

Tele-Counselling vs Face-to-Face Counselling for Client Satisfaction among Clients with Relationship Issues

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Tele-counselling in the counselling field is not new; developments from decades ago made it feasible. But before pandemic times the use of tele mental health services was limited. When compared to face-to-face counselling, there are still concerns regarding how satisfied clients are with the tele-counselling services. The objective of the study is to compare the tele-counselling and face-to-face counselling for client satisfaction among clients with relationship issues. In the study, 120 people with relationship issues were involved; 60 (30 male and 30 female) of them received tele-counselling, and the remaining 60 (30 male and 30 female) received in-person therapy. The client satisfaction inventory- short form (CSI-SF) by Hudson was used on the clients at the end of the counselling session. A two-group comparative study design was used. We used the independent t-test for our statistical analysis.

Keywords: Client Satisfaction, Relationship issues, Counselling, Tele-counselling, Face-to face counselling.

Counselling is the procedure by which professional counsellors offer support based on psychological concepts. The goal of this encouraging relationship is to help clients transform their lives for the better. (Sharf, 2000) Internet makes it possible to use a variety of e-counselling modalities. There are two types of e-counselling modalities: synchronous and asynchronous. The hallmark of synchronous chat-based e-counselling is synchronous counselling sessions, where the client and counsellor meet and converse online at the same time. An email-based counselling session is referred to as an asynchronous mail mode of e-counselling. The client may encounter a delay in receiving feedback or a response. (Glasheen, 2017) For several reasons, including confidentiality and a sense of restraint when handling sensitive issues, clients prefer to employ tele-counselling. These elements may encourage some clients to attempt tele-counselling for the first time.

Tele-counselling allows counsellors to interact with their clients during sessions without being constrained by geographical proximity. It is currently a medium for mental health services as a result. There are numerous benefits to using telehealth services for mental health, even if the pandemic was the driving force behind their rise to prominence in healthcare delivery. Patients who live in remote or rural locations and do not have access to in-person counseling, or both, may find telehealth to be a good alternative. Relationships, whether romantic or platonic, can provide us with a lot of happiness and pleasure. Strong bonds with our friends, family, and even co-workers enable us to be at our happiest, healthiest, and most productive. For many, these relationships are an invaluable source of advice, love, support, and direction. Relationships have even been shown to have a significant impact on our well-being, with data showing that they can lower our rates of anxiety and sadness, boost

our sense of empathy and self-worth, and even build trust. A strong, fulfilling relationship could prolong your life. Our biggest relationships may occasionally fall apart for a variety of reasons.

But it can be difficult to lose this connection; we may feel disappointed, abandoned, or even unsure of what went wrong. We may decide to attend individual or couple's relationship counselling. It provides a secure space for us to talk about our needs, anxieties, and desires in a relationship. Many relationships can benefit from counselling, especially in situations when there isn't a clear issue or challenge. Speaking with a relationship counsellor can help us learn more about one another, oneself, marriage, and friends. In addition to receiving assistance and direction that will fortify and enhance the relationship, you can discover more about one another's requirements. While they may be considering ways to improve counselling, counsellors may be worried about their clients' contentment. As professionals, we want to help our clients make decisions in life that will raise their standard of living in the long run. A desired objective for most medical and mental health providers is still client satisfaction. Clients may be pleased with our services if the counselling experience meets their expectations and aligns with their values. There is a link between client expectations for counselling and satisfaction, thus it is critical to recognize and discuss these needs and expectations from the beginning of the therapeutic relationship.

This process should be a frequent component of the intake and assessment process. Some clients could have unrealistic expectations when they first start counselling. It's likely that they have never sought counselling before or that the results of their previous sessions were not what was anticipated. Certain clients may have formed preconceived conceptions about counselling

as a result of watching films or TV series. Some clients might have heard stories from friends or family about their experiences with counselling. Providing a thorough explanation of what the client can expect from the therapeutic alliance might help a counsellor better understand their client's expectations and treatment outcomes. You can begin by going over the client's stated requirements and goals to set expectations for the therapeutic process.

Zainudin et al. (2021) Using the client's degree of satisfaction and its implications for counselling practices during the outbreak, this study attempts to investigate the efficacy of these two counselling approaches. The Client's Satisfaction Inventory Short-Form questionnaire was used to collect quantitative data. The study involved 60 participants who were divided into two groups: the control group, which used in-person counselling, and the experimental group, which used online counselling. This result suggests that clients who receive e-counselling are more satisfied than those who receive face-to-face counselling.

Irvine et al. (2020) discovered the comparative empirical research on interactional differences between in-person and telephone psychiatric counseling. To determine what is known experimentally regarding the interactional differences between face-to-face and telephone psychotherapy interactions, 15 research were carefully examined. The findings showed that there was minimal variation throughout counselling modalities in terms of therapeutic partnership, disclosure, empathy, attentiveness, or involvement. The claim that the telephone negatively impacts the interactional aspects of psychological counselling is not supported by any evidence.

