an empathic therapeutic relationship over having a highly effective intervention from the therapist who was not empathic and accepting (Swift & Callahan, 2010). As Sam said, he expected a counselor to be “helping the client, you know, feel comfortable around them . . . being understanding.” Even though Swift and Callahan (2010) did not focus specifically on process expectations in their study, their results, along with the results in the current study show that clients from multiple generations value building an empathic and caring therapeutic relationship with their counselor. While studies have shown that this expectation for an empathic and caring therapeutic relationship has grown since the turn of the century (Hill et al., 2012; Westra et al., 2010), Generation Z is one of the first generations to go into the therapeutic relationship expecting it to be collaborative. While Generation Z is not the only generation to expect a collaborative relationship with their counselor, the participants in the current study provided some of the ways in which collaborative relationships would ideally function through the client being active and the counselor facilitating the therapeutic relationship. One of the ways this can be seen is through the determination and thoughtfulness from the participants in the current study. Throughout interviews with participants, it was clear that they gave thoughtful and careful consideration to their role as the client and were determined to utilize the therapeutic relationship to help improve their lives and resolve their concerns.

While each generation likely has characteristics attributed to them that would be beneficial to the therapeutic relationship and the process of counseling, the characteristics found by Seemiller and Grace (2016) provide some additional insight and context for how Generation Z views themselves and how these views could impact their expectations for the process of counseling.

The results of the current study contribute insights into the literature on process expectations for a new generation of clients who expect to be active and have their counselor build a collaborative therapeutic relationship where they get personalized and objective feedback. Even though there is a lack of studies that directly relate to my results due to Generation Z college students being the newest generation in higher education, there were several parallels that could be drawn between the results of the current study and research on previous generations. Results from the current study as well as previous studies mentioned in this section highlight how expectations for the process of counseling between Generation Z and Millennials tend to be similar and how expectations have evolved from previous generations, such as Generation X and Baby Boomers. This study found that overall Generation Z showed a lot of the same expectations for the counseling process as Millennials, potentially highlighting the commonalities between generations. The results from the current study showed a slow change in expectations rather than an abrupt jump from previous generations. The next section will discuss the implications of the results of the current study for college mental health counselors, counseling supervision, as well as outreach within the college mental health counseling realm.

## **Implications**

This study aimed to understand the expectations Generation Z college students have for the process of mental health counseling. While results from this study confirmed much of what had already been found in earlier research on previous generations, it also added new information to the literature on process expectations. The current study highlighted some ways in which expectations have changed across generations, namely the more clearly identified expectation from Generation Z for a collaborative relationship between clients and counselors, as well as the expectation to receive feedback from the counselor that is impartial and objective. All implications in this study relate directly to this ability to serve Generation Z college students. The next section includes the implications for college mental health counselors, counselor supervision, as well as counselor outreach. Finally, implications for future research are also discussed.

### **Implications for College Mental Health Counselors**

As discussed in Chapter 1, expectations often accompany clients into counseling and shape their experiences (DeFife & Hilsenroth, 2011; Kirsch, 1990). Yet, counselors are unlikely to know what expectations Generation Z college students can have for mental health counseling due to the literature being sparse on expectations for this population. Across theme one and two, my findings included an observation that there is a real expectation for relationship building with most of the responsibility for the initial relationship building and maintenance resting on the shoulders of counselors. Therefore, to meet the expectations of Generation Z clients for the process of counseling, counselors must ask probing questions, personalize care to each client, and provide feedback that is impartial and objective during their facilitation of the therapeutic

relationship and the counseling process. Counselors meeting client expectations for the process of counseling is important because that can help positively shape clients' experience, while ensuring that clients get their needs met through the therapeutic relationship. Knowing expectations for the process of counseling helps to build rapport quickly and efficiently, which is critical for college counselors given that they are likely working with clients in a short-term model for services (CCMH, 2023).

In theme one, I found that expectations relied in part on counselors providing feedback and asking probing questions within a personalized context. Participants expected their counselor to provide personalized feedback by being intentional about getting to know them through asking probing questions in the initial sessions where the counselor and client get to know each other. During these first sessions, participants expected their counselor to understand not just their presenting concerns, but also who they are as individuals for feedback to seem genuine and feel meaningful. Counselors can get to know their Generation Z clients by being intentional about the questions they ask, such as “how do your concerns impact your day-to-day life, your relationships, your academics?” and “what kinds of things have you already tried that have been helpful in managing your concerns?” and “what gets in the way of managing your concerns?” and “what would no longer having this concern mean for your life?” These questions can help counselors be intentional about getting to know their Generation Z clients so that they can gather the information they need to provide feedback that feels personalized to their concerns. From the participants in the current study, it was clear that they expected counselors to personalize their care by recognizing their individuality to feel known to them and build a meaningful therapeutic relationship to help with their concerns. In addition to asking probing questions to get to know

clients, counselors can also ask questions about how clients are impacted by the social, political, and economic events that have shaped their generation to show competency for understanding their generational context.

Generation Z college students who seek counseling services at their college counseling center may expect their counselor to be intentional about getting to know them to provide feedback and techniques that feel personal to them, as discussed in subtheme 1.2. This means that college mental health counselors and counselors who work with Generation Z college students will need to provide feedback that sounds more personalized to connect with these clients. These can include phrases such as, “Tell me how you experience stress?” or “When you experience . . . , it can be helpful to . . .” Therefore, the results from the current study can help counselors who work with Generation Z clients find ways to clearly communicate that they know who they are and how they can provide specific insight to alleviate their concerns.

From the results of the current study, subtheme 1.3, participants expected that once counselors gathered their information, they would provide impartial and objective feedback. Some participants expressed expectations for counselors to use their professional training and knowledge of Generation Z to provide feedback that is impartial and objective, while also feeling personalized to them. Based off the results of the current study, Generation Z clients may like their feedback to be delivered using these kinds of phrases: “based off of what we have discussed, this is what I am recommending to help manage your concerns,” and “given what you have said regarding your concerns and the impact they have on your life, I think these interventions would be the most optimal for you.” These phrases may be similar to what counselors already say to deliver feedback to their clients. However, what the results from the

current study have shown is that it is important for counselors to be intentional about the language they use to communicate their feedback in ways that feel personalized while also being impartial and objective.

