

# CLIENT'S PERSONAL/SOCIAL SATISFACTION WITH COUNSELING ASSESSMENT\*

Client name \_\_\_\_\_ Counselor name \_\_\_\_\_

Client ID number \_\_\_\_\_ Counselor ID number \_\_\_\_\_

Date \_\_\_\_\_

**Directions:** Please read each of the following questions carefully and **circle** the response for each one that most nearly reflects your honest opinion.

1. How much help did you get with your concern?
  - 1 None
  - 2 A little
  - 3 Some
  - 4 Much
  - 5 All I needed
  
2. How satisfied are you with the relationship with your counselor?
  - 1 Not at all
  - 2 Slightly
  - 3 Some
  - 4 Pretty well
  - 5 Completely
  
3. How much help have you received with concerns other than your original reasons for entering counseling?
  - 1 None
  - 2 A little
  - 3 Some
  - 4 Much
  - 5 All I needed
  
4. How do you feel now compared to when you first came to counseling?
  - 1 Much worse
  - 2 A little worse
  - 3 The same
  - 4 Quite a bit better
  - 5 Greatly improved
  
5. How much has counseling helped you in understanding yourself?
  - 1 None
  - 2 A little
  - 3 Moderately
  - 4 Quite a bit
  - 5 Greatly
  
6. How willing would you be to return to your counselor if you wanted help with another concern?
  - 1 Unwilling
  - 2 Reluctant
  - 3 Slightly inclined
  - 4 Moderately willing
  - 5 Very willing

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\* Used by permission from Dr. Roger Hutchinson, Professor of Psychology-Counseling and Director, Counseling Practicum Clinic, Department of Counseling Psychology and Guidance Services, Ball State University. This form originally was printed in Chapter 10 of the *Practicum Manual for Counseling and Psychology* by K. Dimick and F. Krause, Accelerated Development, Muncie, IN, 1980.

7. How willing would you be to recommend your counselor to one of your friends?
  - 1 Unwilling
  - 2 Reluctant
  - 3 Slightly inclined
  - 4 Moderately willing
  - 5 Very willing
  
8. How much did your counselor differ from what you might consider to be an ideal counselor?
  - 1 Greatly
  - 2 In many ways
  - 3 Somewhat
  - 4 A little
  - 5 Not at all
  
9. Based on your experience at this clinic, how competent did you judge the counselors to be?
  - 1 Incompetent
  - 2 Little competence
  - 3 Moderately competent
  - 4 Competent
  - 5 Highly competent
  
10. To what extent could the relationship you had with your counselor have been improved?
  - 1 Greatly
  - 2 Quite a bit
  - 3 Moderately
  - 4 Slightly
  - 5 Not at all
  
11. How sensitive was your counselor to the way you felt?
  - 1 Insensitive
  - 2 Slightly insensitive
  - 3 Sometimes sensitive
  - 4 Usually sensitive
  - 5 Very sensitive
  
12. To what extent do you still lack self-understanding about things that trouble you?
  - 1 Great
  - 2 Quite a bit
  - 3 Moderate
  - 4 Slight
  - 5 Not at all
  
13. If counseling were available only on a fee-paying basis, how likely would you be to return if you had other concerns?
  - 1 I would not return
  - 2 It would be unlikely for me to return
  - 3 I might return
  - 4 I probably would return
  - 5 I would return
  
14. In general, how satisfied are you with your counseling experience?
  - 1 Not satisfied
  - 2 Moderately dissatisfied
  - 3 Slightly satisfied
  - 4 Moderately satisfied
  - 5 Completely satisfied
  
15. What was the technique most used by your counselor?
  - 1 Left it to me
  - 2 Interested listener
  - 3 Gave opinions and suggestions
  - 4 Gave interpretations
  - 5 Counselor was vague and unclear

16. Give your reactions while being counseled.

1 Found it unpleasant and  
upsetting at times

2 Found it very  
interesting, enjoyed it

3 Got angry often at my  
counselor

4 Often felt discouraged  
at lack of progress

5 Felt relaxed and looked  
forward to sessions

6 Felt that I could not get  
my story across, that I  
couldn't get the counselor  
to understand me