Dami, Z.A., & Waluwandja, P.A. (2019) state that the goal of this study is to compare the satisfaction levels of those who have

experienced cyberbullying with those who have subsequently received in-person counseling. The research methodology employed is a quasi-experimental non-equivalent control group pretest/posttest design. Quantitative information gathered through the use of the Revised Cyberbullying Inventory (RCBI) and the Client Satisfaction Instrument (CSI). 64 respondents participated in the study. The study's findings indicate that victims of cyberbullying who receive counselling services report greater levels of satisfaction from the cyber-counselling technique than from face-to-face counselling.

Purpose

To compare the client satisfaction in the cases of relationship issues with both mode of counselling tele-counselling and face-to-face counselling' among male and females.

Objective

- To compare the client satisfaction among clients with relationship issues who received tele-counselling and face-to-face counselling.
- To compare the client satisfaction among male clients with relationship issues who received tele-counselling and face to-face counselling.

- To compare the client satisfaction among female clients with relationship issues who received tele-counselling and face to-face counselling.

Hypotheses

- There will be no significant difference in' client satisfaction in tele-counselling and face-to-face counselling among clients with relationship issues.
- There will be a no significant difference in client satisfaction in tele-counselling and, face-to-face counselling among male and females.

Method

Sample

120 samples were selected of which 60 (30 male, 30 female) cases received tele-counselling and 60 (30 male and 30 female) cases received face-to-face counselling. for relationship issues.

Instruments

The client satisfaction inventory-short form (CSI-SF): The client satisfaction inventory- short form (CSI-SF) developed by Steven L. McMurtry and Walter W. Hudson (1994).It is 9-item short form inventory. It is a 7-point scale.

Result

Table 1. Comparison of mean scores of face-to-face counselling and tele-counselling

Mode of counselling	N	Mean	Std. Deviation	df	t	Significance Level
Face-to-Face Counselling	60	51.15	8.66	118	1.48	NS
Tele-Counselling	60	48.70	9.43			

Assuming equal variances, the t-test yields a p-value of 0.14 and a t-statistic of 1.48 with 118 degrees of freedom. This suggests that

the means of the "face-to-face counseling" and "tele-counselling" groups do not differ significantly, assuming equal variances.

Table 2. Comparison of mean scores of face-to-face counselling and tele-counselling among males

	Mode of counselling	N	Mean	Std. Deviation	df	t	Significance Level
Male	Face-to-Face Counselling	30	51.47	9.58	58	1.03	NS
	Tele-Counselling	30	48.93	9.34			

A t-statistic of 1.03 with 58 degrees of freedom and a p-value of .30 is obtained from the t-test under the assumption of equal variances. This implies that assuming equal variances, there is no significant difference between the means of the two groups.”

Table 3. Comparison of mean scores of face-to-face counselling and tele-counselling among females

	Mode of counselling	N	Mean	Std. Deviation	df	t	Significance Level
Female	Face-to-Face Counselling	30	50.83	7.78	58	1.04	NS
	Tele-Counselling	30	48.47	9.68			

The t-test, assuming equal variances, yields a t-statistic of 1.04 with 58 degrees of freedom. This suggests that, on the assumption of equal variances, there is not a significant variance between the means of tele-counselling and in-person counseling among females.

Discussion

The t-test results indicate that with a t-statistic of 1.48 and 118 degrees of freedom, the p-value associated with the test is 0.14 when assuming equal variances between the “face-to-face counselling” and “tele-counselling” groups. According to this p-value, the means of the two counseling modes do not differ significantly. In simpler terms, the data does not provide enough evidence to conclude that the mean scores for face-to-face counselling and tele-counselling are different. Therefore, under the assumption of equal variances, there is no significant distinction in effectiveness between these two counselling methods. The t-test result indicates that with a t-statistic of 1.03 and 58 degrees of freedom, the p-value associated with the test is 0.30 when assuming equal variances between the two

groups of males. According to this p-value, the means of the two groups do not differ significantly. In other words, there is not enough evidence to conclude that the mean scores for the two groups of males are different. Therefore, assuming equal variances, there is no significant distinction between the means of the two groups of males. Assuming equal variances between the two groups (face-to-face counselling’ and tele-counselling) among females, the t-test result of 1.04 with 58 degrees of freedom suggests that there is no statistically significant difference between the means of the two counselling methods. This means that based on the data available and under the assumption of equal variances, we do not have enough evidence to conclude that one method of counselling is more effective than the other for females.

Limitation

Addressing the limitations through further research and methodological refinement could enhance the validity and reliability of conclusions regarding the effectiveness of counselling methods and group differences.

Conclusion

According to the findings, there is insufficient evidence in the data to draw the conclusion that there is a substantial difference in the methods of telecounselling and in-person counseling for females. Therefore, under this assumption, there is no significant distinction in effectiveness between these two counselling methods for females. There is not enough evidence to conclude that the mean scores for the two groups of males are different. The means of the two male groups do not significantly differ from one another, assuming equal variances. The observed differences are not statistically significant in all situations since the p-values are higher than the usual significance level of 0.05. Therefore, based on the provided data and assumptions, there is no strong evidence to suggest a meaningful difference in effectiveness between the compared tele-counselling and face-to-face counselling or male and females.

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