In addition to feedback and techniques participants also expected feedback is personalized to the individual and that counselors will provide feedback that is impartial and objective, as discussed in subtheme 1.3. Feedback from counselors can be impartial and objective because the counselor can look at what the client is saying from a non-judgmental stance through multiple angles because of the training they receive. Counselors can maintain objectivity and give personalized feedback through not being directly involved in the client's life. This objectivity can help clients understand patterns in their relationships (Sullivan et al., 2005). Counselors maintain objectivity by listening and not over identifying with the client or giving their personal opinions. Counselors also maintain objectivity by documenting what was done in each session in order have an ongoing record of the therapeutic work. In addition, counselors maintain objectivity by engaging in supervision and consultations with their supervisors and colleagues (Fischer & Mendez, 2019). Previous research has shown that the counseling relationship is inherently a one-way relationship where clients talk to counselors about their lives, but the counselor does not reciprocate (Smith & Fitzpatrick, 1995). This helps counselors to stay objective because they often only get information from their client and not from other sources that might cloud their judgement. This also helps the counselor not to impose their own values on the client, which is an important ethical mandate in the counseling profession (American Counseling Association [ACA], 2014, Standard A.4.b).



In theme two, the collaborative nature of process expectations emerged. The results of this study can give college mental health counselors ideas for how Generation Z clients conceptualize their role as the client and the role of the counselor within the therapeutic relationship. In subtheme 2.1 the expectation for clients being active within a collaborative relationship was discussed by each participant. In session, participants expected to be active by being honest about their experiences and concerns, as well as doing the majority of the talking in session. One of the ways participants expected to be active between sessions is through being open to what the counselor suggests and working on their goals between sessions. This could mean that counselors are expected to provide tasks for them to complete between sessions, such as utilizing the coping skills that were discussed. Since most participants were focused on having goals for their time in counseling, this could mean that counselors may be expected to provide tasks that are personalized specifically to what Generation Z clients want to get out of counseling, such as engaging in meditative practices to reduce their stress between sessions.

In subtheme 2.2 the importance of counselor facilitation as an expectation was highlighted. Participants expected that counselors would facilitate a discussion to identify a path for change, provide tasks for clients to complete between sessions, provide conversational direction through keeping the client on track, reviewing what was discussed in previous sessions, and suggesting topics to discuss for follow up sessions. While participants wanted to be active in their own ways during counseling, they also didn't want to have a counselor who would be passive in the therapeutic relationship. From the results of the current study, Generation Z clients may expect their counselors to be more directive. Counselors can be more directive by identifying a path for change by creating a plan for treatment. Counselors can also provide

interventions clients can perform inside and outside of session, such as mindfulness activities, connecting their thoughts and feelings to their behaviors, and providing encouragement. In sessions, counselors can be mindful of keeping the client on the primary topic and the conversation focused on the client's goals or what they need to discuss that session. At the beginning of sessions counselors can review what was discussed in the previous session to structure their work in the current session. Then towards the end of the session, counselors can provide follow up topics to discuss at the next session. While the results from the current study are focused on the therapeutic relationship, there are also implications that can apply to the supervisory relationship between a supervisor and supervisee.

### **Implications for Supervision**

Supervisors who have supervisees working in college counseling centers or have Generation Z college students as clients can utilize the information from the current study to explain expectations this population may have when they seek mental health counseling services. Using the Discrimination Model (Bernard & Goodyear, 2019), supervisors can enter the teacher role by utilizing the results of the current study to teach supervisees that Generation Z clients will expect their counselor to build a therapeutic relationship by personalizing client care through asking probing questions and providing personalized feedback that is impartial and objective. Supervisors can provide examples of specific questions for supervisees to ask, as well as language to make their feedback sound and feel personal. Supervisors can teach supervisees how to have conversations with clients on their role as a professional who is impartial and objective and provides this type of feedback in the therapeutic relationship.

Supervisors can also teach supervisees about generational differences and how generational worldviews, such as the worldviews of Generation Z, could impact views on counseling. In this study, participants discussed how important it was for counselors to understand their generational context in order to connect. Therefore, supervisors supporting the act of learning about generational worldviews will help to increase awareness by providing context for how major social, political, and economic events have impacted Generation Z to better support their supervisees and the work they do with their clients. Even though participants of the current study were within the age range of Generation Z (born between 1995 and 2010), they did not all identify as being a part of Generation Z. Both Kate and Selena identified as a Zennial and Millennial, respectively. For Kate, she felt she aligned more with the Zennials (the microgeneration between Millennials and Generation Z) because she did not grow up with a lot of technology and spent most of her time playing outside as a kid. She also felt that she was in the life stage of being in graduate school and looking toward the future of getting married and having children, which was different from being in college and not focused on those milestones in the future. Selena related her generational identity to how she compared herself to her sister who was a few years younger than her. Selena compared herself to her sister as being a part of Generation Z because of the way her sister interacted with social media at a much higher rate than her. Selena also identified as a Millennial because she had memories of the September 11th terrorist attacks and her sister, who was a younger member of Generation Z did not. While the years of Kate and Selena's birth would identify them as Generation Z that doesn't mean that they identify with that generation. This means that it is important for supervisors to teach their supervisees to ask clients about their generational identity and to not make assumptions on how

they identify, as well as how certain social, political, and economic events may have impacted them.

Each participant highlighted how they were impacted by social, political, and economic events of their generation. Christina spoke to the general outrage about the lack of humanism in the United States regarding racial injustice. Sam commented that Generation Z is more supportive of social justice movements overall. Drew described technology as a “shared experience and shared culture” for everyone in Generation Z no matter where one lives. Kate highlighted an emphasis on Generation Z being more focused on education, particularly women obtaining advanced degrees. Nadia felt that social media gave Generation Z the ability to learn more about the LGBTQIA+ community. Selena felt that Generation Z had more exposure to the world around them overall because of social media. These comments show how the extra effort put into orienting supervisees towards the generational context of Generation Z will help supervisees to become more culturally competent and skilled in their counseling practice (Hicks et al., 2018). Having these conversations in supervision could help supervisors prepare their supervisees for how ones’ generational identity can impact the therapeutic relationship, particularly if the supervisee is not a member of Generation Z.

Clients from Generation Z could bring concerns to counseling that relate to their generation as highlighted by participants above, such as feeling anger and outrage for the racial injustice that continues to go on in the United States, cultural influences that impact their identity, stress related to obtaining a degree in higher education, and wanting to explore their gender and sexuality. Given the level of awareness Generation Z has about their world around them, they are more likely to feel distressed about various social, political, and economic factors

that directly and indirectly impact their lives. Supervisors can help prepare supervisees to have conversations using language that is impartial and objective with their Generation Z clients about these factors, especially if supervisees have generational views that may be different from their clients. This can be particularly important when Generation Z clients expect their counselor will provide impartial and objective feedback on their concerns (subtheme 1.3).

The results of this study highlight what expectations participants from Generation Z have regarding the process of counseling and building a relationship with their counselor, which could provide some parallels for the supervisor-supervisee relationship with Generation Z supervisees. The birth year for Generation Z starts in 1995 (Seemiller & Grace, 2016), which would make its oldest members around age 28 at the time of the current study and therefore of age to be in graduate school or a new professional in the field of counseling. While the participants in the current study were all pursuing degrees not related to counseling, it would be reasonable to assume that similar characteristics could be found in Generation Z counseling supervisees. From the results of this study, it could be reasonable to think that Generation Z supervisees would expect their supervisor to ask them probing questions when discussing cases and provide feedback that is personalized to them (subthemes 1.1 and 1.2). Generation Z supervisees may also expect to have a more collaborative relationship with their supervisor, one where they can discuss cases in more of a consultant role (subtheme 2.1). However, when a supervisor does need to be directive with a Generation Z supervisee, that supervisee may expect the supervisor to explain why they are directing a supervisee towards a specific action plan. Supervisors who have supervisees from Generation Z may need to be prepared to explain the reasoning behind their directives before the supervisee enacts them. Supervisees from Generation Z may be less likely

to just follow what a supervisor says and will need to know the reason behind their directives, which personalizes this feedback (subtheme 1.2). Just as the results from this study have implications for supervision and the supervisory relationship, they can also be related to how counselors provide outreach services to various populations across campus.

### **Implications for Outreach**

Outreach is an integral part of working in college counseling centers (Glass, 2020; Marks & McLaughlin, 2005). Stone and Archer (1990) defined outreach as “any organized program, workshop, media effort, class, or systemic attempt to provide psychological education” (p. 557). A significant amount of outreach requested from college counseling centers are presentations related to how students can be connected to counseling services on campus. The results from the current study can be used to provide information on expectations that Generation Z college students can have for the process of counseling, as well as what they can expect from college counseling centers. College counselors presenting to students can highlight how counseling can complement their expectations for these services, such as how they build a relationship through asking probing questions and personalizing feedback that is impartial and objective. Counselors can also discuss how they may meet student’s expectations by fostering collaborative roles for the client and counselor in the therapeutic relationship, such as the client playing an active role and the counselor facilitating the therapeutic work. When counselors can provide information about how they can meet Generation Z clients’ expectations for the process of counseling, this could result in students feeling more comfortable in seeking the support they need because the process of counseling feels less foreign to them, especially when they haven’t sought counseling services before. In addition to in person outreach presentations, counselors can also utilize

technology and social media to provide outreach to students, faculty, and staff by creating videos to inform and educate about counseling services, as well as have a social media presence to educate on various mental health topics and counseling services.

College counseling centers provide outreach through giving information, as well as support to students who feel distressed about national and world events. Counselors can facilitate outreach about injustice and social advocacy by providing a safe, confidential, drop-in space for students to process their thoughts and feelings about a significant national or world event that is having a negative impact. College counseling centers can also provide regular space to support BIPOC (Black, Indigenous, and people of color) students in the challenges they can face during their education.

Through outreach, college mental health counselors can educate faculty and staff in the ways they can support students to seek counseling services to help improve their collegiate experience and continue pursuing their degree of study. This gives college mental health counselors the opportunity to provide education on process expectations to groups on campus who are more likely to have interactions with distressed students and therefore refer to campus counseling services more frequently. A better understanding of Generation Z's expectations of the counseling process can give more effective language for faculty and staff to support students in pursuing a referral for counseling services. For example, they can highlight how counseling could meet their expectations or pleasantly surprise them in how counselors provide personalized feedback that is impartial and objective for their concerns. Faculty and staff can also educate students on how the counselor and client can play collaborative roles in counseling, which may make them more likely to pursue it. Providing information from the results of the current study

can help faculty and staff feel more comfortable educating students on the process of counseling when they make referrals to students, particularly if the student is reluctant to seek the support they need. Since a goal of counselor outreach is to help faculty and staff assist distressed students in accessing services, having a clear understanding of the process of counseling may help them feel more empowered to provide information on what counseling entails so that students can feel more comfortable seeking the support they need to be well and pursue their education.

Even though faculty and staff don't have a therapeutic relationship with students, they still provide support, whether the student is taking their class, is working in their lab, or is a student worker in their department. From the results of the current study, college mental health counselors can also teach faculty and staff how to structure their language so that their academic feedback can feel personal, as well as impartial and objective to their students. In a meta-analysis of studies on providing feedback to students Paterson et al. (2020) found that students wanted personalized feedback on their work to help them grow and learn, including both positive and constructive feedback. Even for positive feedback, students reported that they wanted to know why they did well on something and were not satisfied if a professor just wrote single words like "good" or "excellent" (Paterson et al., 2020, p. 10). Overall, students reported that they wanted a balance of feedback that would help them think more critically, but not spoon feed them so that they could also be active in the learning process (Paterson et al., 2020). What Paterson et al. and the current study suggest is that Generation Z students and clients want and expect feedback that is personalized to the individual (subtheme 1.2), as well as a relationship with their professor or counselor where they can be active in the learning or therapeutic process.



In outreach presentations to faculty and staff, college mental health counselors can model what being collaborative within their relationships with students can look like, such as being intentional about getting to know their student and letting the student be active in their conversation, while also facilitating the structure of their time together. Outreach presentations provide opportunities for college mental health counselors to educate the campus community on important topics within their field, including expectations for the process of counseling. The implications for future research based off the current study results are presented below.

### **Implications for Research**

This study adds a new perspective to the existing literature surrounding process expectations for the Generation Z college student population. However, there are ways that future research could build upon the current study. Within the college mental health realm, an option for assessing client's expectations at the start of services could be through a validated measure that clients take before their first counseling appointment, such as the Treatment Expectations Questionnaire (Mora-Shedden et al., 2023). This assessment tool would provide a scale of measurement that allows for a larger sample size to validate or modify my findings. As recommended in Henshaw et al. (2020), after clients complete the scale, counselors could be trained to have a structured conversation with clients about their results on the scale. Then at the end of services clients could be given a questionnaire to assess how identifying their expectations and having a conversation about their expectations influenced their experience in counseling services. This could provide more nuances regarding the expectations for the Generation Z population. For example, the level of importance of objectivity from the counselor or how useful the feedback clients obtained from their counselor is to resolving their concerns for counseling.

Future research could explore Generation Z college student's expectations for the process of counseling before the start of counseling services and after they experience services to see if participants' experience changes their expectations. This could be done through surveys or interviews at the start of services and as clients finish services to capture how expectations changed or stayed the same. Identifying how expectations may have changed after experiencing counseling services could highlight ways in which these services need to be modified to meet client expectations. Future research that identifies expectations for the process of mental health counseling for Generation Z college students could further validate or modify the results from the current study.

Given the identified importance of establishing a concrete and supportive, but professional relationship with clients, another aspect of the results from the current study that merits further exploration are studies that identify probing questions counselors ask to get to know clients at the initial stage and throughout the counseling relationship. This study could be conducted through surveys that would provide examples of various questions and participants could pick which questions they expect to be asked during their time in counseling so that they don't have to think of questions on their own. Having a set of questions participants pick from could be helpful, especially if participants have not had previous counseling services. Identifying a set of questions that Generation Z clients could expect from counselors could help counselors build rapport and a collaborative relationship as they get to know their clients from this population.

Another way that counselors are professional is through the impartial and objective feedback they give to clients. Future studies could assess this aspect of the therapeutic

relationship and how it relates to counselor effectiveness. This could be done through clients taking a survey or being interviewed after counseling services to identify how impartial and objective feedback impacted the effectiveness of counseling services and the therapeutic relationship. An inherent limitation to this type of study is that there is a difference between perceived effectiveness and actual effectiveness for clients, which would have to be mitigated by future researchers. However, knowing this information could help counselors be more intentional in providing this type of feedback to increase the effectiveness of their services.

This study focuses on college students, which is a specific subset of the Generation Z population. Future research could study if Generation Z clients who are not in college and seek counseling services have similar or dissimilar expectations for the process of counseling and the therapeutic relationship. Studying this subset of Generation Z is important due to this generation having a different kind of access to mental health services through agencies and private practice that tend to offer more long-term counseling or different forms of treatment. For Generation Z college students, counseling services are included in their tuition fees and they may have only a few counseling center(s) where they can access services instead of having to search through multiple providers. Logistics of access, along with cost are factors that may change expectations for services for those outside of colleges and universities. Future research could identify and evaluate the possible differences and similarities between these two populations within Generation Z who have different accessibility to counseling services.

It is challenging to differentiate between generational worldviews and contemporary stages of participants' development. As discussed in chapter one, Arnett's theory of emerging adulthood provided context for the concerns this population could have regarding their identities

and relationships, which could impact their expectations for the process of counseling. In turn, Seemiller and Grace (2016) identified characteristics that Generation Z used to describe themselves, such as loyal, open-minded, responsible, determined, compassionate, and thoughtful (p. 8), which could also impact their expectations for the process of counseling. Future research into this topic could explore this challenge more deeply through studies that assess generational worldview and developmental stage. In addition, a study that examines participants from different ages and generations who have not received counseling services to identify their expectations and how their generation worldviews could have impacted those expectations may highlight potential differences in expectations throughout the developmental lifespan, as well as generational worldviews.

In summary, the results of this study have implications for within the therapeutic relationship and beyond. Within the therapeutic relationship, results of this study have important implications for how counselors who work with Generation Z can build rapport by asking probing questions, providing personalized feedback that is impartial and objective, as well as providing space for the client to be active while the counselor facilitates the therapeutic relationship. In the supervisory relationship, supervisors can utilize the results from this study to coach supervisees in the ways they establish counseling relationships and expectations for Generation Z college students. Supervisors can also use the information from the current study to teach how one's generation can impact a client's worldview. Within the supervisory relationship, supervisors can utilize the results from the current study to build a relationship with their Generation Z supervisees. Implications for outreach can highlight how results from the current study can be utilized to encourage students to seek counseling services, as well as help empower

faculty and staff to refer distressed students to counseling services. Implications for outreach also provided tools for college counselors to educate faculty and staff on how they can work with their students through providing personalized feedback that is objective and impartial, while creating a collaborative relationship. Additional implications for future research can identify expectations for a larger population of Generation Z college students. Future research could also explore how expectations may change for students before and after counseling services. The implications from the current study brought forth the need for future research to identify the ways in which expectations for the process of counseling may differ for Generation Z clients who are not enrolled in higher education institutions. Finally, implications from the results of the current study highlighted a challenge in researching this population through the differentiation between their generational worldview and their stage of development, which is also a limitation of the current study.

### **Limitations of the Study**

Limitations of a study are defined as circumstances which are not necessarily within the researcher's control (Theofanidis & Fountouki, 2018). In research it is expected that there will be limitations and elements outside of the researcher's control. The biggest limitation to this study was that data collection was conducted at the start of the Covid-19 pandemic on June 1, 2020. It is impossible to know if this major event influenced participants' expectations for the process of counseling. From a logistical standpoint, the number of students who sought counseling services at that time was significantly reduced at the center where data was collected and in college counseling centers across the country (Gorman et al., 2020, 2021). This means that I had access to fewer students who could participate in this study. The Covid-19 pandemic impacted

procedures and access to services in the center where data was collected by giving students the opportunity to have their first counseling appointment within one week, sometimes a few days, from when they called to schedule services. The purpose of these changes was to give students faster access to services and support in a time that was chaotic due to the pandemic. This meant that one participant, Nadia, had her Rapid Access and Consultation (RAC) appointment by the time she was interviewed. This was brought to my attention during the interview.

When students were initially told about the current study administrative staff started their script by saying that the study was being conducted by one of the counselors who works in the center. Therefore, participants knew that I was also a counselor in addition to conducting research. This may have influenced their responses to interview questions by speaking more favorably about their expectations for counseling, particularly the roles of the client and counselor because of my role as a counselor, as well as a researcher. Participants may have felt that they should have positive expectations about the process of counseling and the therapeutic relationship because even though I was not going to be their counselor, I did serve in that role in the counseling center where data was collected. Another reason why participants may have reported more favorable expectations for the process of counseling was that they all voluntarily sought out counseling services. This may be a general limitation in research on expectations when conducted on a population who seeks counseling because most people who seek services are doing so voluntarily and therefore are more likely to expect the process of counseling to be more positive.

Another general limitation in researching participants within a college population is that it can be difficult to ascertain what aspects are a result of their generational worldview and which

are influenced by their age and stage of development. This was a difficulty in analyzing interviews from Generation Z participants because it raised questions about the difference between age and developmental stage. Therefore, it may be difficult to fully differentiate between generational worldview and developmental stage as it relates to the results of this study. While this is a gap identified during analysis, it also guided several suggestions for potential future research.

### **My Experience of This Research**

My experience writing this dissertation has been a long road, filled with bends and turns, plot twists, and pivots. During this process I have felt so many different emotions, from excited and motivated to defeated and demoralized. This process, which has lasted a little over a decade, has tested my perseverance over and over again. In 2013 when I finished my comprehensive exams, I started the process of writing a dissertation on a topic within career counseling. At that time, I was doing my doctoral internship in a college counseling center and knew I wanted to continue in that setting and work my way up to be a director of a college counseling center. I switched directions on my topic when I got a fortuitous piece of advice from a former supervisor that my dissertation should reflect the career I want, which was not to be a director of a college career center, but of a college counseling center. This was my first major pivot in this process when I switched topics and advisors to work on a quantitative dissertation on college students' beliefs about mental health counseling services and how that predicted their willingness to seek counseling services. A few years into this process I found that the study I had developed was not going to work and I no longer wanted to do a quantitative study. This turned into my second major pivot in the process when I changed topics and advisors again to start working on the topic

of process expectations for Generation Z college students. I chose this area of research because I wanted to find a topic that hadn't been explored and contribute something meaningful to the field of college counseling.

In the midst of all these changes in my dissertation, I also worked on obtaining my independent licensure as a mental health counselor and started a career in the college counseling field. This was difficult and I often felt torn between where I should focus and spend my time since getting my independent licensure meant increased job prospects and furthering my career. Juggling both meant that it took me six years to obtain my independent LPCC license. Getting my independent license was one of the major factors that helped me land a full-time job working in a college counseling center as a clinician.

In addition to changes in my dissertation and working towards my independent licensure, I also had a full life that included job changes, moving to different parts of Ohio, romantic relationships, break ups, my mother having major heart surgery twice, both of my cats having serious medical issues, exploring my religious beliefs and making fundamental changes in my life, buying a house, fixing said house, selling that house two years later because I met the man of my dreams, we got married, and built our own house. There have been many changes in my life over the past decade, particularly within the past three years since meeting my husband and building our life together. Through all these changes, I have done my best to keep up with working full-time, having a meaningful life, and making progress on my dissertation, even if my dissertation could not always be on the forefront of my mind due to other responsibilities.

As mentioned earlier in this dissertation the Covid-19 pandemic also impacted my study by changing the participant recruitment procedures and delaying the start of my data collection. I



once again had to pivot and draw on my perseverance to navigate these challenges, along with maintaining my full-time job where I was also having to transition services to online formats. I drew on my perseverance by leaning on the support of my colleagues, friends, and family. Through this support, I managed my anxieties related to the pandemic and how it impacted my life, all while supporting students who were losing internships, having to move home, and having to forego a graduation ceremony after working hard to earn their degrees. I managed my anxieties related to the pandemic by once again leaning on my support system, as well as engaging in a lot of self-care with exercising, journaling, going to counseling, and being creative in the kitchen.

While it was stressful managing the current study and having to modify participant recruitment procedures during the initial stages of the pandemic, I did learn some valuable lessons that I could use for future research and projects. Having potential participants go through the screening questionnaire online and schedule their interview day and time did streamline the process. Plus, I didn't always have to be available to take down that information and potential participants could do it on their own time. I could also track the number of potential participants easier using Qualtrics compared to if I had to use paper forms to manage the data. Therefore, I think that this was a more efficient way of recruiting participants and managing their data.

Another unexpected event that changed my dissertation process was the sudden death of my advisor, Dr. Jason McGlothlin, in May of 2023. Dr. McGlothlin's untimely passing came as such a shock as I was working on editing the final chapter of my dissertation. When I learned of his death, I remember feeling a mix of emotions, such as grief, loss, and worry about what was going to happen next in my dissertation process. I had known Dr. McGlothlin throughout my

entire time at Kent State University as a student in several of his classes. He had even encouraged me to apply to the doctoral program. I still miss his cheery disposition and the way he would give me feedback in such a kind and succinct way. While his untimely passing created worry about the future of my dissertation, it also gave me the perseverance to finish.

Managing stress whether it was from study logistics or my own anxiety was challenging at various points in the dissertation process. To cope with these stressors, I asked for help and reached out for moral support when I needed it, whether it was scheduling a meeting with my advisors, strategizing with friends who have written a dissertation, or simply talking with friends, my husband, and therapists about my anxiety. I also received integral support from my colleagues at the counseling center where data was collected. Without a doubt, I could not have gotten through this process without the support of so many people who were able to listen and guide me into directions that were helpful in completing this dissertation. Having so many people rooting for me, particularly in the end stages of writing and editing this dissertation, made all the difference in helping me make it over the finish line.

Despite all these challenges, I am proud that I was able to conduct research on clients who sought counseling services and therefore contribute findings on expectations for the process of counseling on a clinical population. I also enjoyed learning about different generations and how Generation Z expectations impact client's experiences in counseling services. This knowledge has helped to inform my own practice in clinical work and has changed how I have built relationships with my clients, which is the aim of the Interpretive Description methodology, for research to inform clinical practice.

## **Conclusion**

In summary, the research presented in this dissertation sought to answer the question of how Generation Z college students perceive process expectations when seeking mental health counseling. The key takeaway overall was the importance of the counseling relationship to meeting Generation Z expectations of the counseling process overall. The first theme developed suggested that Generation Z college students expected their counselor to build a relationship to provide unique feedback by (a) asking probing questions, (b) personalizing care to the individual, and (c) providing feedback that is impartial and objective. The results of this study also highlighted a new finding that deserves further exploration regarding Generation Z clients expecting their counseling to provide feedback that is impartial and objective. The second theme developed suggested that Generation Z college students expected that the client and counselor will play collaborative roles in the therapeutic relationship by the client being active in the therapeutic relationship and the counselor facilitating the therapeutic relationship.

The study produced implications relevant to college mental health counselors, supervisors, and counselor outreach efforts. This study highlighted how college mental health and mental health counselors can build rapport and tailor the counseling experience to Generation Z clients. Supervisors can train their supervisees on what kind of expectations Generation Z college students can have for the process of counseling, as well as how to conceptualize generational worldviews and how those worldviews could impact expectations for the process of counseling. Results from the current study can also provide insight for supervisors on how to build a relationship with their supervisees from Generation Z. This research showed a need for outreach in the campus community to inform clients and potential clients for what they

can expect for counseling services, as well as educate faculty and staff on how to refer students to counseling services. The research on Generation Z and their expectations for the process of counseling is still in the beginning stages, therefore, more research is needed to reach conclusions on what expectations this population has and how to provide services that are meaningful and helpful. Based on the results of this study, what is known is that Generation Z college students can expect that their counselor will build a therapeutic relationship through asking probing questions, personalizing care to the individual, and providing feedback that is impartial and objective. Generation Z college students can also expect that the client and counselor will play collaborative roles in the therapeutic relationship by the client being active and the counselor facilitating the therapeutic relationship. As research on process expectations continues to emerge, the results of this study add to the literature with details on a specific population who seek counseling services at a pivotal time in their development. Through developing a better understanding of client process expectations, counselor will be able to better serve their clients.

## **APPENDICES**

## **APPENDIX A**

### **RESEARCH SITE APPROVAL LETTER**

## Appendix A

### Research Site Approval Letter



**Counseling & Psychological Services**  
225 Calhoun St Suite 200  
Cincinnati, Ohio 45219  
Phone (513) 556-0648  
Fax (513) 556-2302

January 3, 2020

Dear Julie Lineburgh:

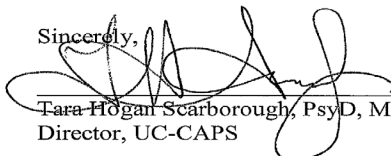
I am writing this letter at your request to express my commitment as Director of Counseling and Psychological Services to support your research and collection of data for your dissertation titled "How Generation Z College Students Perceive Process Expectations When Seeking Mental Health Counseling" towards the completion of your doctorate in Counselor Education and Supervision at Kent State University. Your dissertation topic is relevant and important to the work we do at CAPS, and we want to support you in your contribution to the field.

You and I have already discussed the following considerations:

1. We must mitigate negative impact to CAPS operations. The collection of data cannot delay or impact access to treatment to any client.
2. To minimize the effects of the clients we serve and the operation of the center, I am asking that the data be collected between the time periods that are less utilized. These are: May 1 – September 30, and December 15 through January 30. I realize that the ability to saturate your data points is an unknown until you start data collection, but these guidelines are important to consider.
3. Clinical data from CAPS electronic medical record will not be utilized or shared in any form as part of the study. Only information collected from the screening questionnaire, the interview, and client review of the qualitative themes will be used, and this is separate from clinical records.
4. The time that you are meeting with participants will be considered professional development time up to approximately 48 hours over a two year period, since we believe this is within the scope of your work in college mental health.

I hope this information is helpful to your dissertation committee. I want to be clear in my support, and also delineate guidelines for making it possible. Please let me know if you have any questions.

Sincerely,

  
Tara Hogan Scarborough, PsyD, MHSA  
Director, UC-CAPS

## **APPENDIX B**

### **KENT STATE UNIVERSITY IRB EMAIL**



## Appendix B

### Kent State University IRB Email

----- Forwarded message -----

From: **Research Compliance** <researchcompliance@kent.edu>

Date: Tue, Mar 17, 2020 at 1:24 PM

Subject: RE: IRB Application for Dissertation Study (20-141)

To: Julie Lineburgh <jlinebur@kent.edu>

Cc: RAINEY, JOHN <jrainey@kent.edu>, MCGLOTHLIN, JASON <jmcgloth@kent.edu>

Julie Lineburgh,

Thank you for submitting your application entitled “How Generation Z College Students Perceive Process Expectations When Seeking Mental Health Counseling” for IRB review. During the review we determined that project oversight is deferred to the University of Cincinnati because:

- You are designated as the UC PI.
- The research is being conducted under the review and oversight of the UC IRB.
- Do not involve intervention or interaction with any KSU students or employees.
- It has been clarified that even though the UC approval errantly lists a KSU consent form. A KSU consent form is not to be used, if it is part of the official study record at UC, you must remove it.

Please note that this determination only applies to the procedures or project as defined in the UC approval, and not to future projects or activities that are not included in this particular application. Alterations made to project procedures and activities may require IRB review. It is the responsibility of the Principal Investigator to obtain IRB approval prior to implementation of research. Should you have questions about whether IRB review is needed please feel free to an IRB reviewer or the Office of Research Compliance.

Thank you.

Respectfully,

**John McDaniel** | IRB Chair | 330.672.0802 | [jmcdani5@kent.edu](mailto:jmcdani5@kent.edu)

**Tricia Sloan** | Coordinator | 330.672.2181 | [psloan1@kent.edu](mailto:psloan1@kent.edu)

**Kevin McCreary** | Director | 330.672.8058 | [kmccreal@kent.edu](mailto:kmccreal@kent.edu)

## **APPENDIX C**

### **UNIVERSITY OF CINCINNATI IRB APPROVAL LETTER**

## Appendix C

### University of Cincinnati IRB Approval Letter



#### EXEMPT DETERMINATION

March 4, 2020

Julie Lineburgh  
[SA Counseling & Psychological Services](#)

Dear Julie Lineburgh,

Type of Submission:	Initial Study
Title:	How Generation Z College Students Perceive Process Expectations When Seeking Mental Health Counseling
Investigator:	Julie Lineburgh
IRB ID:	2019-1400
Funding:	None
Documents Reviewed:	<ul style="list-style-type: none"> <li>• Lineburgh UC IRB Protocol, Category: IRB Protocol;</li> <li>• Lineburgh UC Consent Form, Category: Consent Form;</li> <li>• Lineburgh KSU Consent Form, Category: Consent Form;</li> <li>• CITI Completion Report 2018.pdf, Category: Other;</li> <li>• CITI Certificate, Category: Other;</li> <li>• Lineburgh Resume, Category: Other;</li> <li>• KSU Informed Consent, Category: Consent Form;</li> <li>• UC Consent Form, Category: Consent Form;</li> <li>• UC Consent Form, Category: Consent Form;</li> <li>• KSU Consent Form, Category: Consent Form;</li> </ul>
Type of Review:	Exempt
Review Category:	• (2)(ii) Tests, surveys, interviews, or observation (low risk)

On **3/4/2020**, the IRB reviewed the above submission and determined that this protocol meets the criteria for exemption from IRB review in accordance with 45 CFR 46.104.

**The IRB has determined the following consent requirements:**

- The IRB has determined that informed consent must be obtained from all adult participants and that this consent must be documented by signature on the IRB approval consent form.

**PI Notification**

Ongoing IRB review and approval by this organization is not required. This determination applies only to the activities described in the IRB submission and does not apply should any changes be

## **APPENDIX D**

### **ADMINISTRATIVE STAFF PARTICIPANT RECRUITMENT SCRIPT**

## **Appendix D**

### **Administrative Staff Participant Recruitment Script**

Now that we have your intake scheduled, I want to let you know about a study that is being conducted by one of our clinicians. The study is about what students think the process of counseling will be like and will explore your thoughts on your client and counselor roles, as well as the counseling relationship. If you meet criteria for the study and decide to participate you will be given a \$10 Amazon gift card as a thank you. Are you interested in learning more about this study?

If interested in learning more about the study: Great, I will give the clinician who is conducting the study your email address and she will contact you.

If not interested in learning more about the study: No problem, thank you for your consideration.

## **APPENDIX E**

### **RECRUITMENT AND SCREENING QUESTIONNAIRE EMAIL**

## **Appendix E**

### **Recruitment and Screening Questionnaire Email**

Thank you for your interest in learning more about my study. This qualitative study is on what you think the process of counseling will be like and will explore your thoughts on your role as the client, the role of the counselor, as well as the therapeutic relationship. This study is being conducted by clinical counselor Julie Lineburgh, LPCC-S for her dissertation to complete her doctoral studies. Participation is completely voluntary and will not impact your services at CAPS in any way.

To gather this information, a structured interview will be conducted via Zoom through TAO. This interview will take about 90 minutes to complete, as well as time to review your results for approximately 30 minutes. If you meet criteria for the study and decide to participate you will be emailed a \$10 Amazon gift card as a thank you for participating in the study.

If you are interested in participating in this study, please click the link below to answer the screening questionnaire. In order to participate in this study, you need to meet specific criteria, such as not having any previous counseling services and being a part of Generation Z (born between 1995 and 2002). If you have questions about the study before you fill out the screening questionnaire, please call or text Julie Lineburgh at (513) 549-7822 (Google voice number). If you contact Julie Lineburgh after 5 pm Monday-Friday or on Saturday and Sunday she will likely return your text/call the next business day. This number is also not to be used for emergency services. If you are in crisis and need to speak with a counselor after hours, please dial our main number, (513) 556-0648 and press 1. Thank you!

**APPENDIX F**  
**SCREENING QUESTIONNAIRE**



## **Appendix F**

### **Screening Questionnaire**

Thank you for your willingness to participate in this study.

To be able to participate in the study, you need to meet specific criteria. In order to see if you meet the criteria I am going to ask you a series of questions.

1. Are you at least 18 years of age?
2. Were you born between the years of 1995 and 2002?
3. Is this your first time seeking mental health counseling services?
4. Are you seeking counseling services voluntarily?
5. Are you able and willing to participate in an interview with me for a minimum of 90 minutes to discuss your expectations for the process of mental health counseling?
6. To participate in this study you will be interviewed for about 90 minutes. After your interview, you will be asked to review a document that consists of codes and categories from an initial analysis of your interview data, which could take up to 30 minutes. The purpose of your review of the provisional report of interview codes and categories is to provide the opportunity for you to give feedback and confirm that the information reflects your experience. Are you willing to participate? If you decide to participate you will be given a \$10 Amazon gift card as a thank you for participating in the study.

## **APPENDIX G**

### **INFORMED CONSENT TO PARTICIPATE IN A RESEARCH STUDY**

## Appendix G

### Informed Consent to Participate in a Research Study



#### UNIVERSITY OF CINCINNATI SOCIAL, BEHAVIORAL, AND EDUCATIONAL CONSENT TO PARTICIPATE IN A RESEARCH STUDY

<b>STUDY TITLE: How Generation Z College Students Perceive Process Expectations When Seeking Mental Health Counseling</b>	
<b>PRINCIPAL INVESTIGATOR NAME:</b>  Julie Lineburgh	<b>PHONE NUMBER (24-hour Emergency Contact)</b>  (513) 556-0648
<b>FACULTY ADVISOR (if PI is student):</b>  N/A	<b>DEPARTMENT:</b> Counseling and Psychological Services

#### **INTRODUCTION**

You are being asked to take part in a research study. Please read this paper carefully and ask questions about anything that you do not understand.

#### **WHO IS DOING THIS RESEARCH STUDY?**

The person in charge of this research study is Julie Lineburgh, LPCC-S of the University of Cincinnati (UC) Department of Counseling and Psychological Services. There are other people at Counseling and Psychological Services who are helping me recruit potential participants during the study.

#### **WHAT IS THE PURPOSE OF THIS RESEARCH STUDY?**

The purpose of this research study is to explore and identify the expectations Generation Z has for the process of counseling, which includes the role of the client and counselor, the therapeutic relationship, and duration of counseling services. This study also aims to identify how participant's expectations for the process of counseling services are influenced by their generation.

### **WHAT WILL YOU BE ASKED TO DO IN THIS RESEARCH STUDY, AND HOW LONG WILL IT TAKE?**

You will be asked to answer questions in an interview format while being audio recorded on a virtual video conferencing platform. These questions will include demographic information. The interview will take about 90 minutes. After the interview has been completed, transcribed, and initially analyzed, you will be sent an email (at your university email address) with an initial analysis of the codes and categories with quotes from your interview. You will be asked to provide feedback on this initial analysis. If I do not hear from you within seven (7) days past the date of the email I will be under the assumption that you do not have any feedback to provide. If you do provide feedback regarding your interview data, I will incorporate it as I see fit. Reading and responding to this email will take about 30 minutes.

### **ARE THERE ANY RISKS TO BEING IN THIS RESEARCH STUDY?**

- The risk is not expected to be more than you would have in daily life. Some questions may make you uncomfortable. You can refuse to answer any questions that you don't want to answer.
- If you want to talk to someone because this research made you feel upset, the researchers can give you information about people who may be able to help you.

### **ARE THERE ANY BENEFITS FROM BEING IN THIS RESEARCH STUDY?**

You will probably not get any benefit because of being in this study. But, being in this study may help college mental health counselors understand what expectations Generation Z college students bring to mental health counseling services and how to effectively build the therapeutic relationship with those students.

### **WHAT WILL YOU GET BECAUSE OF BEING IN THIS RESEARCH STUDY?**

You will be paid in the form of a \$10 Amazon gift card as a thank you for being in the study. The virtual Amazon gift card will be emailed to your university email address after the interview.

### **DO YOU HAVE CHOICES ABOUT TAKING PART IN THIS RESEARCH STUDY?**

If you do not want to take part in this research study you do not have to participate. This will not impact your services at CAPS.

### **HOW WILL YOUR RESEARCH INFORMATION BE KEPT CONFIDENTIAL?**

Information about you will be private by being kept on a password-protected computer. The screening questionnaire and demographic information will be stored on Qualtrics, which is a research data gathering website. I will be the only person to have access to that information when

I log into my Qualtrics account. The printed transcript of your interview will be kept in a locked filing cabinet in my home office. A list of pseudonyms and names will be kept in a separate location from the interviews. You will choose a pseudonym for your interview so that your real name will not be identifiable on your interview. After interviews are transcribed they will be deleted from the Zoom™ through TAO website. No CAPS staff have access to demographic and interview data. After the study has been completed and I have defended my dissertation, I will destroy all screening questionnaires, demographic sheets, and interview transcripts by shredding them. The data from this research study will be published; but you will not be identified by name.

Agents of the University of Cincinnati may inspect study records for audit or quality assurance purposes. Your identity and information will be kept confidential unless the authorities have to be notified about abuse or immediate harm that may come to you or others.

### **WHAT ARE YOUR LEGAL RIGHTS IN THIS RESEARCH STUDY?**

Nothing in this consent form waives any legal rights you may have. This consent form also does not release the investigator, institution, or its agents from liability for negligence.

### **WHAT IF YOU HAVE QUESTIONS ABOUT THIS RESEARCH STUDY?**

If you have any questions or concerns about this research, you may contact Julie Lineburgh at her Google Voice Number (513) 549-7822, Dr. Jason McGlothlin at (330) 672-0716, or Dr. Lynne Guillot Miller at (330) 672-0697. This project has been approved by the Kent State University and University of Cincinnati Institutional Review Boards. If you have any questions about your rights as a research participant or complaints about the research, you may call the Kent State University IRB at 330-672-2704.

The UC Institutional Review Board reviews all research projects that involve human participants to be sure the rights and welfare of participants are protected.

If you have questions about your rights as a participant, complaints and/or suggestions about the study, you may contact the UC IRB at (513) 558-5259. Or, you may call the UC Research Compliance Hotline at (800) 889-1547, or email the IRB office at [irb@ucmail.uc.edu](mailto:irb@ucmail.uc.edu).

### **DO YOU HAVE TO TAKE PART IN THIS RESEARCH STUDY?**

No one has to be in this research study. Refusing to take part will NOT cause any penalty or loss of benefits that you would otherwise have.

You may skip any questions that you don't want to answer.

You may start and then change your mind and stop at any time. To stop being in the study, you should contact Julie Lineburgh at her Google Voice number (513) 549-7822. If you call or text

after 5 pm Monday through Friday or on Saturday or Sunday, your call/text may be responded to the next business day.

**Agreement:**

I attest that I am at least 18 years of age. I have read this information and have received answers to any questions I asked. I give my consent to participate in this research study. I will receive a copy of this signed and dated consent form to keep.

Participant Name (please print) \_\_\_\_\_

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

**APPENDIX H**  
**DEMOGRAPHIC INFORMATION SHEET**

**Appendix H**  
**Demographic Information Sheet**

1. How old are you?
2. How do you identify your gender?
3. What is your race?
4. What is your ethnicity?
5. Are you enrolled in an undergraduate or graduate program?
6. What pseudonym would you like to use for your interview?



**APPENDIX I**  
**INTERVIEW QUESTIONS**

## **Appendix I**

### **Interview Questions**

Introduction: Those who were born between the years of 1995 and 2010 are considered to be part of Generation Z. Since you were born in \_\_\_\_\_ (year of participants birth), you fit into this Generation Z classification.

1. What do you think counseling will be like from start to finish?
2. How long do you think counseling will last?
3. What do you perceive your role in counseling to be?
4. How do you perceive the counselor's role in counseling?
5. How might the relationship between you and your counselor be beneficial?
6. How does technology and social media play a role in your life?
7. How would you describe your generation?
8. How are you similar and different from Generation Z?
9. Researchers describe Generation Z as being more aware of others, having a thoughtful worldview, being responsible and pragmatic, and consider themselves realistic optimists.
10. Researchers have also described Generation Z as expecting instant answers to every question, unable to take on adult responsibilities, and overly sensitive.
11. How does being a part of Generation Z play a role with your expectations of going to mental health counseling?

## **APPENDIX J**

### **MEMBER CHECKING EMAIL SCRIPT**

## **Appendix J**

### **Member Checking Email Script**

Hello \_\_\_\_\_ (name of participant),

On (date of interview) we conducted an interview for a research study about process expectations of Generation Z college students. As we reviewed in the informed consent, I said I would provide you with an opportunity to review the interview codes and categories from our conversation. I have attached the provisional report of interview codes and categories for your interview, along with quotes from your interview that are reflective of the codes and categories I developed. I would like to request that you read through the interpretation of codes and categories from your interview and provide feedback that tells me whether or not my analysis of codes and categories is consistent with your beliefs. If you feel that my analysis of codes and categories is consistent with your beliefs you can provide feedback that you approve. Please respond within one week from the date of this email.

If you believe that the interpretation of codes and categories from your interview are not consistent with your beliefs and/or you do not approve of the codes and categories, please respond within one week from the date of this email. If I do not hear from you by (date of one week from email), I will be under the impression that you believe that the interpretation of codes and categories of your interview are consistent with your beliefs. Thank you again for your participation. Please let me know if you have any questions. I look forward to hearing back from you.

Sincerely,

Julie Lineburgh, M.Ed., LPCC-S

## **APPENDIX K**

### **INTERVIEW CODES**

## Appendix K

### Interview Codes

#### **Theme 1: Counselors Build a Relationship to Provide Personalized Feedback**

- Go from broad to narrow
- Informational session
- Asks questions to get to know me
- Gives support to do things that are important and/or difficult
- Thoughtful responses
- Encourage and motivate the client
- Improves or resolve client's concerns
- Identifies the problem
- Help client understand what's going on
- Will get to know client and give individualized advice
- Needs to be understood before given advice
- Understand that every case is different and everyone is different
- People experience the same concerns differently
- Individualizing suggestions to obtain the best results
- Gives treatment recommendations after understanding the presenting concern
- Individualized care
- Neutral third party
- Someone I don't interact with in day-to-day life
- Distanced from day-to-day life

#### **Theme 2: Counselor and Client Play Collaborative Roles in the Therapeutic Relationship**

- Facilitation: A path, discussion, or change
- Keeping the client on track
- Provides direction
- Provide information on what to expect in counseling
- Asks clients to complete tasks in between sessions
- Gives strategies
- Different perspective
- The counselor would figure out what I need help with
- Review what they talked about in previous sessions and recap what they will talk about in the next session (counselor)
- Do more of the talking (client)
- Willing to participate in the discussion with the counselor
- Follow recommendations from the counselor
- Contribute things to discuss

**APPENDIX L**  
**INTERVIEW CATEGORIES**

## **Appendix L**

### **Interview Categories**

#### **Process of Counseling**

- First session is where the counselor gets to know the client
- Introduction to counseling from counselor
- Talk about and identify concerns in the first session

#### **Counselor Role**

- Provides treatment that is individualized
- Facilitator/Directive
- Provides support around client concerns
- Rapport/Build Relationships

#### **Client Role**

- Be honest and open
- Active
- Discomfort/Growth

#### **Counseling Relationship**

- Rapport/Building the counseling relationship
- Third party/distanced
- Ruptures/unhelpful relationship



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